

# Audit & Governance Committee Agenda



To: Dr Olu Olasode (Independent Chair)  
Councillor Matt Griffiths (Vice-Chair)  
Councillors Claire Bonham, Simon Brew, Endri Llabuti, Enid Mollyneaux,  
Nikhil Sherine Thampi and Sean Fitzsimons

Reserve Members: Kola Agboola, Alisa Flemming, Simon Fox,  
Mark Johnson, Stella Nabukeera and Helen Redfern

A meeting of the **Audit & Governance Committee** which you are hereby invited to attend, will be held **Thursday, 1 February 2024 at 6.30 pm. Council Chamber, Town Hall, Katherine Street, Croydon, CR0 1NX.**

Katherine Kerswell Chief Executive  
London Borough of Croydon  
Bernard Weatherill House  
8 Mint Walk, Croydon CR0 1EA

Hannah Cretney, Democratic Services  
[hannah.cretney2@croydon.gov.uk](mailto:hannah.cretney2@croydon.gov.uk)  
[www.croydon.gov.uk/meetings](http://www.croydon.gov.uk/meetings)

Members of the public are welcome to attend this meeting.

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If you require any assistance, please contact Hannah Cretney, Democratic Services as detailed above

## **AGENDA**

**1. Apologies for Absence**

To receive any apologies for absence from any members of the Committee.

**2. Disclosure of Interests**

Members are invited to declare any disclosable pecuniary interests (DPIs) they may have in relation to any item(s) of business on today's agenda.

**3. Minutes of the Previous Meeting (To Follow)**

To approve the minutes of the meeting held on 30 November 2023 as an accurate record of the proceedings.

**4. Urgent Business (if any)**

To receive notice of any business not on the agenda which in the opinion of the Chair, by reason of special circumstances, be considered as a matter of urgency.

**5. Audit and Governance Committee Action Log (Pages 5 - 8)**

To note the Audit & Governance Committee Action Log.

**6. Committee Work Programme and Assurance Mapping Document (Pages 9 - 20)**

To note the Audit & Governance Committee Work Programme for the remainder of the municipal year alongside the Committee Assurance Mapping Document.

**7. Annual Governance Statement (Update on Action Plan 2022/23) (Pages 21 - 38)**

For the year 2022/23, the Council through its Annual Governance Statement, conducted a review of the effectiveness of its systems of internal control and developed an Action Plan to address the improvements required. This report provides an update on the progress with the Action Plan with a particular focus on financial management, information management, procurement and contract management and the recommendations in the Report in the Public Interest on the refurbishment of Fairfield Hall.

The Committee is asked to consider and comment on the Annual Government Statement (AGS) 2022/23 Action Plan Update which is attached as Appendix 1.

**8. Risk Register Entry 'Deep Dive' (Pages 39 - 42)**

The presentation updates the Audit & Governance Committee Members on progress against a selected entry from the corporate risk register (the register).

The Committee is asked to:

Note the contents of the risk presentation attached in Appendix 1

**9. Dedicated Schools Grant (DSG) Deficit Management Plan (To Follow)**

**10. Quarterly Whistleblowing Update (Pages 43 - 64)**

The Council's Whistleblowing Policy provides for six monthly reports to the Committee on whistleblowing referral received. This report provides an update on disclosures for the period January 2023 to December 2024.

The Committee is asked to note the whistleblowing disclosures and the outcomes.

**Audit and Governance Committee Action Log**

<b>Date of meeting</b>	<b>Action</b>	<b>Minute ref.</b>	<b>Deadline</b>	<b>Progress</b>
19 January 2023	Benchmarking data on Whistleblowing incidences at other Councils to be included in future reporting.	29/22	February 2024 meeting	No significant Whistleblowing disclosures within the Council. Therefore, update deferred to February 2024 meeting.
02 February 2023	Previously shared dashboard style reporting illustrating the movement of risks to be brought to Committee.	34/22	April 2024 meeting	Updated Risk Management software being launched 19/10/23. This will enable dashboard reporting to be included in next risk report.
02 March 2023	Prioritisation of recommendations to be included in future opening the books reporting and action tracker.	40/22	March 2024 meeting	Prioritisation to undertaken and included in next report.
02 March 2023	Committee to receive quarterly MTFs tracker to monitor budget variances.	41/22	Quarterly	Link to future Financial Performance Reports to be included in the Committee Action Log.  <a href="#">23-24 Period 7 Financial Performance Reports</a>
02 March 2023	Development of process to involve the Cabinet Member for Finance in resolving recurrent internal audit actions whilst ensuring visibility to the Committee.	42/22	Ongoing	Amending audit protocol to include escalation to KK for lack of responses to reports and to later be expanded to include follow ups. Once in place further escalations are being considered.

20 April 2023	Report on 15% Council Tax VFM increase to External Auditor	49/22	June 2024	Draft to Committee to confirm format, expected at February 2024 Committee meeting.
20 April 2023	Interim Auditors Reports Recommendations AGS reporting to include a breakdown of target setting and progress.	52/22	February 2024 meeting	To be included in next AGS update in February 2024.
20 April 2023	Risk Management Reporting to include risk movement and time spent as red. Ensure future control dates are not in the past.	53/22	April 2024 meeting	Updated Risk Management software launched 19/10/23. This will enable dashboard reporting to be included in next risk report (April 2024).
20 July 2023	Future Energy Recharges reporting to include monetary values.	7/22	March 2024 meeting	
21 September 2023	Update on Cultural Transformation Programme: The Committee requested future reporting on implementation of the action plan, governance and benchmarking of the people and workforce.	17/22	March 2024 meeting	Included in Committee Work Programme for March 2024 meeting.
19 October 2023	AGS: The Committee requested for the Information Management actions to be updated in the 22/23 Action Plan and for any past dated deadlines to be updated.	27/22	February 2024 meeting	Completed. See entry in AGS Action Plan Update.
19 October 2023	AGS: Work to identify overlap between the AGS Action Plan and the IAP Exit Strategy actions would be undertaken. IAP Exit Strategy actions will be included in future AGS Action Plan update reports.	27/22	February 2024 meeting	Completed. There is an overlap which needs to be managed through the reporting arrangements for the AGS and the Exit Strategy.
19 October 2023	Risk Reporting: Next risk report to have all control measure targets updated to future dates.	28/22	April 2024 meeting	
19 October 2023	Oracle Improvement Programme: Future reporting to include user and cultural adoption issues and any licensing costs and/or risk implications.	29/22	April 2024 meeting	Added to work programme to coincide with Cabinet report.

19 October 2023	Oracle Improvement Programme: The Committee requested a review of implementation of all other software systems within the council, to provide assurance on the Value for Money and effective use all major software systems utilised to deliver internal and external services.	29/22	March 2024 meeting	Core Business Systems Assurance Review Update on Committee work programme for March meeting.
19 October 2023	Anti-Fraud Update: The Committee requested updates on Anti-Fraud engagement with Registered Social Landlords.	30/22	April 2024 meeting	
30 November 2023	Committee Assurance Mapping Document: Requested for the frequency of reports received by the Committee to be included.		February 2024 meeting	Completed. Document updated to include frequency of reports received.
30 November 2023	Risk Deep Dive: Gas Safety Contractor, Committee requested a detailed update be included in the March 2024 Risk Report.		March 2024 meeting	

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Audit & Governance Committee Work Programme 23-24		
14-Mar-24	Financial Statements / Accounts 2019/20 - External Audit Findings Report	Allister Bannin, Director of Finance (Deputy S151) & Sarah Ironmonger, Grant Thorton
	Financial Statements / Accounts 2020/21 - External Audit Plan	Paul Dossett, Grant Thorton
	Anti Fraud & Corruption Strategy	Malcolm Davies, Head of Antifraud, Risk & Insurance & Michael O'Reilly (Lambeth)
	Core Business Systems Assurance Review Update	Jon Martin, Digital Support & Assurance Lead & Paul Golland, Interim Chief Digital Officer & Director of Resident Access
	Council Assurance Framework	Stephen Lawrence-Orumwense, MO
	People & Cultural Transformation Update	Elaine Jackson, Interim Assisant Chief Executive
11-Apr-24	Corporate Risk Register EoY report	Malcolm Davies, Head of Antifraud, Risk & Insurance
	Anti Fraud Report EoY report	Malcolm Davies, Head of Antifraud, Risk & Insurance
	Oracle Improvement Programme Update	Jane West, S151 Officer & Mark Moody, Programme Lead
	Revenue and Capital Monitoring Improvements	Allister Bannin, Director of Finance (Deputy S151)
	2024 - 2025 Committee Work Programme	Hannah Cretney, DSGO
July 2023 - Agreed Officers to provide updates to Committee on Fairfield Halls as information becomes available.		

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## **Audit and Governance Committee**

(Membership 9: one independent, suitably qualified Chair who may not be a Member or officer of the Council and one independent, suitably qualified co-optee)

### **Purpose**

The Audit and Governance Committee provides an independent and high level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards. The Committee's purpose is to:

1. provide independent assurance to the Council of the adequacy of the risk management framework and the internal control environment;
2. oversee internal and external audit, helping to ensure that efficient and effective assurance arrangements are in place;
3. provide independent review of the Council's governance, risk management and control frameworks
4. oversee the financial reporting and annual governance processes and
5. provide independent scrutiny of the Council's financial and non-financial performance to the extent that it affects the Council's exposure to risk and weakens the control environment.

### **Governance, risk and control**

1. To monitor the effective development and operation of the Council's risk management arrangements, the control environment and associated anti-fraud, whistleblowing and anti-corruption, strategies, actions and resources. To consider a quarterly report on whistleblowing activity in the Council..

#### **Sources of Assurance:**

Risk:- Regular risk updates. *The Committee should be able to sense check these updates using deep dives, the Annual Governance Statement, Internal Audit reports and their own knowledge of the Council and economy.*

Anti-Fraud: Regular anti-fraud updates and approval of the annual anti-fraud proactive plan.

Whistleblowing: The quarterly report on whistleblowing.

2. To monitor progress in addressing risk-related issues reported to the committee. To consider reports on the effectiveness of internal controls and monitor the implementation of agreed actions.

**Sources of Assurance:**

Risk:- Regular risk updates. *The Committee should be able to compare successive reports and the actual and proposed controls to monitor progress.*

Internal Control effectiveness: Regular Internal Audit updates. *The results of audit work will provide the Committee assurance over this, as Internal Audits seeks assurance over the design and effectiveness of controls, as well as compliance.*

3. To consider the Council's framework of assurance, including the Statement on Internal Control, and ensure that it adequately addresses the risks and priorities of the Council. To review the Council's corporate governance arrangements against the good governance framework and consider the local code of governance. To review the Annual Governance Statement prior to approval and consider whether it properly reflects the risk environment and supporting assurances.

**Sources of Assurance:**

Framework of Assurance: Provided as part of the preparatory documents for the Annual Governance Statement process. *These documents include the governance framework, Code of Governance and Director Assurance Statements.*

Statement of Internal Control: Annual Governance Statement review. *The AGS superseded the SIC. The Committee will compare the AGS against the annual HoIA (Head of Internal Audit) report and knowledge which they have gleaned from risk and anti-fraud updates.*

4. To review the governance and assurance arrangements for significant partnerships or collaborations. To ensure appropriate arrangements are in place in relation to any subsidiary bodies controlled by the Council.

**Sources of Assurance:**

Significant partnerships/collaborations/subsidiary *The Committee can gain assurance from a variety of sources, including risk register reviews, deep dives, Internal Audit work, External Audit reports and the Annual Governance Statement, but there is no one document/report to the Committee on this.*

*Plus Scrutiny Committee minutes.*

5. To consider the effectiveness of the Council's policies, standards and processes for transparency, ensuring that they meet Government requirements and take into account best practice.

**Sources of Assurance:**

Council policies, standards and processes for transparency: I am not aware of any *specific document/report to the Committee on this, although some audits will include this as a focus. There is also the Committee's work with Scrutiny.*

*Plus Scrutiny Committee minutes*

**Internal audit**

6. To consider the Council's arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.

**Sources of Assurance:**

Value for Money: Both Internal and External Audit reports. *The Committee will gain assurance from audit reports, where vfm issues are not reported, as well as the external auditors vfm opinion.*

*Additional reports on culture and achieving best value*

7. To approve the internal audit charter.

**Sources of Assurance:**

Internal Audit charter: This is presented to the Committee Annually, usually in March every year.

8. To review proposals made in relation to the appointment of external providers of internal audit services and to make recommendations. To consider any impairments to independence or objectivity arising from additional roles or responsibilities outside of internal auditing of the head of internal audit. To periodically review safeguards to limit such impairments.

**Sources of Assurance:**

Appointment of external providers: This is not due, but will be reported when due.

Independence: Internal Audit strategy, Internal Audit Charter and the Head of Internal Audit Annual report. *The Committee will agree the Strategy and Charter looking forwards and gain assurance looking backwards from the annual Head of Internal Audit report, which is required to report any conflicts etc.*

9. To review (but not direct) internal audit's risk-based strategy, plan and resource requirements, the approach to using other sources of assurance and any work required to place reliance on those other sources. To approve significant interim changes to the risk-based internal audit plan and resource requirements.

**Sources of Assurance:**

Audit Plan: This is presented to the Committee Annually, usually in March every year. *The Committee will be able to assess the coverage of the annual plan, the accompanying resource requirements and the approach to using other sources of assurance. Any significant changes (which would include a significant reduction in days or other significant changes rather than the addition, deferment or omission of some audits) to the plan should be brought to the Committee, and the Annual Head of Internal Audit report will report on changes to the plan that may have occurred.*

10. To review summary internal audit reports and the main issues arising and seek assurance that action has been taken where necessary. To receive reports outlining the action taken where the head of internal audit has concluded that management has accepted a level of risk that may be unacceptable to the authority or there are concerns about progress with the implementation of agreed actions.

**Sources of Assurance:**

Internal Audit reports : Quarterly Internal Audit updates and the Annual Head of Internal Audit report. *Based on these reports, the Committee should ask management for assurance that key risks / issues are being dealt with. This should partly be reflected in the progress of action plans being cleared and partly with risks and accompanying actions on the risk register. The Council's Annual Governance Statement will also help inform action/s being taken.*

11. To receive the annual report of the Head of Internal Audit and make recommendations as appropriate to management, Cabinet and/or Full Council. To consider reports from the head of internal audit on internal audit's performance during the year, including the performance of external providers of internal audit services and make recommendations as appropriate to management, Cabinet and/or Full Council.

**Sources of Assurance:**

Internal Audit reports : Quarterly Internal Audit updates and the Annual Head of Internal Audit report.

12. To advise and recommend on effective relationships between external and internal audit, inspection agencies and other relevant bodies, and that the value of the audit process is actively promoted.

**Sources of Assurance:**

Relationships between Internal, External Audit and other bodies: No specific papers.

*The Committee should consider and, where appropriate, seek these assurances verbally when presentations are made by these respective parties.*

13. To contribute to the Quality Assurance Improvement Programme and in particular to the external quality assessment of internal audit.

**Sources of Assurance:**

External quality Assessment: Presentation of the completed EQA.

*This is a process that should occur every 5 years. The Committee (and in particular the Chair) will be asked to contribute towards this.*

14. To provide free and unfettered access to the Committee Chair for the head of internal audit, including the opportunity for a private meeting with the Committee.

**Sources of Assurance:**

Unfettered access: Bi-weekly meetings with the Chair and the Head of Internal Audit.

**External audit**

15. To consider the external auditor's annual assessment of its independence and review any issues raised by Public Sector Audit Appointments Ltd.

**Sources of Assurance:**

External Audit independence: External Audit Fee updates, interim and year end reports. Ad hoc reports by PSAA, if any.

16. To make recommendations to Council relating to the appointment of the external auditor.

**Sources of Assurance:**

External Audit appointment: Report recommending use of PSAA for External Audit appointment, which is every 5 years.

17. To consider the reports of external audit and inspection agencies and make recommendations as appropriate to management, Cabinet and/or Full Council. To review the external auditor's opinion and reports to Members, and monitor management action in response to the issues raised by external audit.

**Sources of Assurance:**

External Audit Reports: External Audit interim, year end and other ad hoc (such as RIPI) reports

Other inspection reports: Ombudsmen reports.

*I am not aware of any automatic sharing of Ofsted and other inspection agency reports.*

To comment on the scope and depth of external audit work and ensure it gives value for money.

**Sources of Assurance:**

Depth External Audit Work: External Audit interim and year end reports.

*The Committee should (in particular) review the external Auditors' best value opinion and the work to achieve this. The audit of the accounts is strongly governed by statute and external audit is subject to inspections on the quality of this work. The best value opinion is more subjective.*

*The Committee should seek to also gain assurance via the Council's S151 Officer and its Finance function.*

**Financial reporting**

18. To review the annual statement of accounts and specifically to consider whether appropriate accounting policies and the CIPFA Financial Management Code have been followed, and whether there are concerns arising from the financial statements or from the audit that need to be brought to the attention of the Council.

**Sources of Assurance:**

Annual Accounts: External Audit interim, year end and ad hoc reports, the Draft Annual Accounts.

*The Committee should seek to also gain assurance via the Council's S151 Officer and its Finance function.*

**Accountability and escalation**

19. To report to the full Council on the Committee's findings, conclusions and recommendations concerning the adequacy and effectiveness of the Council's governance, risk management and internal control frameworks, financial reporting arrangements and internal and external audit functions.
20. To make an annual report to the full Council on the Committee's performance in relation to its terms of reference and the effectiveness of the Committee in meeting its purpose.



ToR paragraph no.	Source of assurance	Frequency
1.	Risk:- Regular risk updates. <i>The Committee should be able to sense check these updates using deep dives, the Annual Governance Statement, Internal Audit reports and their own knowledge of the Council and economy.</i>	Quarterly
	Anti-Fraud: Regular anti-fraud updates and approval of the annual anti-fraud proactive plan.	Quarterly
	Whistleblowing: The quarterly report on whistleblowing.	Quarterly
2	Risk:- Regular risk updates. <i>The Committee should be able to compare successive reports and the actual and proposed controls to monitor progress.</i>	Quarterly
	Internal Control effectiveness: Regular Internal Audit updates. <i>The results of audit work will provide the Committee assurance over this, as Internal Audits seeks assurance over the design and effectiveness of controls, as well as compliance.</i>	Quarterly
3	Framework of Assurance: Provided as part of the preparatory documents for the Annual Governance Statement process. <i>These documents include the governance framework, Code of Governance and Director Assurance Statements.</i>	Annually
	Statement of Internal Control: Annual Governance Statement review. <i>The AGS superseded the SIC. The Committee will compare the AGS against the annual HoIA (Head of Internal Audit) report and knowledge which they have gleaned from risk and anti-fraud updates.</i>	Annually
4	Significant partnerships/collaborations/subsidiary <i>The Committee can gain assurance from a variety of sources, including risk register reviews, deep dives, Internal Audit work, External Audit reports and the Annual Governance Statement, but there is no one document/report to the Committee on this. Plus Scrutiny Committee minutes.</i>	Ad hoc
5	Council policies, standards and processes for transparency: I am not aware of any <i>specific document/report to the Committee on this, although some audits will include this as a focus. There is also the Committee's work with Scrutiny. Plus Scrutiny Committee minutes</i>	N/a

6	Value for Money: Both Internal and External Audit reports. <i>The Committee will gain assurance from audit reports, where vfm issues are not reported, as well as the external auditors vfm opinion. Additional reports on culture and achieving best value</i>	Internal Audit Reports – ad hoc External Audit Reports - Annually
7	Internal Audit charter: This is presented to the Committee Annually, usually in March every year.	Annually
8	Appointment of external providers: This is not due, but will be reported when due.	Every 5 years
	Independence: Internal Audit strategy, Internal Audit Charter and the Head of Internal Audit Annual report. <i>The Committee will agree the Strategy and Charter looking forwards and gain assurance looking backwards from the annual Head of Internal Audit report, which is required to report any conflicts etc.</i>	Annually
9	Audit Plan: This is presented to the Committee Annually, usually in March every year. <i>The Committee will be able to assess the coverage of the annual plan, the accompanying resource requirements and the approach to using other sources of assurance. Any significant changes (which would include a significant reduction in days or other significant changes rather than the addition, deferment or omission of some audits) to the plan should be brought to the Committee, and the Annual Head of Internal Audit report will report on changes to the plan that may have occurred.</i>	Annually
10	Internal Audit update reports : Quarterly Internal Audit updates and the Annual Head of Internal Audit report. <i>Based on these reports, the Committee should ask management for assurance that key risks / issues are being dealt with. This should partly be reflected in the progress of action plans being cleared and partly with risks and accompanying actions on the risk register. The Council's Annual Governance Statement will also help inform action/s being taken.</i>	Quarterly
11	Internal Audit reports : Quarterly Internal Audit updates and the Annual Head of Internal Audit report.	Quarterly
12	Relationships between Internal, External Audit and other bodies: No specific papers. <i>The Committee should consider and, where appropriate, seek these assurances verbally when presentations are made by these respective parties.</i>	N/a
13	External quality Assessment: Presentation of the completed EQA. <i>This is a process that should occur every 5 years. The Committee (and in particular the Chair) will be asked to contribute towards this.</i>	Every 5 years

14	Unfettered access: Bi-weekly meetings with the Chair and the Head of Internal Audit.	Bi-weekly
15	External Audit independence: External Audit Fee updates, interim and year end reports. Ad hoc reports by PSAA, if any.	Each is once a year.
16	External Audit appointment: Report recommending use of PSAA for External Audit appointment, which is every 5 years.	Every 5 years
17	External Audit Reports: External Audit interim, year end and other ad hoc (such as RIPI) reports	Annually
	Other inspection reports: Ombudsmen reports. <i>I am not aware of any automatic sharing of Ofsted and other inspection agency reports.</i>	Ad hoc
	Depth External Audit Work: External Audit interim and year end reports. <i>The Committee should (in particular) review the external Auditors' best value opinion and the work to achieve this. The audit of the accounts is strongly governed by statute and external audit is subject to inspections on the quality of this work. The best value opinion is more subjective. The Committee should seek to also gain assurance via the Council's S151 Officer and its Finance function.</i>	Annually
18	Annual Accounts: External Audit interim, year end and ad hoc reports, the Draft Annual Accounts. <i>The Committee should seek to also gain assurance via the Council's S151 Officer and its Finance function.</i>	Annually

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## LONDON BOROUGH OF CROYDON

<b>REPORT:</b>	<b>AUDIT AND GOVERNANCE COMMITTEE</b>	
<b>DATE OF DECISION</b>	<b>1<sup>st</sup> FEBRUARY 2024</b>	
<b>REPORT TITLE:</b>	<b>UPDATE ON THE ANNUAL GOVERNANCE STATEMENT 2022/23 ACTION PLAN</b>	
<b>CORPORATE DIRECTOR / DIRECTOR:</b>	<b>STEPHEN LAWRENCE-ORUMWENSE DIRECTOR OF LEGAL SERVICES &amp; MONITORING OFFICER JANE WEST CORPORATE DIRECTOR OF RESOURCES</b>	
<b>LEAD OFFICER:</b>	<b>STEPHEN LAWRENCE-ORUMWENSE DIRECTOR OF LEGAL SERVICES &amp; MONITORING OFFICER</b>	
<b>LEAD MEMBER:</b>	<b>CLLR JASON CUMMINGS LEAD MEMBER FOR RESOURCES</b>	
<b>DECISION TAKER:</b>	<b>N/A</b>	
<b>AUTHORITY TO TAKE DECISION:</b>	<b>N/A</b>	
<b>KEY DECISION?</b> [Insert Ref. Number if a Key Decision]	<b>No</b>	REASON: N/A
<b>CONTAINS EXEMPT INFORMATION?</b>	<b>NO</b>	
<b>WARDS AFFECTED:</b>	<b>N/A</b>	

### 1 SUMMARY OF REPORT

- 1.1 For the year 2022/23, the Council through its Annual Governance Statement, conducted a review of the effectiveness of its systems of internal control and developed an Action Plan to address the improvements required. This report provides an update on the progress with the Action Plan with a particular focus on financial management, information management, procurement and contract management and the recommendations in the Report in the Public Interest on the refurbishment of Fairfield Hall.

### 2 RECOMMENDATIONS

- 2.1 The Committee is asked to consider and comment on the Annual Government Statement (AGS) 2022/23 Action Plan Update which is attached as Appendix 1.

### **3 REASONS FOR RECOMMENDATIONS**

- 3.1 The Council is responsible for ensuring that its business is conducted in accordance with the law and the proper standards of good governance. The recommendation provides an update on the progress made on the improvement identified in the Council's governance arrangement.
- 3.2 The Committee is responsible for reviewing and monitoring the effectiveness of the Council's governance, risk and systems of internal controls and the implementation of agreed actions. The recommendation provides an opportunity for the Committee to review and comment on progress made in the areas identified for action.

### **4 BACKGROUND AND DETAILS**

- 4.1 The AGS 2022/23 acknowledge that the Council has an effective decision-making and internal control arrangement designed to ensure the highest standards of good governance. The Council's governance structures at Member level (i.e., Full Council, Executive Mayor and Cabinet, Scrutiny and Overview, Ethics, Audit and Governance and other Committees), and at Officers level (i.e., Chief Executive, Corporate Management Team, Directorate Management Teams, Internal Control Boards, Transformation Boards and Statutory Officers), and the accompanying governance documents are effective. They make certain the Council conducts its business in accordance with the law and that public money is properly accounted for, as the Council work to achieve the best outcomes for residents within the resources it has.
- 4.2 The AGS also acknowledge that during 2022/23 the failings in previous years (2021/22 and 2020/21) were fully analysed as part of the Opening the Books programme which revealed in great depth that the Council continues to face serious and fundamental challenges with its finances, that culminated in the Secretary of State statutory intervention and Directions. The Council's governance arrangements are fit to deal with the expectations arising from the SoS Directions and other improvements required. An Action Plan was developed for 2023/24 to address the gaps in governance identified in the AGS. The key themes for action were financial management, capital programmes and projects, housing, health and safety, strengthening governance framework, information management, procurement and contract management, outstanding recommendations arising from the Report in the Public Interest (RIPI 2) relating to the refurbishment of Fairfield Hall and the implementation of the Exit Strategy Action to comply with the Secretary of State Directions.
- 4.3 Some key points to note are: a) there is overlap between the themes for governance improvements in the AGS and the Exit Strategy; b) most of the improvements required or deliverables are over 1- 2 years periods; c) and therefore, spans 2023/24 and 2024/25 annual governance reviews and statements.

- 4.4 Attached at Appendix 1 is a table with an update on the progress the 2022/23 AGS Action Plan. The key highlights are:
- a) Financial Management: The action taken to date and proposed to implement the recommendations of the External Auditors Section 24 Statutory Recommendations and the Interim Report for the financial years 2019 – 22 Recommendations. There has been considerable progress on the action plan to meet the External Auditors recommendations.
  - b) Capital Projects and Programmes: The framework is in place for the management and monitoring of capital projects through the Capital Internal Control Board and the reporting arrangement to Cabinet through the monthly Financial Performance Report.
  - c) Housing Improvements: The Housing Transformation Programme continues to deliver against the milestone agreed with the Regulator for Social Housing and include arrangements for repairs to improve on the condition of housing stock and homelessness prevention model.
  - d) Strengthen Governance Framework through the ongoing review of the Constitution and an updated Directorate Scheme of Delegation that sets out the arrangements for the discharge of their respective functions.
  - e) Information Management: Following the Enforcement Notice issued by the Information Commissioners Office (ICO) in June 2023, considerable progress has been made in dealing with the backlog in subject access and freedom of information act requests to the satisfaction of the ICO. There has been additional staffing resource deployed, training provided, regular reports on and oversight of performance through the Information Management Internal Control Board and Corporate Management Team.
  - f) Officer Induction Programme: The relaunch of the online corporate induction programme and the new People and Cultural Transformation Plan.
  - g) Procurement and Contract Management. The Procurement Improvement Plan that is bench against the LGA National Procurement Strategy.
  - h) The RIPI 2 Recommendations. With the significant progress made in completing the actions arising from the recommendations, the Council will now be taking steps to reassure itself that the learning arising from the recommendations are now fully embedded. The following actions are planned for January to March 2024: a) A stakeholder group of officers' from Finance, Legal, Property, Procurement, Democratic Services and Capital Programme are to hold a lessons learnt session that includes an insight into current practice and any further changes required; and b) Presentation on lessons learnt and changes in practice to be taking to Capital Internal Control Board, Housing Transformation Board, CMT, Directors and Heads of Service Meeting; and Statutory Officers Group. This is to ensure wider dissemination of the lessons learnt and the improvements made.

- i) The Exit Strategy Action covers the following themes: Governance, Culture and Leadership, Financial Strategy, Service Performance: CYPE; ASCH; and Housing, and Capability & Capacity to Improve. A delivery tracker has been developed to monitor progress against all 177 actions in the Exit Strategy. Progress is reviewed regularly by DMT's and at CMT on a bi-monthly basis. Most of the actions due March 2024 are complete or on track to be completed.

## **5. ALTERNATIVE OPTIONS CONSIDERED**

Not applicable.

## **6. CONSULTATION**

6.1 Not applicable.

## **7. CONTRIBUTION TO COUNCIL PRIORITIES**

7.1 The AGS and Action Plan aligns with the Mayor's Business Plan 2022-26 "Outcome 1: The Council balances its books, listens to residents and delivers good sustainable services" and "Priority 4: Ensure good governance is embedded and adopt best practice".

## **8. IMPLICATIONS**

### **8.1 FINANCIAL IMPLICATIONS**

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

### **8.2 LEGAL IMPLICATIONS**

8.2.1 There are no legal implications arising from the recommendation. However, the actions identified in the AGS Action Plan are fundamental to the delivery of a robust and effective governance arrangement and compliance with the various legal obligations. The Committee is responsible for monitoring progress in addressing governance risk related issues, the effectiveness of internal controls and the implementation of agreed action.

### **8.3 EQUALITIES IMPLICATIONS**



8.3.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act.
- Advance equality of opportunity between people who share those protected characteristics and people who do not.
- Foster good relations between people who share those characteristics and people who do not.

The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex, and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.

There are no equalities implications arising from the recommendation in the report. However, the Council has had due regard to its obligations under the Equality Act.

## **9 APPENDICES**

Appendix 1 Annual Governance Statement 2022/23 Action Plan and Progress Update

Appendix 2 RIPI 2 Action Plan and Progress Update

## **10 BACKGROUND DOCUMENTS**

N/A

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# Appendix 1 - AGS 2022-23 Action Plan Progress Update

No.	Governance Issue	Action	Accountable	Responsible	Status Update from 2022/23	Assessment of Impact / Outcomes Achieved
1	Financial management	Implement the External Auditors Section 24 statutory recommendations that are still outstanding. Implement the External Auditors Interim Report for the financial year 2019/20, 2020/21 and 2021/22 recommendations	Corporate Director of Finance Resources	Allister Bannin, Director of Finance (Deputy S151 Officer)	<p><b>External Auditors Section 24 statutory recommendations:</b></p> <p><b>"Finalise the root and branch review of financial management in all service departments and in respect of corporate decisions as part of the Opening the Books exercise"</b>. An update on progress against the 76 recommendations from the Opening the Books external review was taken to Audit and Governance Committee on 30/11/23 through the "Revenue and Capital Monitoring Improvements" report. This showed 40 recommendations as being complete, 9 as underway and 27 to be progressed. A further update to A&amp;G Committee is planned for April 2024.</p> <p><b>"Resolve the accounting arrangements in respect of Croydon Affordable Homes"</b>. This has been completed and agreed with the auditors for the 2019-20 final accounts which are planned to be taken to A&amp;G Committee in February 2024.</p> <p><b>"Invest significant extra resource (when possible) in finance capacity, internal audit and risk management to ensure robust processes are brought into place to monitor progress and meet statutory financial obligations"</b>. The Director of Finance (Deputy S151) completed the restructure consultation for the Strategic Finance service area in October 2023. A growth bid of £0.5m is being considered as part of the Council's 2024-25 budget setting process to improve capacity and skills levels in the Strategic Finance structure. Capacity in Internal Audit and Risk Management was increased in 2022-23.</p> <p><b>"Demonstrate clearly to Council tax payers how the additional Council tax for 2023/24 has been properly controlled and demonstrates improvements in value for money arrangements"</b>. It was agreed with Grant Thornton to detail this in a report by June 2024. The monthly financial performance reports include the list of transformation projects and their budget allocations.</p> <p><b>"Develop an action plan to clear the three outstanding years of accounts and audit by June 2024"</b>. The 2019-20 interim audit findings report was taken to A&amp;G Committee on 30/11/23. The final 2019-20 accounts are planned to be taken to A&amp;G Committee on 1/2/24. The expected completion for 2020-21 is April 2024 and for 2021-22 is September 2024.</p> <p><b>"Develop and enhance governance process for all key investment decisions and develop a Panel to address the accounting implication of all capital investments"</b>. This recommendation is aligned to the Capital Framework Improvement Plan from PwC. An update on progress against the 9 recommendations from this plan was taken to A&amp;G Committee on 30/11/23 which showed 7 as underway and 2 to be progressed. A further update to A&amp;G Committee is planned for April 2024.</p> <p><b>"Enhance existing officer control activities by ensuring the Scrutiny and Governance Committee robustly challenges the monthly budgets report from officers from a governance and control perspective"</b>. Implemented. The Scrutiny and Overview Committee receives and challenges the monthly financial performance reports and uses its subcommittees to deep dive into financial performance of service directorates.</p> <p><b>"Ensure that the lessons learned from the former CEO's termination payments, as set out to Full Council in 2022 and set out in detail below, are applied to all future Chief Officer severance payments"</b>. Implemented. The requirement of Statutory Guidance on Special Severance Payment is being adhered to. There have been changes made to the Pay Policy Statement to make it clear that Special Severance Payments and severance packages of £100,000 and above should be approved by a vote of full Council. However, if the proposals are being made in the context of litigation and the making of the decision is urgent, General Purposes Committee (GPC) can approve such payments in accordance with the Council's constitution. Decisions will only be referred to the GPC for approval in limited and exceptional cases, where a decision is required urgently in the context of litigation. A robust written business case setting out the considerations for making a Special Severance Payment, along with appropriate written professional legal and financial advice, must be provided where approval for a Special Severance Payment is sought. In line with Statutory Guidance any settlement agreement between £20,000 and up to £100,000 has to be approved by the Executive Mayor and Chief Executive, with a full written business case demonstrating good value to the taxpayer, A settlement below £20,000 has the same requirements, approved by the Chief People Officer.</p> <p><b>"That proper records are kept of any conversations, discussions, or meetings of any potential settlement agreements with an employee."</b> Implemented. Records are kept within the written business case to demonstrate the legal and financial best value case. Where members are involved in the decision-making process, a full written note will be taken and retained by Democratic Services.</p> <p><b>"That reasonable enquiries are made to establish all the facts, events, and circumstances that give rise to any proposed settlement agreement, including any wrongdoing by the parties involved"</b>. Implemented. Appropriate legal and financial advice is taken and recorded to ensure all facts and events are considered as part of the best value written business case.</p> <p><b>"That legal advice is sought on merits and chances of success of any potential claim against the Council and quantum of damages awarded. This should inform the decision on any potential settlement payment"</b>. Implemented. As above, legal advice is sought and captured in the written business case to ensure best value for the taxpayer is satisfied.</p> <p><b>"There is compliance with the governance arrangements relating to the decision-making on settlement payments"</b>. Implemented. Addressed through the Pay Policy statement 2023/4 which sets out clearly the governance arrangements and compliance with the Statutory Guidance for Special Severance Payments.</p> <p><b>"That officers and members who are the subject of the dispute are not involved in the decision-making relating to the proposed settlement agreement"</b>. Implemented. Addressed in the Pay Policy Statement 2023/4.</p> <p><b>"That Democratic Services attend both the open and exempt part of any committee meeting for approval of settlement payments. That proper minutes of the meeting are taken so that there is an understanding of the reasons for the decision and the deliberation by the committee"</b>. Implemented. Addressed in the Pay Policy Statement and in all meeting practice.</p> <p><b>External Auditors Interim Report for the financial year 2019/20, 2020/21 and 2021/22 recommendations:</b></p> <p><b>"With three Section 114 notices having been issued in two years, and the Council having made it clear that extraordinary government support is required to return to financial sustainability, it will be important that the Council maintains discipline over its own savings and transformation plans. For savings plans, Internal Audit recommendations for improvement in Star Chamber processes should be implemented as a matter of priority. Plans that are realistic should be approved. For transformation projects, arrangements should be put in place for tracking and challenging outcomes before any</b></p>	<p>Improvements in financial management are demonstrated through the monthly financial performance reports to Cabinet. At 2023-24 Period 7, the overall General Fund revenue forecast is breakeven (after the capitalisation direction of £63m) with all service directorates at forecast breakeven or underspend except for Children, Young People and Education (owing to high cost placements to meet individual needs).</p> <p>Improved capital governance through the Capital Internal Control Board is in place.</p>
2	Capital Projects and Programmes	To continue to improve on arrangements for the management of major capital projects and programmes.	Corporate Directors	Allister Bannin, Director of Finance (Deputy S151 Officer)	<p>An update on progress against the 9 recommendations from the PwC Capital Framework Improvement Plan was taken to A&amp;G Committee on 30/11/23 which showed 7 as underway and 2 to be progressed. A further update to A&amp;G Committee is planned for April 2024.</p> <p>The Capital Internal Control Board (CICB) continues to further improve the governance of the capital programme taking on board what best practice can be incorporated within the resource constraints given the Council's financial position. This includes overseeing the development of business case templates in line with the Five Case Model and associated training and governance approval routes, which will be taken forward after the recruitment of capital accounting officers into the new Strategic Finance structure.</p> <p>The capital programme is reviewed by the CICB on a monthly basis, providing robust challenge to project managers on project delivery. Capital delivery is reported on a monthly basis to Cabinet through the Financial Performance Report. Verto 365 project management software has been rolled out across the Council and this is supporting the CICB to oversee the delivery of the Capital Programme in a more consistent and informed way.</p> <p>For 2023-24, as part of the budget setting process, a new best practice Capital Strategy was prepared and approved by Full Council. This set out the overall capital strategy and capital programme plans. It also set out clearly the governance of the capital programme including, roles and responsibilities, funding and financing, decision making process, risk management and escalation approach, and management and monitoring processes. This has been further developed through the draft Capital Programme and Capital Strategy 2023-29 report presented to Cabinet on 6/12/23 and the final report is underway for Cabinet 14/2/24 and Full Council 28/2/24.</p>	<p>Improved oversight, monitoring and reporting of the capital strategy and programme.</p> <p>Earlier detection of risks to delivery and remedial action.</p>

<p>3</p>	<p><b>Ongoing Improvement in awareness and practice in finance management</b></p>	<p>Implement CIPFA maturity model. Finance training for non-finance managers</p>	<p>Corporate Director of Resources</p>	<p>Allister Bannin, Director of Finance (Deputy S151 Officer)</p>	<p>CIPFA carried out a Financial Management (FM) Review to improve alignment with best practice of the CIPFA FM Model. The review commenced in October 2022, workshops with senior finance officers concluded in April 2023 and draft recommendations have been provided to the council.</p> <p>Issues and draft recommendations raised from the review highlighted the main areas of processes/systems, budget holder accountability/skills, monitoring of revenue savings &amp; capital delivery, and the skills/knowledge/ways of working of finance staff (and the risk from the high level of interim finance staff).</p> <p>Processes/systems: The Oracle Improvement Project is underway with three workstreams (finance, procurement and human resources) to identify quick wins to improve workflows and surrounding processes, review current and potential modules and identify longer term improvements which will be reported to Cabinet in the coming months. This will include a request for revenue/capital growth that could be required above the current allocation of transformation funding. The new Strategic Finance structure creates a new Finance Manager post (reporting to the Chief Accountant) to lead on ongoing systems development, production of guidance notes and delivery of training.</p> <p>Budget holder accountability/skills: The Council commissioned CIPFA to provide training to over 300 budget holders in 2022 and to provide Housing Revenue Account (HRA) ringfence and recharge training to officers and Councillors in June 2023. Once new business case templates and governance routes are agreed for capital, then capital training will be provided for capital leads. The extra capacity built into the new Strategic Finance structure for systems (one Finance Manager and two Accountant posts) will allow monthly reporting on the submission of forecasts by budget holders to improve accountability and identify training needs to provide support as required.</p> <p>Monitoring of revenue savings &amp; capital delivery: The Council brought in a savings tracker at the beginning of 2023-24 which allows monthly monitoring of savings delivery and the RAG rated performance of individual savings is reported monthly to Directorate Management Teams (DMTs), the Corporate Management Team (CMT) and Mayor's Advisory Board. A summary of savings performance at directorate level is reported to Cabinet monthly through the financial performance reports. Monitoring of capital delivery was improved through the creation of the Capital Internal Control Board (CICB) in 2022 and further improved during 2023-24 through the Council-wide implementation of the Verto project management software system. The Verto project delivery and risk information, together with financial reports, are reviewed by the CICB on a monthly basis and deep dives into specific projects are undertaken by the CICB on a risk-based approach. Capital monitoring has also been harmonised with revenue budget monitoring, to ensure consistent timelines and consolidation of information for both revenue and capital to be taken to DMTs (for consideration at the same meeting) for integration into the monthly financial performance reports.</p> <p>Skills/knowledge/ways of working of finance staff (and the risk from the high level of interim finance staff): The Strategic Finance restructure reviewed the capacity and skill levels required in the accountancy function and identified required growth of £0.5m in the revenue staffing budget which has been requested through the proposed 2024-25 budget currently under consideration. The Council has recruited a permanent Director of Finance (Deputy s151) and is currently recruiting six permanent Head of Strategic Finance posts which are currently filled by acting up, agency or fixed term contract arrangements. Recruitment will then continue down the levels of post throughout the structure. Once appointments are made, a skills audit will be undertaken to identify the training needs of staff including external CIPFA and AAT professional studies. The new Finance Manager (Systems) post will lead on updating guidance and procedure notes and providing internal training to both finance and non-finance staff.</p>	<p>Improved monitoring and reporting of revenue, savings &amp; capital.</p> <p>Timely identification of risks and remedial actions.</p> <p>Enhanced financial skills and awareness of officers and Members.</p> <p>Accurate treatment of expenditure and income for the Council's annual accounts.</p>
<p>4</p>	<p><b>Housing Improvement</b></p>	<p>To continue to improve the housing function and housing standards for residents through the Housing Transformation Programme</p>	<p>Corporate Director of Housing</p>	<p>Susmita Sen</p>	<p>The Housing Transformation programme continues to deliver against the milestones set out within the Voluntary Undertaking agreed with the Regulator for Social Housing and the overall Improvement programme agreed with the Housing Improvement Board. This includes:</p> <p>Repairs contact centre insourced in August 2023. Recruitment underway for permanent staffing. Tenancy checks in all housing stock as part of a rolling programme - increasing understanding of customers and their profiling needs to target services better. In the process of co-designing a new tenant engagement framework using TPAS (tenant engagement specialists). Customer Care training programme procured and in design stage.</p> <p>Contract management hub in place for the three main repairs contractors. Governance being developed through appropriate clienting meetings.</p> <p>Good leadership and direction: New Housing strategy passed at Full Council. New Homelessness Prevention strategy and Rough Sleeping Action Plan in final stages of consultation. New interim director of Assets and Repairs joined in January 2024. Permanent appointment to Director of Housing Management and Director of Homelessness Prevention and Accommodation.</p> <p>New homeless prevention model implemented in September 2023. Customers assessed within timeframes - average wait time for appointments significantly reduced - some embedding and managing of change still required.</p> <p>HouseMark Photobook implemented on estates to raise standards of grounds cleanliness and enable residents to feedback.</p> <p>+G23 New SLAs being developed with Legal services. SLAs now in place with Violence Reduction Network, Parks and Grounds, and corporate anti-fraud.</p> <p>Architect and main consultant partner appointed on the Regina Road regeneration programme.</p> <p>New lettable standards in place and currently monitored through new homes survey - feedback given to contractors to ensure continuous improvement. Void turnaround times showing significant improvement from 107 days (Aug 2023) to 83.6 days (Nov 2023).</p> <p>Oversight of the above is through Housing Improvement Board and Regulator of Social Housing.</p>	<p>Closer relationship with customer through insourcing of contact centre</p> <p>More effective contract management of repairs contracts through contract management hub</p> <p>More visible improvements to estates through estate walkabout programme</p> <p>78% new tenancies satisfied with our services Impact of prevention model due to be assessed for Housing Needs – reduction anticipated in wait times for appointments.</p> <p>Specific internal service level agreements detailing services provided against HRA recharging.</p> <p>DPS will ensure compliance of temporary accommodation providers.</p> <p>New homes to be provided on the Regina Road estate following successful ballot.</p> <p>Improvements to Voids properties and new tenancies following establishment of lettable standards.</p>

5	<p><b>Review and improve arrangements for health and safety</b></p>	<p>Review of effectiveness of health and safety arrangements</p>	<p>Corporate Director of SCRER</p>	<p>Nick Hibberd</p>	<p>Corporate Health &amp; Safety Board continues to meet every 6-8 weeks. A corporate health &amp; safety strategy and policy has been developed by the corporate health &amp; safety team. A central digital location has been set up to save service level risk assessments so that a clearer picture of the robustness of risk assessments can be obtained. The fire &amp; building safety working group has been re-convened and is chaired by the Director of Assets &amp; Commercial Investment. Work is continuing on improving the consistency and quality of method statements and risk assessments with particular focus being given the various operational teams across the Council. This also includes Improving the timeliness and consistency of responding to actions identified following health and safety audits. <i>Note: The Corporate Health &amp; Safety Manager retired at the end of 2023. A new Interim Health &amp; Safety Manager has been recruited by the Property Team team. This post will continue to undertake a review of corporate health &amp; safety policies, procedures and assurance across the Council reporting findings to the Corporate Health &amp; Safety Board and where necessary escalating matters to CMT</i></p>	<p>Better awareness of health and safety requirements and arrangements.</p>
6	<p><b>Strengthen governance framework</b></p>	<p>Ensure directorate schemes of management (i.e., delegation) are reviewed and updated.  Ongoing review and updates to the Constitution</p>	<p>Corporate Directors &amp; Monitoring Officer</p>	<p>Corporate Directors &amp; Stephen Lawrence-Orumwense</p>	<p>The purpose of the <b>Directorate schemes of delegation</b> is to set out the detailed arrangements for each Directorate as regards which officers are given delegated authority by the Corporate Director to discharge which functions. Most of the current schemes are several years old, and pre-date the Council's change to a mayor and cabinet Executive model. The schemes also need to be updated to take account of changes in responsibilities between Directorates, Directorate re-structures, changes in legislation etc. The review of the delegation schemes is progressing. For most Directorates, the majority of the work in reviewing their schemes has been completed. The next stage is to finalise the draft new scheme of delegation and take to the Corporate Management Team for approval. This planned for February/March 2024. There is ongoing work by the Constitutional Working Group (CWG) to <b>review and strengthen the Council's governance arrangement via the Constitution</b>. There has been a review of and update to the Council's Pensions Committee, Pension Board, and Local Pension Board Rules in the Constitution. This was approved at Full Council meeting in December 2023. There is Work Programme for CWG on potential changes to the Constitution. This includes updating changes to the Financial Regulations, Tender and Contracts Regulations and the Terms of Reference of the Health and Wellbeing Board. At the meeting of CWG in November 2023, a paper on the development of Contract Standing Order to replace the current Tender and Contracts Regulations was discussed. The aims are to ensure: a) an efficient and effective governance process; b) compliance with procurement regulations; c) a planned approach to a procurement pipeline; d) alignment with the financial scheme of delegation; e) best value for the Council and the residents of Croydon; and f) a strategic deployment of procurement resource.</p>	<p>Better awareness and transparency of decision makers in Directorates. Also, of potential changes to the Constitution.</p>

<p><b>Information management</b></p>	<p>Provide assurance that the Council is operating in accordance with best practice and relevant legislation to include Publication Schemes, Open Data, Data Storage Security, Subject Access Request and Freedom of Information.</p> <p>Fully implement the Action Plan arising from the June 2023 Enforcement Notice by the Information Commissioners Office.</p>	<p>Assistant Chief Executive</p>	<p>Paul Golland</p>	<p>Publication Scheme The Council continues to review and update our processes in line with responsibilities set out in the Information Commissioner's Office Model Publication Scheme. This is ensuring that all information required to be in the public domain is published. Croydon remains compliant. We continue to proactively publish key information including: •Who we are and what we do •What we spend and how we spend it •What our priorities are and how we are doing •How we make decisions •Our policies and procedures •Lists and registers •The services we offer.</p> <p>Subject Access Requests (SAR) A detailed SAR improvement plan was developed and shared with the ICO. This has led to significant progress in the Council's performance, a reduced backlog of requests and a big improvement in our compliance rate. The Council is no longer required to attend quarterly compliance meetings or share our monthly statistics with the ICO.</p> <p>Freedom of Information (FOI) Requests Croydon was subject to an Enforcement Notice issued by the ICO in June 2023. This was due to a backlog of overdue FOI requests and the notice required that we improve our compliance rate and close all requests in our backlog, as of June 2023. Working closely with the ICO, a detailed FOI improvement plan was developed and significant changes to our processes followed. With the continued support of the Corporate Management Team the Council has seen great improvement in FOI response timeframes. We are now hitting the 90% compliance rate, which means responding to the request within 20 working days. The backlog now consists of 4 and we expect these to be closed soon. The ICO will review the Enforcement Notice in the second week of February, and we expect to no longer be subject to it. We continue to publish our previous FOI responses in a disclosure log on the Council's public-facing website.</p> <p>Resources As part of the improvement plans for both SAR and FOI, additional human resources have been deployed. Within the Central Information Management Team three roles have been appointed: •A dedicated full-time Data Protection Officer •An additional full-time SAR / FOI Officer •A full-time Admin Support Officer Within the Children, Young People &amp; Education Directorate •One secondment of a full-time SAR Officer •A full-time Admin Support Officer Within Housing Directorate •An additional full-time shared resource, coordinating responses.</p> <p>Data Protection, GDPR Training There is a mandatory e-Learning training module for all Council staff to complete online. This training is for all new staff starting with the Council and all staff are required to do yearly refresher training. This training has been refreshed as of January 2024. The Croydon learning team are now able to capture statistics and send out reminders to staff. A more in-depth face-to-face training sessions, held virtually on MS Teams, are available via Croydon learning for up to 40 attendees. These are held monthly and advertised on the intranet and via the Chief Executive's news bulletins. In line with the ICO's recommendation, these sessions are an opportunity for staff to engage with the team and for staff to ask for more service specific guidance. This training is continually being revised to include examples of previous Data Breaches, remedies and changes to processes as required. Going forward, there is a plan to make it mandatory for staff, and their line-manager, who have been involved in a Data Breach, to complete the e-Learning training again and a recommendation to attend the in-depth face-to-face session.</p> <p>Freedom of Information Training The FOI improvement plan led to the team creating new FOI &amp; EIR training. This training details the background to the legislation, key obligations of the Council and all relevant exemptions &amp; exceptions. It has been delivered to all key stakeholders and has been added to Croydon's e-Learning portal. Going forward, we will recommend that e-Learning training be made mandatory for all Team Managers and other key staff.</p> <p>Reporting Weekly SAR / FOI reports sent to the whole organisation highlighting all open and overdue cases per directorate. Colleagues can view the report and advise on any closures or responses due. Regular updates on FOI, SARs and Data Breaches are reported to the Corporate Management Team and the Information Management Internal Control Board.</p> <p>Governance The Data Protection Officer and Chief Digital Officer are both members of the Council's Statutory Officers' Meeting, chaired the Chief Executive. This meeting gives us the opportunity to raise and address key concerns. There is a monthly Information Management Internal Control Board meeting to discuss the Council's Information Governance arrangements, chaired by the Council's Director of Legal Services and Monitoring Officer. This meeting allows the Information Management Team to raise and discuss on-going issues and improvements with key stakeholders. From this meeting serious risks can be escalated to the Corporate Management Team.</p> <p>Policies/procedures A new freedom of information policy has now been published on the Council's public facing website. We are currently involved in reviewing all the Council's Information Security and Information Management Policies. These policies will be ratified at the Information Management Internal Control Board. For more details on added or amended procedures please refer to the FOI/SAR improvement plans, linked above.</p>	<p>There is still significant work required to improve on information management arrangement. Recent action plan is intended to deliver on this.</p>
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<p>8</p>	<p><b>Officer Induction Programme</b></p>	<p>Establish and maintain an officer induction and performance management programme.</p>	<p>Assistant Chief Executive</p>	<p>Dean Shoesmith</p>	<p>The online corporate induction programme has been relaunched to provide an overview of the operation and governance of the council, providing (i) essential information about the organisational structure, committees and decision-making processes (ii) mandatory training for new staff including GDPR/information governance, health and safety, and equality, diversity and inclusion. (iii) online managers' induction checklist to ensure completion and compliance for each new starter. Work is currently on-going to supplement the basic online induction essentials with an in-person induction experience to address the correct cultural orientation to the council. The People and Cultural Transformation Plan action plan has been co-created engaging 250 staff, including front line employees, trade union representatives and staff network representatives. The action plan has been reviewed by Scrutiny and Cabinet and agreed at the end of September 2023. Work is ongoing to implement the actions associated with the four-year strategy against each of the seven strategic objectives, referred to as pillars. A strategic partner has been commissioned to support the council with the design and delivery of leadership and management development which will be rolled out across the council in the coming year. The council has launched two new specialist diversity talent development programmes, Black on Board and Raising the Bar, to ensure targeted positive action for improving talent management for global majority and female staff, where there are issues of underrepresentation. ACAS is currently delivering training to managers on employment relations skills, to ensure improved management of discipline, grievance, sickness and poor performance. The council's employee relations policies framework have been reviewed, agreed with the trade unions and sign-off by CMT, seeking to make practical implementation easier and seeking to improve procedural compliance.</p>	<p>Improved induction of all new starters and ensuring the completion of mandatory training, as well as good knowledge of how the council operates Co-creation of the PCTS strategy and actions has supported a positive culture change across the workforce as demonstrated to Cabinet and Scrutiny in reviewing and approving the action plan The ACAS skills training will aim to ensure improved procedural compliance and reduce risk and costs associated with employment litigation</p>
<p>9</p>	<p><b>Procurement and contract management.</b></p>	<p>Address areas for improvement in procurement and contracting identified by Internal Audit.</p>	<p>Corporate Director of Resources</p>	<p>Huw Rhys-Lewis</p>	<p><b>Procurement Improvement Plan/Benchmarking</b> - We have further developed our procurement improvement plan to allow us to monitor our progress against well regarded benchmarks. The plan now includes a set of activities to enable us to reach a 'mature' standard when measured against the LGA National Procurement Strategy (NPS) and the equivalent Cabinet Office, Commercial Continuous Improvement Framework (CCIAF) 'good' standard, by March 25. In August 23, we baselined our current performance against this standard to inform the actions we need to take.</p> <p>From the benchmarking exercise, the resulting procurement improvement plan focuses on 5 key areas:</p> <p><b>1. A revised operating model for the procurement function.</b> The new operating model has been informed by extensive consultation with other local authorities (October 23). It will see procurement playing a more strategic role in future, with early engagement to provide commercial expertise to our most critical procurements and to provide support to the management of our contracts, helping to ensure that business case objectives are delivered.</p> <p><b>2. Developing procurement skills, stronger market engagement &amp; appropriate, clear governance &amp; processes.</b> Discovery work has been done with Directorates since April 23 to improve the planning for future procurements. As a consequence, an updated forward plan will be published in January 24 to provide the market with visibility of upcoming opportunities. Revised Contract Standing Orders are also in the process of being reviewed, for approval by Cabinet and Full Council in April 24. These will include reduced thresholds requiring involvement by the Procurement function to enable an increased commercial focus on more strategic projects; more streamlined governance and the establishment of fixed procurement gateway delegations instead of requesting through the APP. Business case &amp; other procurement gateway templates have also been developed to further streamline the procurement and contract approval process and remove unnecessary duplication. These will be piloted in February 24. A savings/benefits methodology is being developed to allow procurement savings to be tracked in a consistent manner from April 24. Apprenticeship levy funding has been identified to support the training of more junior members of staff in the Chartered Institute of Purchasing and Supply (CIPS) qualification A competency framework for procurement staff will be developed by March 24.</p> <p><b>3. Improving the standard of contract management across the council.</b> Alongside forward planning, work has also been underway since April 23 to improve the completeness of the council's contract register (and to manage instances where contracts have expired). In addition, an up to date register of contract managers will be in place by January 24. Following a pilot (October 23), a baselining exercise to assess current contract management performance across the council's key contracts (categorised as Platinum and Gold) will be conducted in January-February 24. This will inform a set of recommendations to be produced for the end of February 24 to improve contract management practice with an objective that all key contracts are operating at a CCIAF 'Good' standard as a minimum by March 25.</p> <p><b>4. Using our procurements to drive social value.</b> The forward plan mentioned above will also be shared with local suppliers so they can identify suitable opportunities. A cross-functional team has been formed to develop a new social value policy, a draft to be completed in March 24 and final version approved by Jun 24 (in the longer term this will extend to facilitating meetings with main contractors so they can identify opportunities within the supply chain on larger procurements).</p> <p><b>5. Further developing and integrating our P2P, e-tendering, pipeline &amp; contract management systems, alongside improved reporting capability to aid compliance.</b> A review of Oracle Fusion's ability to support pipeline management, e-tendering and contract management requirements versus alternatives has been undertaken (October 23) and our future strategy for commercial systems agreed by the Oracle Steering Group (Nov 23) as part of a wider systems business case. This also include a series of recommendations to improve the purchase to pay process alongside implementation plans. For 23/24, these include the development of improved reporting to identify areas of non-compliance, analysing the root causes and starting to address these. An interim resource is being recruited to support this.</p>	<p>The ongoing Procurement Improvement plan is intended to deliver the following outcomes:</p> <p>Improved commercial skills across the council Increased expert procurement input throughout the contract lifecycle, so improving value for money delivered through our contracts Improved supplier relationships through early engagement and robust contract management practices More informed decision making &amp; improved compliance to processes through development of our systems and management information Ensuring our decision making is subject to appropriate the controls whilst maintaining an efficient process</p>

10	<b>Recommendations arising from the Report in the Public Interest relating to the refurbishment of Fairfield Hall.</b>	To continue to implement the action plan in response to the recommendations. Also, to ensure learning arising continues to be embedded across the organisation.	Corporate Director of Resources	Stephen Lawrence-Orumwense	The Council has made significant progress in completing the actions arising from the recommendations. The Council will now be taking steps to further reassure itself that the learning arising from the recommendations are now fully embedded. The following actions are planned from January to March 2024: a) A stakeholder group of officers' from Finance, Legal, Property, Procurement, Democratic Services and Capital Programme are to hold a lessons learnt session that includes an insight into current practice and any further changes required; and b) Presentation on lessons learnt and changes in practice to be taking to Capital Internal Control Board, Housing Transformation Board, CMT, Directors and Heads of Service Meeting; and Statutory Officers Group. This is to ensure wider dissemination of expectations in managing major capital projects.	Better officer reports and executive decision making in respect of capital projects. Better awareness and analysis of risk and compliance requirements. Better awareness of the financial reporting requirements in respect of capital projects.
11	<b>Secretary of State Directions to comply with Best Value Duty</b>	To implement the Action Plan (i.e., Exit Strategy) to secure compliance with the Secretary of State Directions	Chief Executive and Corporate Directors	Katherine Kerswell	<p>The Exit Strategy Action covers the following themes: Governance, Culture and Leadership, Financial Strategy, Service Performance: CYPE; ASCH; and Housing , and Capability &amp; Capacity to Improve.</p> <p>A delivery tracker has been developed to monitor progress against all 177 actions in the Exit Strategy.</p> <p>Progress is reviewed regularly by DMT's and at CMT on a bi-monthly basis.</p> <p>The majority of actions due March 2024 are complete or on track to be completed.</p> <p>Progress will continue to be monitored overtime and reported on at the following intervals:</p> <ul style="list-style-type: none"> <li>•March 2024- Progress report on the Exit Strategy submitted to IAP to inform April 2024 letter to SOS</li> <li>•July 2024- Interim progress report on the Exit Strategy submitted to IAP</li> <li>•September 2024- Progress report on the Exit Strategy submitted to IAP to inform October 2024 letter to SOS</li> <li>•January 2025- Interim progress report on the Exit Strategy submitted to IAP</li> <li>•March 2025- Progress report on the Exit Strategy submitted to IAP to inform April 2025 letter to SOS</li> </ul> <p>The objectives of the Exit Strategy will also be embedded into service plans for 24/25.</p>	



## Appendix 2 - RIPI 2 Action Plan Progress Update

Status Update	Recommendation	Response	Action	Progress/Comments	Deadline	Responsible
Complete	R1. The Chief Executive supported by the Monitoring Officer and the Section 151 Officer should ensure that Cabinet papers for major projects set out clearly: R1.1 the legal powers to enter into a particular arrangement and attendant risk	Generally, the Council has taken action to improve the processes surrounding the submission and contents of reports to Cabinet. There is improved forward planning. Authors of reports must ensure comments are received from statutory officers and legal powers and risks are sufficient addressed. There is early consideration of all cabinet papers at the Corporate Management Team (CMT) and Mayor Advisory Board (MAB). The Chief Executive, Section 151 and Monitoring Officer are in attendance and do ensure the issue raised in R1 are always addressed. The process allows for much earlier consideration of papers and more opportunity for assurance of, and challenge to, advice being presented to the Cabinet. The Monitoring Officer has in place final report clearance meetings before publication with Legal and Democratic Services Heads of Service to ensure that legal powers and risks are adequately covered in Cabinet reports. Reports on Regina Road and Purley Pool are some recent examples.	1.1 A new report writers guide will be produced alongside a new report template for all Council reports to use regardless of which board or committee in will be presented in. This will explain the issues raised in the RIPI and why commentary is needed on the lawfulness of the council's arrangements	In October 22 a new officer report template and guidance that addresses the issue raised in R1 has been produced. Between October 22 and January 23, the Head of Democratic Services, Monitoring Officer and Deputy Monitoring Officer assisted by colleagues from Finance, Equalities and Procurement has provided training to Officer on the new template that includes guidance on risk and legal powers.	Sep-22	Monitoring Officer
Complete	R1.2 how the Council can protect its interests and secure economy, efficiency and effectiveness	See reponse to R1.1 above	1.2 The template for reports will be amended to include a reference in the legal comments section to the need to ensure legal advice is recorded in the paper on the power to enter into a particular arrangement for a major project and the actions required to ensure it remains lawful	This is contained in the current and new report guidance. Also, reports are reviewed by the Monitoring Officers and his Deputies to ensure legal powers for and lawfulness of decisions.		Monitoring Officer
Complete			1.3 The Capital Board will be asked to produce guidance on what constitutes a major project, and this will be incorporated into the new report writers' guide. This section in the report will also draw out the need for officers and those delivering on the Council's behalf to ensure the council delivers value for money within all its major projects and secures economy, efficiency and effectiveness for the taxpayers and residents of Croydon in accordance with Section 3(1) of the Local Government Act 1999 and the duty of best value. The template will stress the importance of ensuring the report provides decision makers with full information and the requirement to update the decision-making body when this information changes.	The new standard Committee Report template includes all the essential requirements including information that will assist Members to make an informed decision.  As a separate action point arising from the PwC Capital Framework Improvement Plan recommendations (progress against which is separately reported to A&G Committee), the Capital Internal Control Board is overseeing the development of business case templates in line with the Five Case Model and associated training and governance approval routes (for different levels of expenditure) which will be taken forward after the recruitment of capital accounting officers into the new Strategic Finance structure. This will also align with the updated thresholds to be agreed through the refresh of the financial and contract regulations underway.	Apr-24	Monitoring Officer & Director of Commercial Investment & Capital
Complete but ongoing			1.4 Progress reports on the delivery of major projects to Cabinet will also incorporate an assurance section that the requirements are to ensure the arrangements are lawful and have been met e.g. contracts signed, land correctly transferred etc prior to committing the Council contractually. These reports will also be available to the Scrutiny and Overview Committee in order to enable them to fully scrutinise the delivery of major projects based on the same full suite of information that is available to the Cabinet Members. These requirements will also be included in the new guide.	There are currently no major capital projects that are at a sufficiently developed stage to require a progress report. However, these requirements will be adhered to. Also, at the monthly meetings of the Capital Internal Control Board, the financial performance of the capital programme is reviewed. The board reviews the progress made with delivery of capital projects including consideration of risks, financing and contracts completion and compliance issues.  The Council's Constitution contains the procurement safeguards referred to below including legality and executed contract before commencement of obligations.  Expenditure delivery on all capital projects is included in the monthly Financial Performance Report to Cabinet. In 2024/25, the monthly reports will include information on major project activity as well as financial spend. These reports will be available for Scrutiny and Overview Committee to review.	Apr-24	Monitoring Officer  Director of Commercial Investment & Capital
Complete			1.5 Once the new guide and the new report template has been produced, it will be brought to the Audit and Governance Committee for member consultation and agreement. Training will then be developed to ensure understanding of the new requirements by report writers.	In September 2022, the new report template and guidance was taken to Audit and Governance Committee. As indicated above, officer training on the new template was provided in December 2022 and January 2023. <b>This is complete.</b>	Dec-22	Monitoring Officer  Director of Commercial Investment

Complete			1.6 The Council will make full use of its decision management software (Mod.Gov) to automate production of reports. This will have the benefit of allowing report authors to draw in expert advice earlier in the process and prevent reports from being changed after they have received legal and financial commentary. This has been amended to Share Point in Microsoft Teams.	The plan now is to use Share Point in Microsoft Teams. This was rolled out in December 2023 for Cabinet reports by the Head of Democratic Services and includes reports management guidance. Draft reports are now stored in a single location for access and help to manage issues relating to version control.	Dec-23	Monitoring Officer
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible
Complete but ongoing	R2. The Monitoring Officer should ensure that: R2.1 contracts are properly executed before entering into arrangements with third parties	The Monitoring Officer through the review undertaken and referred to in the progress/comments column is satisfied that the arrangement is in place to meet the requirements of this recommendation (i.e., R2.1 - R2.3). The proposals following the review is currently paused in view of potential changes to the Council's Tenders & Contracts Regulations which are in progress. The Monitoring Officer meets regularly with the Head of Service in Legal Services responsible for property, contracts, and planning matters to ensure that the key legal requirements and advice are adhered to and any issues of concern including risks are flagged and resolved. The Monitoring Officer will write to all Heads of Services and above and Council's lawyers reminding them of the requirements of the Contracts & Tender Regulations that contracts must be in place before arrangements for works, services or supply of good commence, in particular, for major capital projects.	2.1 The Monitoring Officer will undertake a review of existing council processes for the signing of contracts, storage of signed contracts, and assurance on underpinning legal requirements prior to arrangements being entered into. The Council will also take further action to enhance and ensure compliance with these processes.	A review has been undertaken, the details of which are set out below. The proposals arising from the review is to be implemented by March 2024.  A review has been undertaken, the details of which are set out below. The proposals arising from the review is to be implemented by December 2023.  <b>Current protections/ processes</b>  Contracts falling within the Tenders and Contracts Regulations (TCRs)  There are currently protections with the TCRs for procured contracts as follows:  4. Officer Responsibilities 4.1 Officers involved in the commissioning and procurement process must comply with: These Regulations; • All UK and European Union binding legal requirements;  4.2 Officers must: a. Have proper regard for all necessary legal, financial and professional advice; o. Enter all purchase order information onto the Council's financial system prior to any goods or services being provided. Raising purchase orders, and any permitted exceptions, must be conducted in accordance with the Council's P2P Guidance documentation; q. The contract manager should ensure the safe keeping of contract documentation in line with Croydon's document retention policy and uploaded onto the Council's contract management system;  5. Director Responsibilities 5.1 Directors must:	Jul-23	Monitoring Officer  Director of Commercial Investment & Capital
Complete	R2.2 the properly executed documents are stored robustly to allow future scrutiny	See response to R2.1 above which refers to the review undertaken. There are arrangements in place for the safe and secure storage of contracts. The Monitoring Officer will write to all Heads of Services and above and Council's lawyers reminding them of the requirements for the safe storage of contracts as set out in the Contracts & Tender Regulations.	2.2 The Capital Board will be given a formal role going forward in the assurance of the contracts having been signed, that they are stored, securely and all legal requirements have been met prior to approval to proceed with a major project.	It is recommended that the action plan be amended to read: -  'The Capital Board will be given a formal role going forward in monitoring that major projects contracts have been signed, that they are stored securely and that all legal requirements were met prior to the project proceeding.'  The terms of reference of the Capital Board have been updated to reflect this. This is now part of Capital Board and Procurement Board standard agenda items for monitoring purposes.	Jul-23	Monitoring Officer, Corporate Director of Resources and Director of Commercial Investment & Capital.
Complete but ongoing	R2.3 key requirements underpinning the legal advice are in place before progressing with the arrangement	See response to R1.1 above. As mentioned above, the Monitoring Officer has regular meetings with Heads of Service in Legal Services to review legal advice and ensure they are highlighted to decision makers and key requirements followed.	2.3 This review will be reported to the Statutory Officers' Board in the first instance and will include any recommendations on required changes to processes, thresholds and delegations. This review will then be brought to the Audit and Governance Committee for Member oversight and comment.	The review arising from this recommendation is yet to be reported to the Statutory Officers' Board. <b>This is now planned for the March/April 2024 meeting.</b>	Jul-23	Monitoring Officer  Director of Commercial Investment & Capital
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible
Complete	R3. The Monitoring Officer should ensure that where legal advice changes after a Cabinet decision that the consideration of the implications of the changes is documented and where the Monitoring Officer considers additional legal risks are identified that the Cabinet is updated on the impact on the original decision made.	Through the CMT and MAB processes, senior officers, the Mayor and Cabinet are kept informed of any legal risk arising from decisions under considerations and already made. This is a business-as-usual requirement and embedded in day to day considerations of key decisions for Cabinet. In addition, the Monitoring Officer has made changes to the Council's Protocol on Decision Making to incorporate this requirement across Directorates.	3.1 The Monitoring Officer will review the Council's Constitution, particularly Part 5A, the Protocol on Decision Making. This review will have particular regard to setting out proportionate thresholds for decisions to be reported back to the relevant decision-making body when advice (legal or otherwise) upon which the decision was based significantly changes. The review will also consider introducing a time limitation on the delegated decisions that are made by Cabinet in order to ensure they remain relevant and are used appropriately. This will also be included in the new Report Writers Guide.	Completed – a revised Part 5A was approved by Council in March 2022. This included addition of text to require Corporate Directors to keep the implementation of decisions under review and ensure that circumstances relevant to the decision continue to apply. Where there has been a material change of circumstances, a further report must be made to the decision-making body prior to implementation.	May-22	Monitoring Officer
Complete			3.2 A standing item will be included on the Statutory Officers' meeting to identify if there have been any significant changes to advice underpinning Cabinet decisions.	This will usually be discussed at Corporate Management Team which includes the Head of Paid Service, Chief Finance Officer, and Monitoring Officer. Cabinet will be updated on material changes in the circumstances given rise to decisions made and such that will require a review of the decision.	Immediate	Chief Executive
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible

Complete	R4. The Section 151 Officer should ensure that prior to making payments to third parties that appropriate legal documentation is in place such as a properly executed contract or a properly executed loan agreement	The Section 151 Officer do liaise with key officers on contract compliance prior to make payment under contractual obligations. The Section 151 Officer will write to all Heads of Services and above and Council's lawyers reminding them of the requirements of the Contracts & Tender Regulations that executed contracts must be in place before arrangements for payments are made.	4.1 The Section 151 officer will undertake a review of the Council's existing processes for ensuring payments to third parties meet the required governance controls such as a signed and dated loan agreement or contract. This review will make any recommendations that are necessary to ensure that there are proportionate thresholds, checks and balances on payments to third parties. The Council will also take further action to enhance and ensure compliance with these processes.	The Section 151 officer confirmed that this <b>task has been completed</b> . A further assurance will be sought by commissioning an internal audit of these processes.  In relation to procured contracts, the requirements of the Tenders and Contracts Regulations (Regulation 29) in the Constitution covers the process for assurances prior to proceeding with arrangements with contractors. A reminder note will be sent to staff.	Jul-22	Corporate Director of Resources
Complete			4.2 The Capital Board will incorporate this assurance check as part of their formal programme board oversight on the progress of major projects and will amend their terms of reference to reflect this additional role.	As mentioned above, this will form part of Capital Board and Procurement Board standard agenda item. The Capital Board Terms of Reference were updated in September 2022 to incorporate these requirements.	Jul-22	Corporate Director of Resources
Still in progress			4.3 The findings of this review will be reported to the Statutory Officers' meeting in the first instance, with any changes that are required to the Council's Constitution being reported to the Council via the Audit and Governance Committee or Ethics Committee.	An update report will be provided to the Statutory Officers' meeting in March 2024.	Mar-24	Corporate Director of Resources
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible
Complete but ongoing task	R5. The Monitoring Officer and Section 151 Officer should ensure that arrangements are in place to properly consider public procurement rules and UK obligations on subsidy control rules before entering into arrangements.	The Council's Constitution, in particular, the Contract & Tender Regulations clearly sets out the required process and arrangements for entering contracts with third parties. This requires considering and applying the procurement and subsidy control rules. The Council usually engages inhouse or external legal advisers who would advise on any procurement and subsidy control issues arising from the proposed contract and whether lawful to proceed. As indicated above, these issues including any apparent risk are flagged up in the decision-making reports. For example, Purley Pool Cabinet report.  The Procurement Team maintains a log of expired contracts that are not compliant with Contract & Tender Regulations and with a view to taking the necessary action to manage any risk and secure compliance (through variation and extensions).	5.1 The Council's Director of Commercial Investment will review the Council's existing arrangements for ensuring compliance with subsidy control legislation. This review will be reported to the Section 151 Officer and Monitoring Officer and will highlight any risks in the Council's current arrangements. The review will also make recommendations and set out an action plan to mitigate and address any risks that are identified. <b>The Capital Board may play a part in the assurance mechanism before entering into arrangements. If so, its terms of reference will be amended.</b> This review is now linked to wider ORACLE/ Procurement improvement plan which is on-going.	There are representatives from Finance, Legal and Procurement at Procurement Board and Capital Board who ensure that there is compliance with statutory provisions and the Constitution's Tender and Contract Regulations. There is regular and ongoing review of arrangements for both Procurement Board and Capital Board to ensure compliance with statutory and constitutional provisions. <b>For Procurement Board, there is a log kept of any non-compliances with a view to escalation to CMT and to ensure any systemic failings are rectified. The same should be replicated for Capital Board.</b>  For all contract, procurement, and subsidy related matters requiring Cabinet decision, legal advice/comments are sought to ensure compliance with procurement and subsidy control rules. Also, for compliance with the Council's Tender and Contracts Regulations where relevant. These reference the need to check for public subsidy issues. Risks of public subsidy will vary from project to project and each project will have to be reviewed on its own merits.	Apr-24	Director of Commercial Investment & Capital
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible
Complete	R6. The Chief Executive, Monitoring Officer and Section 151 Officer need to consider how to respond appropriately to challenge on decisions and be prepared to take corrective action where necessary.	As part of the Croydon Renewal and Improvement Plan, a range of actions have been undertaken to improve the culture of the organisation in relation to openness, transparency, accountability and challenge. The various actions are all designed to facilitate constructive challenge and open dialogue from Members, residents, officers and each other. To date, this work has included: - Introducing a 'guardians' programme for staff, providing a safe space for staff across the organisation to raise concerns - New customer complaints handling process - Developing a new access to information protocol for Councillors - Introducing new codes of conduct for Members, Co-opted Members and Officers  There is regular dialogue between the Chief Executive, Section 151 Officer and Monitoring Officer to consider various challenging governance issues and decide on the appropriate response and if required, an action plan.	6.1 A new member enquiry / casework process and supporting software will be rolled out to allow more pro-active tracking, management and responses to member casework enquiries and also allow learning from the casework to be captured more effectively to improve services. This may result in policy decisions needing to be revisited.	This has been completed.	Jul-22	Assistant Chief Executive
Complete			6.2 A new system of internal control officer boards have been implemented following a review of core business meetings and forums (Capital, Health & Safety, Equality Diversity & Inclusion, Finance & Assurance, Performance, Digital, Resident Voice and Corporate Resilience). To be implemented are boards on Information Management and Workforce).	This has been completed. A new Information Management Internal Control Board has been formed chaired by the Monitoring Officer to ensure a critical friend challenge and progress with the Council information management agenda.	Jul-22	Director of Policy, Programmes & Performance
Complete			6.3 A new Member / Officer working protocol will be developed and submitted to Council for adoption into the Council's Constitution. Please note that this action will also support 9.2	This has been completed and was approved by Full Council in March 2022.	Mar-22	Monitoring Officer
Complete			6.4 A new assurance framework will be developed and reported on annually to the Audit and Governance Committee	The Council's governance framework has been reviewed and informed by the NAO's Three Lines of Defence model.	Jul-22	Corporate Director of Resources
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible

Still in progress	R7. The Chief Executive should improve record keeping arrangements so that: R7.1 the records supporting key decisions including financial analysis are maintained  R7.2 a standard approach to record keeping with monitoring of which decisions have been implemented  R7.3 tolerances are established for reporting back changes to Cabinet	Through the Mod.Gov Committee Management Software, the Council's Democratic Services keeps and maintains all records of key decisions taken by the Executive and Officers under Delegated Authority. This includes reports by officers, decision notices and minutes of meetings. Through this software historical records of committee meetings can access. There is an established method for record keeping of these decisions in Mod.Gov. The relevant Corporate Director and/or Director is responsible for monitoring and implementing the decision taken by the Executive. This includes reporting back to the Executive if circumstances have changed that necessitates re-consideration of the decision made. The Head of Democratic Services will prepare a guidance note on the arrangement for providing and maintaining record of officers delegated decisions and raise awareness with Heads of Service and above. As to R7.3, see response to R.3.	7.1 <b>A review will be undertaken by the Council's Information Management Team of record keeping across the Council for key decisions, delegated decisions and Cabinet decisions in general and record keeping of formal internal control boards.</b> The review will make any necessary recommendations regarding proposed future systems of control, <b>in particular to ensure required or agreed future reporting requirements are adhered to through the forward plan</b> and these will be <b>reported to the Audit and Governance Committee and Cabinet.</b>	This task has been allocated to the Monitoring Officer who is responsible for Democratic Services and which in turn is responsible for record keeping of Executive decisions. Guidance has been initially reviewed by the Head of Democratic Services available on the intranet, and between Oct and Nov 2023 is holding meetings with Head of Services throughout the Council to identify current arrangements and any training needs / gaps. The Monitoring Officer has commissioned a review which will be undertaken by the Council's Information Management & Governance Co-ordinator.	Mar-24	Monitoring Officer
Still in progress			7.2 This review to provide assurance that the Council is operating in accordance with the relevant legislation including the good practice recommendations in the Information Commissioner's Office "S46 Code of Practice – Records Management" issued under section 46 of the Freedom of Information Act 2000.		Dec-23	Monitoring Officer
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible
Complete	R8. The Chief Executive, as Head of Paid Service, should ensure appropriate governance arrangements are implemented in a timely manner particularly for strategic developments such as Brick by Brick including where appropriate that there is clear guidance for nominated representatives on the expectations of the role including reporting back to the Council.	Actions already taken by the Council to strengthen the governance arrangements for strategic and major projects and programmes include: - Appointment of a new Commercial Investment Director; - Establishment of a Croydon Companies Supervision and Monitoring Panel (officer only) to have oversight of all Council owned companies - Establishment of a Brick by Brick Shareholder Cabinet Advisory Board (Member only); - Established a new programme office that includes a remit to work on the capital programme - Agreement of new terms of reference for the Capital Board with a focus on good planning, governance and delivery - Where warranted, non-executive and / or independent chairing and leadership has been sought, including independent chairs for the Council's General Purposes and Audit Committee, Housing Improvement Board, Children's Improvement Board and the Croydon Adult Safeguarding Board. - External training on statutory officers responsibilities has been completed separately for members and officers with additional training for non-statutory officers on company law and shareholder function. There is an Outside Bodies Protocol protocol that provides basic advise and guidance to Council's representatives on outside organisations. This has been approved by Ethics Committee.	8.1 The Croydon Companies Supervision and Monitoring Panel (CCSMP) be tasked with considering what additional measures, if necessary, need to be introduced to support and clarify the roles and responsibilities of any person appointed by the Council to be a director of a Council owned company. This review to incorporate an undertaking to abide by the code of conduct and standards of public life (commonly known as the Nolan principles). Please note that this action will also support 9.4		May-22	Director of Commercial Investment and Capital
Complete			8.2 The Council has had guidance notes agreed on the role of a non-executive appointee on behalf of the Council but these will now be reviewed and brought back to Ethics Committee for approval.	The Council, in line with other local authorities, developed an Outside Bodies Protocol for Officers and Members representing the Council in companies, charities and other organisations external to the Council. The guidance has been reviewed and commented on by the CCSMP and is now due to taken to Ethics Committee in February 23 for further consideration. Once approved, the Guidance will be circulated to all officers and members representing the Council in outside bodies. Update. <b>This has now been approved by the Ethics Committee.</b>	Feb-23	Monitoring Officer
Complete but ongoing			8.3 Mandatory training will be provided on a regular and timely basis to all Council owned company directors. Attendance at this training is part of the requirements to remain a Council appointed Director	Initial training has taken place but there is further training planned and <b>to be commissioned by the Monitoring Officer by March 2024.</b>	Mar-24	Monitoring Officer
Complete			8.4 The terms of reference for the Council's new internal control boards will be reviewed to ensure that there is clarity on how the work undertaken by these boards flows into member meetings and formal member briefings as appropriate.	The Internal Control Boards have recently been established and a review of their effectiveness is planned by September 23	Sep-23	Director of Policy, Programmes & Performance
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible

Complete	R9. The Chief Executive should work with the Executive Mayor to continue to embed: R9.1 a clearly understood distinction between the different roles and responsibilities of Members, officers and representatives akin to Brick by Brick	The Council has agreed a new code of conduct and guidance for Members and a new code of conduct for officers. This is being supplemented by tailored learning and development activity as part of the May 2022 Member Induction Programme, in new officer induction programmes and the corporate culture change programme. TO DISCUSS WITH SIMON & TOM	9.1 Review role descriptions for members and a revised member handbook is being developed. This work will be brought to the Ethics Committee for approval.	This task is completed. A revised member handbook developed including role descriptions. All members were given access to the handbook following the elections.	May-22	Monitoring Officer
Complete	R9.2 clear responsibilities for officers and Portfolio Holders in challenging reports presented to Cabinet and other committees for balance, accuracy and consistency with their knowledge		9.2 A new Member / Officer working protocol will be developed and submitted to Council for adoption into the Council's Constitution. This protocol will clarify responsibility for providing effective advice and challenge. Please note that this action will also support 6.3	This task is completed. Member/Officer protocol approved by Full Council in March 2022	May-22	Monitoring Officer
Complete			9.3 The Croydon Companies Supervision and Monitoring Panel be tasked with considering what additional measures, if necessary, need to be introduced to support and clarify the roles and responsibilities of any person appointed by the Council to be a director of a Council owned company.	Completed	May-22	Director of Commercial Investment and Capital
Complete			9.4 The Croydon Companies Supervision and Monitoring Panel be tasked with considering what additional measures, if necessary, need to be introduced to support and clarify the roles and responsibilities of any person appointed by the Council to be a director of a Council owned company. This review to incorporate an undertaking to abide by the code of conduct and standards of public life (commonly known as the Nolan principles). Please note that this action will also support 8.1	Completed	May-22	Director of Commercial Investment and Capital
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible
Complete	R10. The Chief Executive should review the terms of reference for officer and member/officer boards that oversee significant projects and capital/revenue expenditure and clarify the escalation routes for significant additional expenditure in excess of the budget	The Council has introduced new system of internal control officer boards following a review of core business meetings and forums. The Boards are Capital, Health & Safety, Equality Diversity & Inclusion, Finance & Assurance, Performance, Digital, Resident Voice and Corporate Resilience. To be implemented are Boards on Information Management and Workforce. The Capital Board and Finance and Assurance Board oversees significant projects and capital/revenue expenditure and has in place escalation and reporting route to Corporate Management Team (CMT).  Since June 2021 the Cabinet has been receiving a monthly update on the council's general fund, housing revenue account and capital expenditure. Currently, as part of the budget monitoring process, the spend on Capital Projects are reported monthly and reviewed at Capital Board, CMT and then Cabinet.	10.1 The Capital Board will review its terms of reference to develop an effective role in regard to its oversight of the delivery of major projects and clarify the escalation routes for significant overspends. Future project governance should be reflective of the scale of each project, with an appropriate level of monitoring, reporting and resource allocated.	Capital Board reviewed its terms of reference in September 2022 to incorporate all the RPI2 requirements and will continue to regularly review and update its terms of reference and approach to ensuring the delivery of robust capital governance. <b>This is completed.</b>	May-22	Director of Commercial Investment & capital
Complete			10.2 The format of the monthly cabinet update on general fund, HRA and capital expenditure will be reviewed in general to ensure it is incorporating the best practice of high performing councils in budget reporting to members. This review will also pay specific regard to the reporting on risks and opportunities, over and underspends on the delivery of significant projects either revenue or capital expenditure and either general fund, parking places reserve account or housing revenue account related.	The S.151 officer confirms that this task is completed. There is regular budget monitoring report to Cabinet that deals with 10.2 above.	May-22	Corporate Director of Resources
Complete			10.3 The Internal Control Board terms of reference template will be reviewed for all boards to ensure clarity on responsibilities for risks in regard to its responsibilities, workload and escalation routes.	An initial Terms of Reference template has been used to establish the new Internal Control Boards. Once the boards have been in operation for a few months, a review will be undertaken of their effectiveness and a final Terms of Reference template will be agreed.	Jul-22	Director of Policy, Programmes & Performance
Complete			10.4 The current monthly budget assurance meetings chaired by the Chief Executive and Corporate Director of Resources will be reviewed to assess effectiveness after its first year of operation.	The monthly budget assurance meetings are continuing and their effectiveness continues to grow. As the monthly financial performance report has set out during 2022-23 these assurance meetings have been reviewed and strengthened. They will be kept under constant review to ensure they operated optimally.	Feb-23	Director of Policy, Programmes & Performance
Status Update	Recommendation	Response / Improvement Work to Date	Action	Progress	Deadline	Responsible

Complete	R11. The Section 151 Officer should ensure financial reporting on significant capital projects is enhanced so that  R11.1 a clear agreed budget for the project is identified and the underlying financial analysis is maintained  R11.2 a clear agreed project expenditure amount can be reported through appropriate governance processes  R11.3 where there are changes in the original financial assumptions that there is an assessment on the project's financial viability with appropriate reporting  R11.4 the revenue impact of any changes in the capital project are addressed in future budget setting	Currently, as part of the budget monitoring process, the spend on Capital Projects are reported monthly and reviewed at Capital Board, CMT and then Cabinet.  For 2023/24, as part of the budget setting process, a new Capital Strategy was approved. This set out a capital programme much reduced in scale and cost compared to previous years. The focus of the Capital Strategy in the short and medium term is delivery of an effective Asset Management Plan and an ambitious Asset Disposal Strategy including reducing the number of buildings held by the Council.	11.1 The Corporate Director of Resources will oversee the review work to be undertaken by the Director of Commercial Investment in regard to improving the role of the Capital Board in meeting a number of these recommendations. That review will incorporate the recommendations above.	The Section 151 Officer attends Capital Board meetings at which these issues are addressed.  At the monthly meetings of the Capital Board, the financial performance of the capital programme is reviewed. The Board reviews the progress made with delivery of capital projects including consideration of risks, financing and contracts completion and compliance issues.  The Council tax Setting process for 2023/24 included a new Capital Strategy document which joined together the capital programme, asset management plan and treasury management strategy. This alongside the main budget report emphasised the importance of reducing debt through asset disposals, a significantly paired back capital programme and the consequent impact through the treasury management strategy on borrowing costs on the budget and Medium Term Financial Plan.	May / June 2022	Corporate Director of Resources
Complete			11.2 The review of the monthly budget report format will also take into account these recommendations and report to the Audit and Governance Committee, the Scrutiny and Overview Committee and finally Cabinet taking into account members' views.	Capital projects will continue to be monitored through the monthly Financial Performance Report. The focus in the autumn of 2022 shifted to paring back the capital programme and producing an asset management plan and disposals programme. Enhancements to capital monitoring and reporting have been made in 2023-24 through the introduction of the Verto software system to monitor project delivery and risks, building upon the work undertaken to develop the capital strategy. This addresses the issues raised by R11.1 and R11.2.	Dec-22	Corporate Director of Resources
<b>Status Update</b>	<b>Recommendation</b>	<b>Response / Improvement Work to Date</b>	<b>Action</b>	<b>Progress</b>	<b>Deadline</b>	<b>Responsible</b>
Complete	R12. The Chief Executive should put in place arrangements to consider inherent conflicts of interest for executive officers	The Council's Officer Code of Conduct in the Constitution includes provision for declaration of interest. It provides that "Officers in Tier 1-3 (Head of Service and above) are required to complete an annual declaration of interest. However, should a conflict arise at any time you must report it to your manager immediately and declare it in writing as above and not wait until the annual declaration.	12.1 A new code of conduct for all officers is currently in development which will incorporate best practice in regard to the declaration of interests and arrangements for managing any conflicts.	<b>This task has been completed and approved by Full Council in March 2022</b>	May-22	Monitoring Officer
Still in progress			12.2 An annual review of declarations for all officers will be undertaken each May. This will update a formal register of all declarations to be published on the council website.	This is planned for the end of the financial year.	May annually	Head of Internal Audit
Complete			12.3 CMT, DMTs and all internal governance boards will have declarations of interest added as a standing item to their agendas	This has been actioned and completed	May-22	Director of Policy, Programmes & Performance
Complete			12.4 The Statutory Officers' Board will amend its terms of reference to include the formal review of any officer conflicts of interest and the agreement of arrangements for managing them	There is a standard agenda item for declaration of interest at the Statutory Officer's Board meeting. Officers are aware of the need to withdraw from parts of the meeting where there is likely to be a conflict of interest.	May-22	Chief Executive

## LONDON BOROUGH OF CROYDON

<b>REPORT:</b>	<b>AUDIT &amp; GOVERNANCE COMMITTEE</b>	
<b>DATE OF DECISION</b>	<b>01 Feb 2024</b>	
<b>REPORT TITLE:</b>	<b>Risk Register Entry 'Deep Dive'</b>	
<b>CORPORATE DIRECTOR / DIRECTOR:</b>	<b>Jane West Corporate Director Resources &amp; S151 Officer</b>	
<b>LEAD OFFICER:</b>	<b>Malcolm Davies Head of Anti-Fraud, Risk &amp; Insurance Malcolm.davies@croydon.gov.uk.</b>	
<b>LEAD MEMBER:</b>	<b>Councillor Jason Cummings, Cabinet Member for Finance</b>	
<b>AUTHORITY TO TAKE DECISION:</b>	<b>The Committee's terms of reference include monitoring the Council's risk management arrangements and providing independent assurance as to their adequacy.</b>	
<b>CONTAINS EXEMPT INFORMATION?</b> <i>(* See guidance)</i>	<b>NO</b>	<b>Public</b>  In line with the Council's commitment to openness and transparency, the corporate risk report will appear in Part A of the agenda unless there is specific justification for any individual entries being considered under Part B (set out under Paragraph 3 of Schedule 12A of the Local Government Act 1972 as amended).
<b>WARDS AFFECTED:</b>	<b>All</b>	

### 1 SUMMARY OF REPORT

- 1.1 The presentation updates the Audit & Governance Committee Members on progress against a selected entry from the corporate risk register (the register).

### 2 RECOMMENDATIONS

- 2.1 The Committee is asked to:

Note the contents of the risk presentation attached in Appendix 1

### 3 REASONS FOR RECOMMENDATIONS

- 3.1 Members at the 19th October meeting of the committee reviewed the corporate risk register, those risks recorded as 'high rated' or RED on the register.

3.2 Members have the ability to 'call in' risks for a deep dive and the following risk has been selected for a risk 'deep dive' at its 1 February 2024 meeting.

3.3 To assist the Council in meeting its best value duty.

## **4 BACKGROUND AND DETAILS**

4.1 The risk 'Deep Dive' selected for the committee's consideration is risk reference PR0013 'Sustainable Parking Services Income'. This risk has been a long standing 'red risk' on the council's corporate risk register.

4.2 This presentation is attached at Appendix 1.

4.3 In line with the Council's commitment to openness and transparency, the risk register presentations will appear in Part A of the agenda unless, in accordance with the Access to Information Procedure Rules in the Council's Constitution there is specific justification for any individual entries being considered under Part B (set out under Paragraph 3 of Schedule 12A of the Local Government Act 1972 as amended).

4.4 It should be noted that some of the grounds for exemption from public access are absolute. However, for others such as that in para.3, 'Information relating to the financial or business affairs of any particular person (including the authority holding that information)', deciding in which part of the agenda they will appear, is subject to the further test of whether, in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

## **5 ALTERNATIVE OPTIONS CONSIDERED**

5.1 N/A

## **6 CONSULTATION**

6.1 N/A

## **7. CONTRIBUTION TO COUNCIL PRIORITIES**

7.1 To assist the Council in meeting its best value duty.



## **8. IMPLICATIONS**

### **8.1 FINANCIAL IMPLICATIONS**

There are no direct financial implications arising from noting this report.

The Council's financial reporting and medium-term financial strategy takes account of the risk management framework, to consider the potential financial implications of risks.

(Comments approved by Lesley Shields, Head of Finance for Assistant Chief Executive and Resources on behalf of the Director of Finance.)

### **8.2 LEGAL IMPLICATIONS**

**8.2.1** The Audit and Governance Committee is required by its terms of reference to monitor the effective development and operation of the Council's risk management arrangements, to monitor progress in addressing risk-related issues reported to the Committee, and to provide independent assurance to the Council of the adequacy of the risk management framework and the internal control environment. Therefore, the consideration of risk "deep dive" reports assists Members in discharging these responsibilities.

Separately, the management of risk has a direct impact on the Council's ability to deliver its functions in a manner which promotes 'economy, efficiency and effectiveness' (Section 3 Local Government Act (LGA) 1999). The best value duty applies to all functions of the Council. The Council is currently the subject of Directions from the Secretary of State requiring service improvement and transformation. Specifically, under Directions dated 20 July 2023, issued by the Secretary of State under Section 15(5) of the Local Government Act 1999, the Council must, amongst other things "secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty, thereby delivering improvements in services and outcomes for the people of Croydon".

**8.2.2** Therefore, the consideration of this report also seeks to demonstrate the Council's compliance with its Best Value Duty under the Local Government Act 1999.

**8.2.3** Under Regulation 3 of the Accounts and Audit Regulations 2015, the Council must ensure that it has a sound system of internal control which facilitates the effective exercise of its functions and the achievement of its aims and objectives, ensures that the financial and operational management of the authority is effective, and includes effective arrangements for the management of risk. This report also seeks to demonstrate compliance with these legal duties.

**8.2.4** (Approved by: Sandra Herbert, Head of Litigation and Corporate Law on behalf of the Director of Legal Services and Monitoring Officer Stephen Lawrence-Orumwense 17/11/2023)

## **8.3 EQUALITIES IMPLICATIONS**

8.3.1 None

## **OTHER IMPLICATIONS**

8.3.2 None

## **9. APPENDICES**

9.1 Risk Presentation Parking Services 'Sustainable Parking Income'

## **10. BACKGROUND DOCUMENTS**

10.1 None

## **11. URGENCY**

11.1 N/A

## LONDON BOROUGH OF CROYDON

<b>REPORT:</b>	<b>AUDIT AND GOVERNANCE COMMITTEE</b>	
<b>DATE OF DECISION</b>	<b>1<sup>st</sup> FEBRUARY 2024</b>	
<b>REPORT TITLE:</b>	<b>WHISTLEBLOWING DISCLOSURES</b>	
<b>CORPORATE DIRECTOR / DIRECTOR:</b>	<b>STEPHEN LAWRENCE-ORUMWENSE DIRECTOR OF LEGAL SERVICES &amp; MONITORING OFFICER JANE WEST CORPORATE DIRECTOR OF RESOURCES</b>	
<b>LEAD OFFICER:</b>	<b>STEPHEN LAWRENCE-ORUMWENSE DIRECTOR OF LEGAL SERVICES &amp; MONITORING OFFICER</b>	
<b>LEAD MEMBER:</b>	<b>CLLR JASON CUMMINGS LEAD MEMBER FOR RESOURCES</b>	
<b>DECISION TAKER:</b>	<b>N/A</b>	
<b>AUTHORITY TO TAKE DECISION:</b>	<b>N/A</b>	
<b>KEY DECISION?</b> [Insert Ref. Number if a Key Decision]	<b>No</b>	<b>REASON: N/A</b>
<b>CONTAINS EXEMPT INFORMATION?</b>	<b>NO</b>	
<b>WARDS AFFECTED:</b>	<b>N/A</b>	

### 1 SUMMARY OF REPORT

- 1.1 The Council's Whistleblowing Policy provides for six monthly reports to the Committee on whistleblowing referral received. This report provides an update on disclosures for the period January 2023 to December 2024.

### 2 RECOMMENDATIONS

- 2.1 The Committee is asked to note the whistleblowing disclosures and the outcomes.

### **3 REASONS FOR RECOMMENDATIONS**

- 3.1 The responsibility of the Committee includes oversight of the effectiveness of the arrangements for whistleblowing.
- 3.2 The Whistleblowing Policy provides for 6 monthly reports to the Committee on whistleblowing disclosures.

### **4 BACKGROUND AND DETAILS**

- 4.1 Effective whistleblowing arrangements should function as a deterrent to malpractice, encourage openness, promote transparency, and underpin the risk management systems of the Council.
- 4.2 The Council has adopted the Whistleblowing Policy and Procedure attached as Appendix 1. The policy seeks to enable individuals to feel confident in raising concerns in the public interest about suspected serious wrongdoing in the Council and its services without fear of reprisals or victimisation even where the concern or allegations are not subsequently confirmed by the investigation. The policy commits to deal with disclosures of wrongdoing made, sets out how to raise concerns, the role of the Monitoring Officer to review disclosures and appoint Designated Assessors to investigate, the protection and support for disclosers, and the action to be taken following an investigation.
- 4.3 The policy provides that reports will be presented to Audit Committee on a six-monthly basis detailing the number of incidents which have been reported including a brief summary of the nature of the issues raised in the allegation and action being taken (but without compromising anonymity in any way).
- 4.4 The last report to the Committee on whistleblowing disclosures were at the meeting on 19<sup>th</sup> January 2023 and at which the Committee was advised that since July 2022, the Council had received 3 whistleblowing disclosures. *“First was anonymous relating to the use of Council vehicle for non-work purposes. The relevant service and staff were not identified, and so no further action could be taken. The second related to alleged financial abuse in a supported living accommodation. The allegation was the subject of a safeguarding enquiry and investigation under the Care Act 2014 and there was no evidence to substantiate the alleged abuse. But further oversight enquiries are being considered. The third related to alleged impropriety in recruitment and is the subject of ongoing investigation.”* The outcome of the investigation was that the referral was not upheld, and no further action was required.
- 4.4. For the period January 2023 to December 2023, the table below shows the disclosures received, and the outcomes of investigation undertaken.

Ref No	Discloser Known	Subject Matter	Outcome
002/2023	Yes	Council employees plugging in their cars to office power supply	Following Investigation, the substance of the disclosure was upheld, practice ceased, and disciplinary action taken against responsible officers. Manager was required to advise staff that this is not an acceptable use of Council infrastructure.
003/2023	No. Anonymous	Staff smoking at entrance to Council site.	Investigation found that there was a breach of the Council's policy of no smoking policy at its premises. The findings shared with responsible Head of Service to take action to enforce the no smoking policy.
004/2023	Anonymous	Alleged financial impropriety and abuse of power at a School	Ongoing investigation
005/2023	Anonymous	Alleged abuse of position to give an advantage or favour, bias, and conflict of interest in recruitment.	Following investigation, the referral was not upheld, and no further action taken.
006/2023	Yes.	Alleged malpractice, abuse of power and inappropriate conduct at a School.	Following investigation, the referral was not upheld, and no further action taken.
007/2023	Anonymous	Concerns relating to the strategy and operations of a Council service and the professional relationship between staff and service manager.	There was no suggestion of malpractice and such that the Whistleblowing Policy will apply. However, concern referred to the responsible Director to make enquiries to see if there are any merits and action required.

4.5 Although, there are no specific themes arising from these disclosures, there is however a gradual increase in the numbers of disclosures. It does also suggest that there is an awareness of the Council's Whistleblowing Policy and Procedure.

## **5. ALTERNATIVE OPTIONS CONSIDERED**

Not applicable.

## **6. CONSULTATION**

Not applicable

## **7. CONTRIBUTION TO COUNCIL PRIORITIES**

7.1 The recommendation aligns with the Mayor's Business Plan 2022-26 Outcome 1 Priority 4: Ensure good governance is embedded and adopt best practice.

## **8. IMPLICATIONS**

### **8.1 FINANCIAL IMPLICATIONS**

8.1.1 There are no financial implications arising from the recommendations.

### **8.2 LEGAL IMPLICATIONS**

8.2.1 There are no legal implications arising from the recommendations. However, the Public Interest Disclosure Act 1998 (PIDA) amended the Employment Rights Act 1996 ("the Act") create a framework for whistleblowing across the private, public, and voluntary sectors. The Act provides individuals in the workplace with protection from victimisation where they make a protected disclosure about malpractice or wrongdoing at work in accordance with the Act's provisions. The Council's Whistleblowing Policy and Procedure gives effect to this statutory requirement.

### **8.3 EQUALITIES IMPLICATIONS**

8.3.1 The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act.
- Advance equality of opportunity between people who share those protected characteristics and people who do not.

- Foster good relations between people who share those characteristics and people who do not.

The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex, and sexual orientation. Marriage and civil partnership status applies to the first part of the duty. There are no equalities implications arising from the recommendations.

## **9 APPENDICES**

Appendix 1 Whistleblowing Policy and Procedure

## **10 BACKGROUND DOCUMENTS**

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# Whistleblowing Policy and Procedure

*January 2023*

## **1. Introduction**

In 2020 and 2021, several external reviews identified serious concerns about the council's governance and financial position. The failings uncovered as a result of these reviews have shown how important it is that concerns about any form of malpractice can be raised, and appropriate action taken, as part of an open, transparent and accountable council.

Croydon Council is committed to promoting the highest standards of openness, probity and accountability for all of its employees, contractors and members and takes very seriously any form of malpractice that is identified or discovered. These standards are reflected in the Council's values which, with the Seven Principles of Public Life (the Nolan Principles), inform the staff code of conduct and HR policies, which all staff are required to follow.

'Whistleblowing' is when someone raises a concern about a possible fraud, crime, danger or other serious risk that could threaten colleagues, members of the public, members of the Council or the Council's reputation. This means that it is in the public interest that such concerns are disclosed.

Employees and others who have these concerns should be able to raise them without fear of victimisation, discrimination or disadvantage, and the law provides protection for employees who raise legitimate concerns about specific matters (see section 11).

It is in the best interests of the Council, its employees, residents and customers that wrongdoing is exposed and dealt with effectively. The earlier the concern is raised, the easier it is to take action.

Members of staff are often the first to realise that there may be something seriously wrong within an organisation. In many circumstances it will be appropriate for staff to raise their concerns with their line manager: the whistleblowing procedure is not intended to discourage this.

If staff are cautious about expressing their concerns because they feel that speaking up would be disloyal to their colleagues or to their employer, this may lead to concerns being ignored. Alternatively, there may also be circumstances where a member of staff has reported their concern to their line manager and received an unsatisfactory response.

The Council expects its employees and others that it works with who have serious concerns about any aspect of the Council's work which they believe shows serious malpractice or wrongdoing within the Council to report those concerns. Senior managers have a particular responsibility to report wrongdoing.

This policy and procedure puts a mechanism in place to enable such concerns to be reported without fear of reprisals and gives information about how the Council will respond.

## **2. The Council's commitments**

The Council will take very seriously any concern or disclosure about malpractice which is raised under this procedure and will treat all disclosures consistently and fairly.

The Council will ensure that its staff at all levels receive training in relation to whistleblowing law and this policy.

Employees, agency staff, contractors and members who raise a concern about malpractice will not suffer any form of retribution, victimisation or detriment as a result of making a general disclosure about something they consider to be of real concern in the public interest.

### **3. Aims of the Policy**

- i) To support and encourage members of staff, agency staff, contractors and members ('Disclosers') to raise concerns or allegations in the public interest about suspected serious wrongdoing in the Council and its services without fear of reprisals or victimisation;
- ii) To give a clear message that allegations of serious wrongdoing or impropriety are taken seriously by the Council;
- iii) To ensure thorough, prompt and confidential investigation of concerns raised about malpractice/ wrongdoing and action where appropriate;
- iv) To deter malpractice;
- v) To set out what employees can expect by way of confidentiality, protection and feedback when making a whistleblowing disclosure;
- vi) To identify independent support for employees who wish to make a whistleblowing disclosure;
- vii) To provide advice on how to pursue those concerns further if the individual is not satisfied with the outcome;
- viii) To ensure compliance with Government guidance and good practice.

### **4. Scope of the policy**

This policy is intended to tackle any concerns of malpractice which are made in the public interest by:

- A member of staff of the Council (both permanent and temporary staff);
- Agency staff, secondees and self-employed staff carrying out Council work;
- The staff of contractors, sub-contractors and suppliers carrying out work for the Council;
- Councillors and co-opted members of the Council.

'Discloser' for the purpose of this policy means an individual who has grounds to believe that malpractice has occurred, is occurring or is likely to occur in connection with the Council.

'Public interest' means the public good, not what is of interest to the public, nor the private interests of the Discloser. When considering whether a disclosure would be in the public interest, the potential harm which may arise if the disclosure is not made should be considered.

The Policy is intended to cover concerns where the Discloser reasonably believes that the disclosure tends to show past, present or likely future wrongdoing by another Council member of staff or any other person or persons acting on its behalf which falls into one or more of the following categories (or 'qualifying disclosures'):

- a) criminal offences, including incitement to commit a criminal act (this may include, for example, fraud, corruption, theft or Modern Slavery);
- b) unauthorised use or misuse of public funds;
- c) failure to comply with an obligation set out in law, the constitution or regulations (including unlawful discrimination to any member of staff or service user in relation to the legally protected characteristics of age, disability, gender, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation);
- d) abuse of authority, position or powers, whether or not for personal gain;
- e) abuse of clients (this may include discrimination or an improper relations with a client);
- f) miscarriages of justice;
- g) endangering someone's health and safety;
- h) permanent damage to the environment;
- i) conduct which may damage the Council's reputation;
- j) other unethical or improper conduct, including serious financial maladministration arising from the deliberate commission of improper conduct;
- k) non-compliance with professional standards, Council policies and the Council's constitution (including financial and contract regulations) and
- l) covering up wrongdoing in the above categories.

It is not necessary for the Discloser:

- to be directly or personally affected by the serious wrongdoing, but the disclosure must be made in the public interest;
- to have proof or evidence that such an act is being, has been, or is likely to be, committed - a reasonable belief is sufficient;
- to make the disclosure in relation to information gained in the course of their employment (for example, a disclosure made by an employee acting as a service user would still be protected under this policy).

No provision in any settlement agreement will prevent employees from making disclosures in the public interest.

Members of the public wishing to raise concerns should use the [Contact Us page on the website](#) or [make a complaint](#). See section 11 for more information on the way the Council will treat disclosures by members of the public.

The Discloser has no responsibility for investigating the matter - it is the Monitoring Officer's responsibility, acting on behalf of the Council, to ensure that an investigation takes place.

## 5. Out of scope of the policy

This policy should not be used to deal with serious and/ or sensitive matters that are covered by other Council policies and procedures, for example:

- a) the relationship between members of staff, their managers and the Council, for which the employee complaints procedure or collective dispute procedures are more appropriate;
- b) breach of the employee's own contract of employment (more appropriately addressed via the Council's disciplinary or grievance procedures);
- c) concerns and complaints by members of the public to which the corporate complaints procedure will apply;
- d) agency, self-employed or contract staff as an alternative to such dispute resolution procedures as are set out within their contract with the Council or their employer;
- e) issues which have already been settled by means of other Council procedures;
- f) concerns or complaints about the behaviour of members of the Council to which the Members' Code of Conduct will apply\*.

\*If a disclosure is made about action by a member of the Council in relation to one of the categories listed at section 4 above, it may also be considered under the whistleblowing policy.

## 6. Raising a concern or disclosure

An individual who has grounds to believe that wrongdoing has occurred, is occurring, or is likely to occur in connection with the Council and believes that the disclosure is in the public interest, should report their concerns as soon as practicable.

They may do this:

- a) to [MonitoringOfficer@croydon.gov.uk](mailto:MonitoringOfficer@croydon.gov.uk) which is only accessed by the Monitoring Officer, Deputy Monitoring Officer and their Executive Support Officer.  
  
Monitoring Officer  
Bernard Weatherill House  
8 Mint Walk  
Croydon, CR0 1EA
- b) via an online form on the [Online Form](#) which will only be accessed by the Monitoring Officer, Deputy Monitoring Officer and their Executive Support Officer.
- c) to [CHIEF.EXECUTIVE@croydon.gov.uk](mailto:CHIEF.EXECUTIVE@croydon.gov.uk) in the case of any allegations in relation to the Monitoring Officer (only accessed by the Chief Executive and their Executive Support Officer).
- d) via **Protect**, the confidential reporting facility (formerly Public Concern at Work) Tel: 0203 117 2520 or <https://protect-advice.org.uk/contact-protect-advice-line/>.

Protect will provide advice. If the discloser wishes them to do so, they will also pass details of the allegations to the Monitoring Officer (or their Deputy), or to the Chief Executive in the case of allegations in relation to the Monitoring Officer.

Wherever possible, the initial disclosure should be made in writing, with as much supporting evidence as possible, including:

- the reason why they are concerned;
- the background and history of the concern, including relevant dates;
- the extent to which they have personally witnessed or experienced the problem;
- the basis for their belief that wrongdoing has occurred, is occurring or is likely to occur;
- why they have not felt able to raise their concerns through normal management channels.

If it is not possible to provide the disclosure in writing, it should be made orally, i.e. by telephone or at interview with a Designated Assessor (see section 8 below).

The Council will acknowledge receipt of the concern/ disclosure where practically possible within five working days of the written or verbal communication.

- e) to the Council's external auditor, Grant Thornton:paul.dossett@uk.gt.com
- f) via an external route – see section 14 below.

## **7. Anonymous disclosures**

Disclosers are encouraged to give details of their identity. If the Discloser provides details of their identity when making a disclosure to Protect (the confidential reporting facility), these will not be passed to the Monitoring Officer or any other Council employee without the Discloser's express consent (see also Section 11 below). Any Officer revealing the name of the Discloser without their express permission may be subject to the Council's Disciplinary Procedures.

Disclosers wishing to remain anonymous may ask a third party, such as a trade union or a Guardian (see also section 15 below), to make a disclosure on their behalf.

Anonymous disclosures which do not have a point of contact to which correspondence can be sent (e.g. an email address) will be considered by the Monitoring Officer in consultation with a Designated Assessor but, depending on the information given and the credibility of the evidence, there may not be enough information for a thorough investigation without the investigator being able to contact the discloser for further information. Nor will it normally be possible to provide feedback on the outcome unless the Discloser provides an anonymised email address or seeks a telephone appointment. In these circumstances there may not be sufficient evidence to pursue an investigation.

It may be more difficult for anonymous disclosures to benefit from legal protections for whistleblowers as there would be no documentary evidence linking the employee to the disclosure for an Employment Tribunal to consider.

When considering whether to investigate an anonymous disclosure, the Designated Assessor will consider the following factors:

- the seriousness of the issues raised.
- the credibility of the concern.
- the likelihood of confirming the allegation through other suitable sources.

Anonymous allegations are preferred to concerns about serious wrongdoing not being reported.

## 8. Designated Assessors

The Council's Monitoring Officer will designate at least three senior members of staff of appropriate experience and standing within the Council as 'Designated Assessors'. The Monitoring Officer may revoke any such designation as necessary and appoint a new Designated Assessor.

On instruction by the Council's Monitoring Officer (or their Deputy), Designated Assessors are responsible for the preliminary investigation of disclosures and for making recommendations to the Council's Monitoring Officer as to what further steps, if any, should be taken. The Monitoring Officer will co-ordinate the training of the Designated Assessors in the use of this procedure.

The Designated Assessors are:

Officer	Post	Email
Malcolm Davies	Head of Insurance, Anti-Fraud and Risk	Malcolm.Davies@croydon.gov.uk
Catherine Black	Head of Payments, Revenues Benefits and Debt	Catherine.Black@croydon.gov.uk
Dave Phillips	Interim Head of Internal Audit	Dave. Phillips@croydon.gov.uk
Grace Addy	Head of Learning & Organisational Development	Grace.Addy@croydon.gov.uk
Simon Bashford	Community & Voluntary Sector Manager	Simon.Bashord@croydon.gov.uk
Caroline Baxter	Head of Business & Service Compliance	Caroline.Baxter@croydon.gov.uk
Debbie Broughton	Operations Manager	Debbie.Broughton@croydon.gov.uk
Steve Dennington	Head of Spatial Planning	Steve.Dennington@croydon.gov.uk
James Moore	Public Health Consultant	James.Moore@croydon.gov.uk
Valentine Nweze	Principal Social Worker & Head of Adult Mental Health & Substance Misuse	Valentine.Nweze@croydon.gov.uk
Shelley Prince	Head of Commissioning & Procurement	Shelley.Prince@croydon.gov.uk
Daniel Shepherd	Head of Independent Travel	Daniel.Shepherd@croydon.gov.uk
Graeme Smith	Head of Music and Arts	Graeme.Smith@croydon.gov.uk

or such other specialist independent assessor as the Monitoring Officer may designate.

A Designated Assessor may decline to investigate a disclosure on reasonable grounds such as to request another officer with specialist knowledge undertake the investigation.

The Monitoring Officer will endeavour to appoint a Designated Officer from a different service area to the one under investigation.

## 9. Review of the disclosure

The Monitoring Officer (or their Deputy) will, on receipt of a disclosure, consider whether it falls under the criteria for a Whistleblowing disclosure as set out in this policy. Where the Monitoring Officer (or their Deputy) believes that the disclosure is not covered by this policy they will consult with the Head of Internal Audit (or their Deputy). If they agree that the disclosure is out of the scope of this policy, they will (unless the disclosure is anonymous) advise the Discloser accordingly, directing them to an appropriate procedure where possible.

The Monitoring Officer (or their Deputy) may liaise with Human Resources on a confidential basis in relation to any disclosures which are more appropriately dealt with under HR procedures or vice versa.

Where they believe the disclosure to be consistent with this policy, the Monitoring Officer (or their Deputy) will pass it to a Designated Assessor within five working days of receipt.

On receipt of the disclosure, and where the identity of the Discloser is known, the Designated Assessor will contact the Discloser to offer a confidential interview and advise on the likely timescale for conduct of the investigation.

The interview should take place as soon as practicable after the initial disclosure but usually no later than 10 working days of the matter being referred to the Designated Assessor by the Monitoring Officer.

The Discloser may be accompanied by a local trade union representative or work colleague. The Designated Assessor may be accompanied by another officer to take notes. These notes will not identify the Discloser. For safeguards in relation to confidentiality, see Section 11 below.

The purpose of the interview will be for the Designated Assessor to:

- obtain as much information as possible from the Discloser about the grounds of the belief of malpractice including why the disclosure is considered to be in the public interest;
- consult with the Discloser about further steps which could be taken;
- provide further feedback on the likely timescale for completion of the review.

The Designated Assessor (or their supporting officer) will produce a summary of the meeting for record keeping purposes and provide a copy to the Discloser.

As soon as practicable after the interview (or after the initial disclosure if no interview takes place) and where possible within three weeks of the interview or initial disclosure if no interview takes place the Designated Assessor will:

- a) consult with the Monitoring Officer (or their Deputy);
- b) determine their recommendations as to the further steps that should be taken such as:
  - A report to the police or other appropriate public authority;
  - Investigation by the Council's Internal Auditor or Anti-Fraud team (this will be the usual course where there are allegations of financial irregularities);
  - An investigation into the Council's procedures and processes either internally by the Head of Internal Audit or externally e.g. by the Council's external auditors or by investigators appointed by the Council;



- Action under the Council's Employee Complaints Procedure;
- Referral for consideration under other specific procedures (e.g. child protection); and
- No further action (the basis for which see below).

The grounds on which the Designated Assessor may recommend no further action are as follows:

- if they are satisfied that there is no evidence that malpractice within the meaning of this procedure has occurred, is occurring or is likely to occur;
- if they are satisfied that the Discloser has raised concerns which are known to be untrue, or where the Discloser knows that there are no reasonable grounds for the allegation, in which case the matter may be referred for disciplinary action;
- if the matter concerned is already the subject of legal proceedings, or has already been referred to the Police or other public authority; and
- If the matter is already, has already been, or should be, the subject of proceedings under one of the Council's other procedures relating to staff.

The Monitoring Officer, Chief Executive and Corporate Director of Resources will review the Designated Assessor's anonymised recommendations to decide whether or not they agree with the recommendations in whole or part as soon as is reasonably practicable.

The recommendation(s) will be made without revealing the identity of the Discloser except in the circumstances set in Section 12 below.

If at any stage the Discloser decides not to proceed further with the disclosure, the Monitoring Officer may pursue investigation of the concern without the Discloser's further involvement.

Where a disclosure about the Monitoring Officer is made to the Chief Executive, the Chief Executive will take all actions related to the commissioning of an investigation and review of its findings and may nominate an independent person to support them to do so.

## **10. Outcome of the review**

Once it has been decided what further steps (if any) should be taken, the Designated Assessor or the Council's Monitoring Officer (or designated nominee) will inform the Discloser of the decision (where their identity is known). If no further action is proposed, the Designated Assessor will give the Discloser the reasons for this in writing.

Weaknesses in the Council's controls may be identified through investigations and recommendations to improve these will be raised with relevant managers, the Chief Executive, Corporate Director of Resources and Head of Internal Audit (without revealing the identity of the Discloser or that these may have originated through whistleblowing). Some concerns may be resolved by agreed action without the need for further investigation.

In all cases the Council will seek the most appropriate sanction against employees that it considers guilty of malpractice. This includes instigating action under the Council's disciplinary procedures, which may include dismissal, and, in conjunction with Counter Fraud and law enforcement agencies, instituting criminal proceedings.

The Council, wherever possible, will seek to advise the Discloser of the progress and outcome of the review. However:

- the Council is bound by the Data Protection Act 2018 and the Human Rights Act 1998 in respect of allegations relating to individuals and may not be able to disclose information where legal proceedings are pending;
- there are situations where the Council is legally required to conduct an investigation under separate procedures such as investigating allegations of ill-treatment or abuse of children or vulnerable adults. In these circumstances, the Council will, wherever possible, advise the Discloser that the disclosure will be investigated under another process, but there may be situations where it is not appropriate to disclose the existence of these investigations.

If the Council's Monitoring Officer and the Corporate Director of Resources decide not to implement fully any or all of the Designated Assessor's recommendations, that decision, anonymised with reasons, will be reported in the next six-monthly report to the Audit and Governance Committee. The Discloser shall also be advised of this outcome.

The Discloser will not be required by the Council, without their consent, to participate in any enquiry or investigation into the matter established by the Council unless there are grounds to believe that the Discloser may have been involved in the misconduct or malpractice.

Where the Discloser participates in any enquiry or investigation, that participation will usually be required to be on an open rather than a confidential basis. The obligations of the Designated Assessor in relation to confidentiality (section 11) will remain in relation to the identity of the individual as the original Discloser of information.

## **11. Protection for Disclosers**

The Employment Rights Act 1996, as amended by the Public Interest Disclosure Act (PIDA) 1998 provides the right for employees to take a case to an employment tribunal if they have been victimised at work or have lost their job because they have 'blown the whistle'. This is on the basis that the employee has a reasonable belief that what they have reported is true and the report is in good faith.

Unlike disclosures by employees, PIDA does not offer legal protection for disclosures made by members of the public. However, the Council will take reasonable and appropriate action to protect members of the public when they make a disclosure and will handle any disclosure made by members of the public in respect of serious misconduct in the same way as disclosures made by employees.

Protection provided by the law and this policy does not extend to those who:

- knowingly make a false, vexatious and/or malicious disclosure against another employee;
- make an allegation for personal gain.

Employees who make such disclosures and/or victimise others for making a disclosure under this policy may be disciplined under the Council's disciplinary policy.

## **12. Confidentiality**

The Council hopes that a person will raise their concern of malpractice openly.

However, it is recognised that there may be circumstances when a person would prefer to speak to someone confidentially first regarding their concerns. If this is the case, the Discloser should inform, at the outset, the person they discuss their concerns with.

If the Discloser asks for their identity not to be disclosed, the Designated Assessor, will document this request and will not disclose their identity without the Discloser's consent (in writing) unless required by law (for example where the information relates to a child or vulnerable adult or where the police require your personal evidence to investigate a possible criminal offence). The Council will alert the Discloser where appropriate to do so if it is necessary to tell the police or another official body.

The investigation process could reveal the source of the information and the Discloser may be asked by the Designated Assessor to provide a statement as part of the evidence required. In such cases, the Discloser will always be asked for their consent to disclose their identity.

There is however a risk that some colleagues may speculate about who has raised a concern through this Policy.

The Council, as a public authority, is subject to the Freedom of Information Act. This means that there is a presumption that the Council releases any information it holds, unless that information falls under one or more exemptions and, in most cases, that the application of that exemption is in the public interest.

The Council is mindful, in reconciling the legal obligation to release information it holds under the Freedom of Information Act 2000 (FOIA) and /or Environmental Information Regulations (EIR), of its legal obligations under:

- a) The Public Interest Disclosure Act 1998 to avoid the discrimination or victimisation of employees; and
- b) The Health and Safety at Work etc. Act 1974, to protect the health and safety (including mental health) of employees.

Requests for information under the FOIA and EIR must be supplied where the public interest supports the release of the requested information. When considering how to respond to such requests, the Council will consider whether answering a request might impact on an individual's privacy or a duty of confidentiality that may be owed to someone who has made a disclosure or whether, by answering the request for information, it would prejudice the ability to conduct an investigation.

If the Council receives a request for information which would lead to the identification of a Discloser, it will contact the Discloser to seek their views in respect of the release or withholding of the information requested and, wherever possible, it will seek to comply with those views.

The Designated Assessor will ensure that all information relating to the disclosure (including that held electronically) is kept secure so that, as far as practicable, only the Designated Assessor shall have access to it.

Disclosers are under an obligation to use all reasonable endeavours to ensure that they and their representative or work colleague (if any) keeps this matter strictly confidential save, as permitted under this procedure, as required by law or until such time as it comes into the public domain.

The Monitoring Officer will maintain a confidential and secure register of all concerns raised through this Whistleblowing Policy, actions taken in response and feedback given to Disclosers. This information is used for monitoring purposes and to detect if there are areas where there is a high incidence of alleged serious wrongdoing.

For the purposes of investigating whether or not there are any systemic issues that need to be addressed, and to monitor the performance of any investigation, an anonymised summary of all disclosures of serious wrongdoing made by employees will be sent on a quarterly basis to the Director for the area to which the complaint relates, where applicable and where it is possible to do so without risking breaching confidentiality. The Council will, where appropriate, share this information with other appropriate regulatory bodies.

All records will be treated as confidential and kept no longer than necessary in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulations. Individuals have a right to request and have access to certain personal data: however, some information may be withheld to protect a third party.

Reports will be presented to Audit and Governance Committee on a six-monthly basis detailing the number of incidents which have been reported including a brief summary of the nature of the issues raised in the allegation and action being taken (but without compromising anonymity in any way). Personal information regarding a Discloser will not be available save with the express consent of the Discloser.

Therefore, any document, report or recommendation prepared by the Designated Assessors in relation to the matter will not identify the Discloser, unless:

- the Discloser has consented to this in writing; or
- there are grounds to believe the Discloser has acted maliciously; or
- the Designated Assessor is under a legal obligation to do so; or
- the information is already in the public domain; or
- on a strictly confidential basis to the Designated Assessor's administrative assistant/administrative support; or
- on a strictly confidential basis to a professionally qualified lawyer for the purpose of obtaining legal advice.

### **13. Continuing concerns**

If, on conclusion of the review conducted by the Designated Assessor, the Discloser reasonably believes that the appropriate action has not been taken, they should raise their concerns, in the first instance, with the Monitoring Officer.

The Discloser may also seek advice from Protect or contact external audit or one of the prescribed bodies described in section 14 below.

### **14. External Disclosure**

While it is the Council's aim that this policy will give Disclosers the reassurance they need to raise such matters internally, the Council would rather that matters were raised with the appropriate external body than not at all.

Individuals are advised to get independent advice if they are not sure if they would be protected under law when making an external disclosure (eg with Citizens Advice).

They may make an external disclosure:

- on a confidential basis, directly with appropriate external bodies (see below). Before taking any such action, the Discloser is encouraged to inform the Monitoring Officer or Designated Assessor where one is already undertaking an investigation;
- if they believe that the information being passed on is substantially true i.e. more than just suspicion and have reasonable grounds for believing that disclosure within the organisation would lead to evidence being concealed or destroyed or that the Discloser will be subjected to a detriment as a result of making the disclosure;
- on a confidential basis for the purpose of making legal advice.

Disclosers should not disclose information that is confidential to the Council or to anyone else, such as a client or contractor of the Council, except on the above basis or to one of the prescribed persons or bodies as set out below.

There are a number of public authorities to whom Disclosers may make such a disclosure and enjoy the protection of the Public Interest Disclosure Act 1988. These are referred to as prescribed people and bodies. A complete list of prescribed people and bodies, their contact details and guidance can be found on the Department for Business, Energy & Industrial Strategy website: [www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2](http://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2).

The list is not exhaustive; it identifies organisations that are most relevant to the local authority environment and which have usually been designated as prescribed persons because they have an authoritative or oversight relationship with the sector, often as a regulatory body.

Disclosures which are made to the media will not, in most cases, be protected under the Public Interest Disclosure Act.

## **15. Support for Disclosers**

If Disclosers raise a genuine concern under this Policy, they should have nothing to fear and they will not be at risk of losing their job or suffering any form of retribution as a result. Provided they are acting in good faith, it does not matter if they are mistaken, no action will be taken against them.

The Employment Rights Act 1996 (as amended by PIDA) provides legal protection for staff who raise concerns about matters which are 'qualifying disclosures' (as set out in section 4 above).

The Council will not tolerate the harassment or victimisation (including informal pressures) of anyone raising a genuine concern in the public interest and it would be considered a disciplinary matter to victimise anyone who has raised a genuine concern.

Any investigation undertaken in response to a concern or a disclosure will not influence, or be influenced by any disciplinary, capability or redundancy procedures that already affect an employee.

Any Discloser who considers that they have been, are being or are likely to be victimised, dismissed, made redundant or made to suffer some other detriment as a result of making a report under this procedure, should report their concerns to the Monitoring Officer. The matter will then be dealt with as a new referral under this procedure.

Where appropriate, the Council will provide support after a disclosure has been made, such as mediation and dispute resolution, to help rebuild trust and relationships.

Anyone unsure about raising a concern can contact Protect for independent advice on 020 3117 2520 or at <https://protect-advice.org.uk/advice-line/>

Every effort will be made to minimize any difficulties that the Discloser may experience as a result of raising a concern. For instance, if the investigation finds that malpractice/wrongdoing has occurred, the Discloser may be required to give evidence at a disciplinary hearing or at court. In such circumstances the Council will arrange for the Discloser to receive advice and support throughout the process.

See also section 16, Guardians, below.

Advice and support are also available from:

- HR – [Humanresources@croydon.gov.uk](mailto:Humanresources@croydon.gov.uk)
- Internal Audit – [internal.audit@croydon.gov.uk](mailto:internal.audit@croydon.gov.uk)
- Anti-Fraud team - [caft@croydon.gov.uk](mailto:caft@croydon.gov.uk)
- ACAS - [www.acas.org.uk/contact](http://www.acas.org.uk/contact)
- [a local trade union](#).

## 16. Guardians

Guardians are specially trained members of staff who can offer support to colleagues who are experiencing an issue in the workplace. They provide a safe space to confidentially share concerns about behaviour or the culture at Croydon, to take through issues and be signposted to relevant support and guidance. More information can be found on the intranet.

At Croydon Council we have a set of values we ask everyone to follow and work by. These values sit underneath and inform our staff code of conduct and HR policies – policies that all staff are asked to follow.

However, we know from staff feedback that in practice these values are not always followed and that there are instances of staff behaviour that have caused concern and distress to others. Our Guardians programme provides support to staff to resolve any issues that they face and ensures that we stick to our commitment to creating a safe and inclusive working environment for all.

Guardians will make themselves available to staff who have something that they might want to share and talk through but are unsure about the best way of doing so. Guardians respect and maintain absolute confidentiality over issues raised with them except in cases where the issues might amount to a criminal offence.

They are trained in the roles and processes that exist within Croydon Council and are available to advise other staff about the options available if they have an issue to raise.

The [Contact a Guardian intranet page](#) lists the profiles and contact details of the Council's Guardians.

## 17. Who is responsible?

The Chief Executive has overall responsibility for the Whistleblowing Policy.

The Corporate Director of Resources is responsible for undertaking formal assessment of the effectiveness of the policy, identifying any patterns and reporting this to the Chief Executive and Audit and Governance Committee.

The Monitoring Officer will maintain a central register of all matters raised under the Whistleblowing Policy in order to assess the effectiveness of this policy and any emerging pattern. The Monitoring Officer will bring points of learning for the Council (anonymised) to the Statutory Officers Board and, where appropriate, Corporate Management Team.

It is not the responsibility of members of the Council to monitor this Policy or the disclosures made.

## **18. Review**

The Monitoring Officer will conduct regular surveys to ascertain the satisfaction of whistleblowers.

This policy and procedure will be reviewed annually and may be amended from time to time by the Council following review by the Audit and Governance Committee. Any comments or suggestions about the policy and procedure should be referred to the Monitoring Officer.

### **For general advice on the procedure contact:**

Monitoring Officer  
Bernard Weatherill House  
8 Mint Walk  
Croydon, CR0 1EA  
MonitoringOfficer@Croydon.gov.uk  
Tel: 020 8726 6000 ext. 27024

Stephen Lawrence-Orumwense, Director of Legal Services and Monitoring Officer  
Bernard Weatherill House  
8 Mint Walk  
Croydon, CR0 1EA  
stephen.lawrence-orumwense@croydon.gov.uk  
Tel: 07716092579

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