

## **Annual Governance Statement 2019/20**

### **1. Introduction**

The preparation and publication of an Annual Governance Statement (AGS) is a statutory requirement. The published AGS provides an open and honest self-assessment of Solihull Metropolitan Borough Council's governance arrangements across all of its activities, with a clear statement of the actions taken or required to address any identified areas of concern.

The Statement covers the Council's significant corporate systems, processes and controls, including in particular those designed to ensure that:

- Laws and regulations are complied with;
- Council policies are implemented in practice;
- Required processes are adhered to;
- High quality services are delivered efficiently and effectively;
- The Council's values and ethical standards are met;
- Performance and financial statements and other published information are accurate and reliable;
- Human, financial and other resources are managed efficiently and effectively.

During 2019/20, some of the key tangible outcomes associated with having effective governance arrangements include:

- No significant breaches of the law;
- External Audit issued an unqualified opinion on the latest financial statements;
- The Council maintained its good track record of managing within tight financial constraints and achieving savings.

### **2. Scope of Responsibility**

The Council is responsible for ensuring that its business is conducted in accordance with the law and proper standards, that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. The Council also has a duty to put in place proper arrangements for the governance of its affairs, and the effective discharge of its functions to secure continuous improvement and the management of significant risks.

To demonstrate commitment to achieving good governance, the Council has embedded good governance principles in its constitution, policies and procedures, as well as adopting a Local Code of Corporate Governance. The Accounts and Audit (England) Regulations require the Council to prepare an AGS which explains how the Council complies with the Code.

The AGS is reviewed by the Audit Committee prior to its approval by the Governance Committee. Once approved, it is signed by the Leader and Chief Executive of the Council before being published on the Council's website.

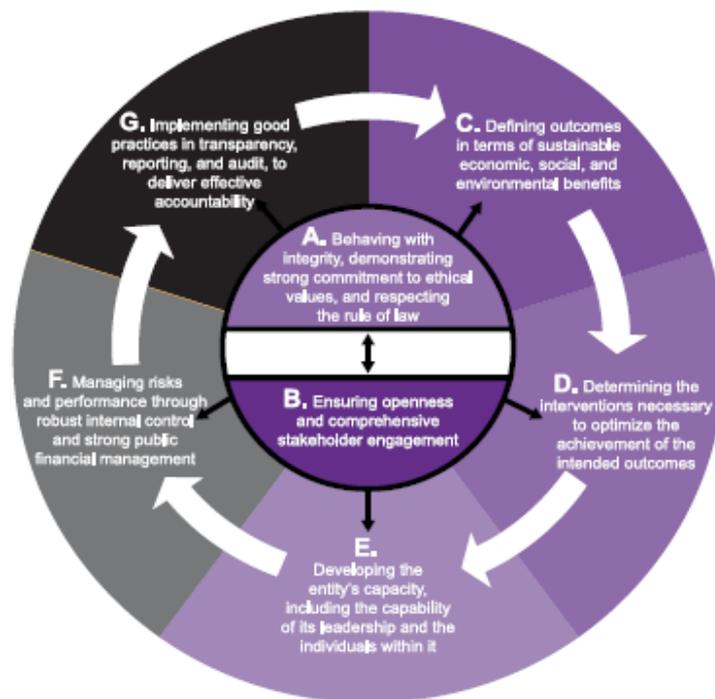
### **3. The Purpose of the Governance Framework**

Each local Council operates a governance framework that brings together a set of legislative requirements, governance principles, corporate strategies and policies, systems, management processes, culture and values. The quality of these arrangements underpins the level of trust in public services and is fundamental to the Council's statutory and democratic obligations. A

framework of good governance allows the Council to be clear about how it discharges its responsibilities.

The system of internal control is a significant part of the governance framework and is designed to manage risk to a tolerable level. However, it cannot eliminate all risk and can therefore only demonstrate reasonable assurance of effectiveness. The management of risk is an ongoing process designed to identify and prioritise the risks associated with the achievement of the Council's policies, aims and objectives, to evaluate the likelihood of those risks and to manage their impact should they happen.

A robust governance framework has been in place for a number of years, and in particular for the year ended 31st March 2020 and up to the date of approval of the annual report and statement of accounts. This is consistent with the principles of the CIPFA/SOLACE Framework Delivering Good Governance in Local Government (2016). The Code is based on the following principles.



Extract from CIPFA/SOLACE 'Delivering Good Governance in Local Government'

#### 4. The Governance Framework

The Local Code of Corporate Governance is a statement of the Council's commitment to have an effective governance framework. The Code describes the core principles that underpin the governance framework, including how the Council:

- Upholds high standards of conduct and behaviour;
- Engages with local people and stakeholders to ensure robust public accountability;
- Creates and implements a vision for the local area;
- Determines the interventions necessary to optimise the achievement of outcomes;
- Develops the capacity and capability of members and officers to be effective;
- Takes informed and transparent decisions that are subject to effective scrutiny and risk management;
- Has members and officers that work together to achieve a common purpose.

The following details the systems, policies and procedures that the Council had in place during the year ended 31st March 2020 to meet these principles.

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

Rationale: Local government organisations are accountable not only for how much they spend, but also for how they use the resources under their stewardship. This includes accountability for outputs, both positive and negative, and for the outcomes they have achieved.

To demonstrate its commitment to achieving good governance, Solihull Council has:

- A Local Code of Corporate Governance.
- A culture of behaviour based on shared values (known as the Council brand of being 'Open, Honest, Clear, Approachable and Keeping its Promises') and good conduct in line with the Code of Conduct for Councillors, Code of Employee Conduct, Dignity at Work Policy, Whistleblowing Policy, Anti Money Laundering Policy, Counter Fraud and Corruption Strategy and Prevention of Bribery Policy.
- A process for considering any complaint that a Councillor has breached the Councillor Code of Conduct.
- An Equal Opportunities Policy Statement, a published equality objective and annual equality information reports on services and employees describing how the Council has complied with its public sector duties under the Equality Act 2010, as well as a process for taking 'due regard' which includes Fair Treatment Assessments and an equalities consideration section within Member reports.

### **Core Principle B: Ensuring openness and comprehensive stakeholder engagement**

Rationale: Local government is run for the public, good organisations therefore should ensure openness in their activities. Clear, trusted channels of communication and consultation should be used to engage effectively with all groups of stakeholders.

To demonstrate its commitment to achieving good governance, Solihull Council has:

- Agreed role definitions for Councillors, which support accountability by providing transparency and clarity.
- A Petition Scheme.
- An active role in the work of Solihull's Local Safeguarding Children Partnership and Safeguarding Adults Board.
- A Corporate Complaints and Compliments Policy and Procedure and an annual report detailing all complaint and compliment activity.
- A Customer Strategy which provides direction and clarity about how the Council plans to enable customers to interact with it.
- A Solihull Connect service which provides customers with advice, information and access to services by providing walk in centres, a telephone and email contact centre, social media channels and a range of digital access channels including our website.
- A Communications Strategy which includes a forward plan of all communication activity.
- A 'Stay Connected' email alert service which keeps customers connected to and informed about Council services.
- Promoted initiatives and delivered a number of schemes including School Streets and Tanworth Court.

### **Core Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits**

Rationale: The long-term nature and impact of many of local government's responsibilities mean that it should define and plan outcomes and that these should be sustainable. Decisions should further the organisation's purpose, contribute to intended benefits and outcomes, and remain within the limits of authority and resources.

To demonstrate its commitment to achieving good governance, Solihull Council has:

- A Council Plan setting out strategic priorities to 2020 and an overall strategic direction to 2025.
- A Solihull Connected Delivery Plan which sets out the future direction for investment in our transport system.
- A Procurement Strategy, Rules for Contracts and a Procurement Board which approves the appropriate procurement route for all significant expenditure.
- A Social Value Policy which includes the requirement for all tenders and requests for quotes to include consideration of Social Value. Where appropriate, Social Value will be evaluated, measured and contract managed using the Social Value Portal.
- A Sustainability and Transformation Plan (STP) which sets out initial thoughts on how we will improve the health and wellbeing of people living in Birmingham and Solihull.
- A joint Health and Wellbeing Strategy which outlines our key priorities on how we will improve the health and wellbeing of the population of Solihull.
- A Local Plan which sets out a range of policies that are designed to promote sustainable development.
- A Climate Change declaration approved by Full Council in October 2019, which is the Council's statement of intent to protect the environment. This is supported by the Council's Climate Change Prospectus, which was refreshed in March 2020 and which is our roadmap to delivering greater sustainability.
- A Clean Air Strategy which sets out our clear commitment to improving air quality and the specific actions that we will take to achieve our ambition for cleaner air across our borough.

#### **Core Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes**

Rationale: Local government achieves its intended outcomes by providing a mixture of legal, regulatory, and practical interventions (courses of action). Determining the right mix of these courses of action is a critically important strategic choice that local government has to make to ensure intended outcomes are achieved.

To demonstrate its commitment to good governance, Solihull Council has:

- Developed a high level basket of performance measures to track progress against the delivery of key areas of Council activity.
- Arrangements in place to ensure that progress made against the Council Plan is regularly reported.
- Developed a Medium Term Financial Strategy which is designed to help provide a stable financial base from which to deliver the Council's priorities.
- Worked with partners, providers and contractors to develop awareness and a common understanding of the Council's expectations on risk management.
- A Decision Making protocol which sets out how decisions are made to ensure that these are efficient, transparent, and accountable to local people.
- A Calendar of dates of all upcoming Council, Cabinet, Scrutiny and other committee meetings and forward plans which list the key-decisions that are planned to be made.
- Arrangements in place to publish the annual External Audit report.

## **Core Principle E: Developing the entity's capacity, including the capability of its leadership and the individuals within it**

Rationale: Local government needs appropriate structures and leadership, as well as people with the right skills, appropriate qualifications and mindset, to operate efficiently and effectively and achieve intended outcomes within the specified periods.

To demonstrate its commitment to good governance, Solihull Council has:

- Robust recruitment and selection processes and induction programmes for new employees.
- An induction programme for newly elected Members and opportunities for longer serving Members to update their training and skills.
- A programme of monthly 1 to 1's and annual performance and development reviews to measure individual performance targets and identify further development opportunities, with pay progression related to performance.
- A Managers Handbook which outlines fundamental information and forms an integral part of key managerial responsibilities and performance objectives.
- A Pay Policy that sets out the Council's approach to pay.
- An agreed Constitution that sets out roles and responsibilities, decision making and financial management arrangements.
- A protocol and guidance to assist both members and officers to work effectively together.
- A member structure that includes a Leader of the Council and a Cabinet; Scrutiny Boards that check and monitor what the Cabinet does; a Remuneration Committee to deal with terms and conditions of staff appointments; a Governance Committee to deal with constitutional matters, promote and maintain high standards of conduct by councillors, co-opted members, parish and town councillors; a Planning Committee to determine planning applications and consider planning policies; a Licensing Committee to deal with all aspects of the Licensing Act.
- Within the Scrutiny arrangements, a facility for decisions to be "called in" by Members.
- A management structure that includes a Chief Executive (also known as the Head of Paid Service); a Corporate Leadership Team whose membership comprises of the Chief Executive, a Director of Resources and Deputy Chief Executive and the Directors of Public Health, Adult Care and Support, Children's Services and Skills, and Economy and Infrastructure.
- An Assistant Directors Group whose membership comprises of the Assistant Directors of Finance & Property Services, Business Systems, Growth & Development, Highways & Environment, Communities & Partnerships, Children, Young People & Families, Inclusion & SEND, Adult Care & Support, Commissioning and Public Health.

## **Core Principle F: Managing risks and performance through robust internal control and strong public financial management**

Rationale: Local government needs to ensure that the organisations and governance structures that it oversees have implemented, and can sustain, an effective performance management system that facilitates effective and efficient delivery of planned services. Risk management and internal control are important and integral parts of a performance management system and are crucial to the achievement of outcomes.

To demonstrate its commitment to good governance, Solihull Council has:

- Arrangements in place to ensure effective and transparent decision making by:
  - holding meetings in public (including webcasting certain meetings) unless there are good reasons for confidentiality
  - providing the public with an opportunity to ask questions or make representations at full Council, Cabinet and Regulatory Committees
  - publishing a Forward Plan of Key Decisions as well as agendas and minuted decisions
  - maintaining an effective scrutiny function to provide constructive challenge, determine whether decisions follow the agreed process, are in accordance with the Council's policy framework and within approved budget
  - engaging with the public through the planning process
- An Audit Committee (which includes independent and elected members) and an Internal Audit Service.
- An Internal Audit function that provides an independent and objective opinion to the organisation on the control environment, by evaluating its effectiveness in achieving the organisation's objectives.
- A Risk Management Policy that includes both strategic and operational risk management, regular reporting to the Corporate Leadership Team and Audit Committee and publication of high level risks online.
- Whistle-blowing arrangements and a complaints process for dealing with complaints in an effective, transparent and accessible way.
- A Publication Scheme that describes the kinds of information available and provides guidance about how to access personal information and submit a Freedom of Information request.

### **Core Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability**

Rationale: Accountability is about ensuring that those making decisions and delivering services are answerable for them. Effective accountability is concerned not only with reporting on actions completed, but also ensuring that stakeholders are able to understand and respond as the organisation plans and carries out its activities in a transparent manner.

To demonstrate its commitment to good governance, Solihull Council has:

- Produced an Accounting Statement which includes our external auditor's independent opinion and all of the Council's financial statements.
- Produced an Annual Governance Statement which details the Council's system of "internal control" (i.e. the policies, processes, tasks, behaviours and other aspects of the organisation) and our commitment to achieving good governance.
- Published agendas, minutes and decisions as well as the criteria, rationale and considerations on which decisions are based.
- An effective internal audit service with direct access to Members in place, providing assurance with regard to governance arrangements and monitoring the audit recommendation tracker to ensure that they are acted upon.
- Committed to continuous improvement and has embraced sector led improvements. For example, Solihull is active in the Association of Directors of Public Health, the Association of Directors of Children's Services and the Association of Directors of Adult Social Services.
- Published information online in accordance with the Local Government Transparency Code 2015.
- Continued to be a constituent member of the West Midlands Combined Authority.

## **5. Review of Effectiveness**

The Council is required to undertake at least annually, a review of the effectiveness of its governance framework, including the system of internal control. Accordingly, the Council has developed a methodology for reviewing its framework and producing this Annual Governance Statement. This methodology accords with proper practice and is co-ordinated by the Governance and Risk Management Advisor. The outcomes of the review are considered by the Chief Executive with support from the relevant statutory officers, Audit Committee and Governance Committee (who approve the final Statement). Once approved, the Annual Governance Statement is published alongside the Statement of Accounts.

The following describes the process that has been applied in maintaining and reviewing the effectiveness of the governance framework, in particular assurances gathered from:

- Full Council (the authority)
- Cabinet Members (the executive)
- Scrutiny Boards
- Audit Committee
- Governance Committee
- Director of Resources and Deputy Chief Executive (the Chief Financial Officer and Section 151 Officer)
- The Head of Legal and Democratic Services (the Monitoring Officer)
- The Solicitor to the Council
- Management
- Internal Audit
- Risk, Performance and Information Governance Arrangements
- Financial Management
- Equality Management
- Health and Safety
- Customer Feedback
- External Audit
- External Inspections and Peer Challenges

### **5.1 Assurance from Members**

#### **5.1.1 Full Council**

The Council consists of 51 councillors who are elected by the local community. In terms of reviewing the governance framework and producing this Annual Governance Statement, during 2019/20, Full Council:

- a) approved the Council Plan;
- b) approved the Council budget for 2020/21, the Medium Term Financial Strategy & Efficiency Plan and the Capital Strategy;
- c) approved the Council's Pay Policy Statement;
- d) approved the Treasury Management Strategy 2020/21 to 2029/30;
- e) approved the Council Tax Reduction Scheme from April 2020;
- f) approved the Minimum Revenue Provision (MRP) Policy Statement contained within the Corporate Capital Strategy 2020/21 to 2029/30;
- g) approved the revised forecasts for the 2019/20 Capital Financing Requirement and Authorised Limit;
- h) made a statement of Intent on protecting the environment;
- i) approved the revised polling district and polling place scheme;

- j) determined the numbers of seats and the terms of reference of Boards, Committees and Sub-Committees;
- k) were advised of the main decisions taken at the Portfolio Holders Decision Sessions and Cabinet Meetings;
- l) received the minutes of Scrutiny Boards as well as from the Audit, Governance, Remuneration, Planning and Appeals Committees;
- m) received various petitions on behalf of local residents, and deputations from members of the public wishing to address the Council;
- n) received Annual Reports from the Local Safeguarding Children Partnership (LSCP) and Solihull Safeguarding Adults Board (SSAB).

### **5.1.2 Cabinet Members**

The Cabinet is an executive group responsible for the overall business of the council. In terms of reviewing the governance framework and producing this Annual Governance Statement, during 2019/20, Cabinet:

- a) received regular reports on the Council's financial position and given the size of the Council, External Audit have confirmed that reporting is at an appropriate level of detail;
- b) received the annual risk management report and various other performance reports;
- c) approved the Council's Retail Relief Scheme for 2020-21;
- d) approved the Council Tax Discount of 100% for Solihull Care Leavers with effect from 1st April 2020;
- e) approved the publication of the Community Infrastructure Levy Annual Monitoring Report 2018/2019;
- f) approved the revised corporate capital programme and Housing Revenue Account (HRA) capital programme for 2019/20;
- g) approved the Council's Pub Discount Scheme for 2020-21;
- h) approved the Dedicated Schools Grant (DSG) Recovery Plan;
- i) approved the Progress Report of the Green Prospectus;
- j) approved the updated Social Value Policy;
- k) approved that the Council enters into the Joint Working Agreement to facilitate the delivery of the Materials Recycling Facility (MRF);
- l) agreed that the Berkswell Parish Neighbourhood Development Plan would form part of the Borough's statutory Development Plan.

### **5.1.3 Scrutiny Boards**

The decisions of the Cabinet are subject to scrutiny by a different group of councillors. In terms of reviewing the governance framework and producing this Annual Governance Statement, during 2019/20, Scrutiny Boards met regularly to monitor the work of Cabinet, to provide policy development support and to monitor the Council's performance against its stated objectives.

### **5.1.4 Audit Committee**

Audit Committee provide independent, effective assurance about the adequacy of the Council's governance environment. In terms of reviewing the governance framework and producing this Annual Governance Statement, during 2019/20, the Audit Committee:

- a) received the Council's Annual Governance Statement Report;
- b) received regular updates from the Council's External Auditors;
- c) received monitoring reports on aspects of internal control, treasury management, and risk management;
- d) received regular reports on the work undertaken by Internal Audit;

- e) noted the updated requirements of the CIPFA Financial Management Code;
- f) considered the annual audit letter.

### **5.1.5 Governance Committee**

Governance Committee is responsible for promoting and maintaining high standards of conduct by councillors, co-opted members, parish and town councillors. In terms of reviewing the governance framework and producing this Annual Governance Statement, during 2019/20, Governance Committee:

- a) approved the final Statement of Accounts for 2018/19;
- b) approved the Annual Governance Statement for 2018/19;
- c) approved the Recruitment and Selection Policy;
- d) approved the Menopause Policy;
- e) approved the revised Corporate Warning Marker Policy;
- f) approved the Employee Journey - Post Entry Training Policy;
- g) approved the Employee Journey - Leave of Absence Policy;
- h) approved the Employee Journey - Domestic Abuse Workplace Policy;
- i) reviewed the Council's Code of Conduct for Councillors and recommended revisions to the Code in light of the Committee on Standards in Public Life report;
- j) completed a review of Parliamentary polling districts and polling places;
- k) completed a Community Governance Review of the Parish of Tidbury Green;
- l) approved revisions to the Rules for Contracts;
- m) updated the list of the post holders authorised to witness the Council's seal for the purposes of Standing Order 32;
- n) approved the revised RIPA policy;
- o) approved a revised scheme of delegation to enable effective decision making to continue during the current Covid-19 outbreak.

There have been 2 cases of complaints about Member conduct during 2019/20. They were assessed by the Monitoring Officer who found no evidence of any breach of the Code of Conduct.

### **5.2 Assurance from the Director of Resources and Deputy Chief Executive (the Chief Financial Officer and Section 151 Officer) and the Head of Legal and Democratic Services (The Monitoring Officer)**

The statutory functions undertaken by these two officers ensures legality, financial prudence and transparency, providing a key source of assurance that the systems and procedures of internal control are effective, efficient and are complied with. Both officers are involved in the production of this Annual Governance Statement and provide individual assurances that it accurately describes the Council's governance environment.

### **5.3 The Role of the Chief Financial Officer**

At Solihull Council the Chief Financial Officer is the Director of Resources and Deputy Chief Executive. A desktop review of the CIPFA Statement on the Role of the Chief Financial Officer in Local Government (2016) was completed during 2016/17. The review concluded that the core requirements, personal skills and professional standards matched the overall profile of the Council's current Chief Financial Officer.

The new CIPFA Financial Management Code (FM Code) reaffirms that the role of the Chief Financial Officer is through compliance with the separate CIPFA statement mentioned above, which has been reviewed as part of the overall assessment of our compliance with the new CIPFA FM Code and our conclusions around compliance remain valid for 2019/20.

## **5.4 Assurance from Management**

Individual Directors, Heads of Service and Managers have provided appropriate assurance that the Council has effective governance arrangements in place but have identified that some operational actions are needed to improve the Council's overall internal control environment. As a result, an action plan has been developed and progress to implement the required improvements will be monitored.

## **5.5 Other Internal Assurance**

### **5.5.1 Audit Services**

The Council's internal audit arrangements are reviewed annually and considered to be effective for 2019/20, conforming to the requirements of the Public Sector Internal Audit Standards which includes CIPFA's Statement on the role of the Head of Internal Audit. The Head of Audit Services works closely with the Audit Committee and the Corporate Leadership Team to provide regular updates on work performed, including the Council's counter-fraud initiatives. An Annual Report of all work undertaken by the Council's Audit Services is presented to the Audit Committee each year.

In terms of audit reviews undertaken in 2019/20 the Council's key financial systems were on the whole found to be operating effectively, many with 'full' or 'substantial assurance'. However, audit reviews of ten other service areas identified significant issues with internal control, including non-compliance with the Council's Financial Regulations.

In conclusion and taking into account all available evidence, Internal Audit has independently rated the standard of internal control in operation across the Council as offering moderate assurance. This means that the control framework is adequate but a number of controls are not operating effectively. Management have taken significant steps to improve compliance with its regulations and a thorough Internal Audit Plan will be deployed throughout 2020/21 to monitor compliance.

### **5.5.2 Risk Management**

The Council's approach to risk management is outlined in its Risk Management Policy. The Council utilises a corporate risk management system to record identified risks and the mitigation that will be taken to manage them. Risks are regularly reviewed and there is an escalation process for the most significant risks, which ensures that senior management and Members are aware of those risks that pose the most serious threat to the Council and how they are being managed.

Regular risk management reports are presented to all Directorate Leadership Teams (DLT's), the Corporate Leadership Team (CLT) and Audit Committee. High level risks and the steps that we are taking to mitigate them are published on the Council's website.

### **5.5.3 Performance Management**

The Council's approach to performance management continues to evolve in response to the changing context nationally and locally. At the highest level, the Council's Priorities are set out within the Council Plan, which is reviewed annually.

The remit of each of the Scrutiny Boards is aligned to the Priorities in the Council Plan and the scrutiny work plan for 2019/20 was based around the 11 key programmes in the Council Plan. This places the Council Plan at the heart of scrutiny, enabling the Boards to scrutinise delivery in respect of the key programmes in detail and to inform strategy over the whole year. Overall

progress in delivering the Council Plan for 2019/20 was scrutinised by the Resources and Delivering Value Scrutiny Board in March 2020 and will be reported in the Council's Annual Report.

Each of the Priorities has a delivery plan which sets out annual delivery tactics. These are cascaded through the organisation using a range of approaches and are combined with directorate level performance reporting arrangements with key measures and feature in individual performance and development appraisal objectives.

The Council uses a corporate performance system which has been successfully deployed across the Council to record aims, objectives, milestones, performance indicators and the latest performance commentary.

The Corporate Leadership Team (CLT) monitors a key business scorecard on a monthly basis. This provides assurance across a whole range of key business process measures, including complaints, information governance, internal audit, risk management, financial management, human resource management and safeguarding. Where an issue is identified, CLT will commission a review to understand the underlying cause and appropriate corrective action. The CLT business scorecard also forms part of the Chief Executive's report to the Leader of the Council.

#### **5.5.4 Information Governance**

The Council's approach to Information Governance is underpinned by policy, guidance and training. This includes a full suite of policies based upon the information security standard BS ISO/IEC 27002:2013 and mandatory GDPR and Protecting Information training courses which all employees must complete. There are clear management and accountability structures in place, which are outlined in the Council's Information Governance Framework. A recent survey of business areas across the council confirmed all employees continue to have a good understanding of information governance matters in the workplace and where support and training can be obtained from when needed.

The Information Governance Manager, Head of Human Resources and the relevant Assistant Director have responsibility for scrutinising the cause, handling of and response to information security incidents. Each investigation will examine the containment of the incident, the risks posed, who needs to be notified about the incident and an overall evaluation and response to risks or systemic problems identified. Information security incidents are reported to the Corporate Leadership Team on a monthly basis.

#### **5.5.5 Financial Management**

The Council adopts a cash limited approach to its budget and Cabinet Members and Corporate Directors are responsible for ensuring services are delivered within budget.

#### **5.5.6 Equalities Framework**

The Council monitors and assesses its effectiveness of systems and strategies in place to advance equality and comply with its duties under the Equality Act 2010. As such:

- There have been no prosecutions or enforcement notices issued against the Council for breach of the Equality Act 2010;
- Annual equality information is published on the Council's internet pages on council services, the workforce and gender pay gap information. The latest information will meet the statutory deadline of the 30<sup>th</sup> March of each year;

- All new employees attend mandatory equality and diversity training as part of their induction and there is mandatory equality and diversity training for all staff that has to be refreshed every 3 years;
- Sessions on cultural awareness, equality and diversity are included in the training and development offer for new and existing councillors;
- Equality screening is included as part of the procurement process for organisations providing services to us or on our behalf;
- A process to assess against 'due regard' under the Act is in place for the decision making process.

### **5.5.7 Health and Safety**

An annual health and safety performance report is presented to the Cabinet Portfolio Holder for Resources. The Report provides an overview of key performance, including the number of reported accidents/incidents, commentary on key aspects of health and safety including legislative updates and looks forward into the next reporting year. As such, the report confirmed that:

- Health and safety arrangements are in place within SMBC, but with some areas of improvement required;
- There have been no regulatory interventions or enforcement action taken against the Council in the last year; however there has been some involvement and advice given by the Health and Safety Executive (HSE);
- Following the government review of building regulations and fire safety, changes to the industry are taking place which will affect SMBC and Solihull Community Housing (SCH) in the future;
- Additional funded resource will enable the SMBC Health and Safety Support Team (HSST) to improve its level of support to the organisation in the future;
- A new corporate health and safety action plan has been produced to help make improvements to the management of health and safety; this will be monitored and tracked by the new SMBC Corporate Health and Safety Board.

### **5.5.8 Regulation of Investigatory Powers Act (RIPA)**

The Council has a RIPA Policy which outlines the arrangements for undertaking covert surveillance in order to gather evidence of illegal activity and to ensure that it is only undertaken where it complies fully with all applicable laws. Roles and responsibilities are clearly defined and there is a nominated Lead Officer (a Solicitor in Legal Services), Senior Responsible Officer (Director of Resources and Deputy Chief Executive) and Authorising Officer (Head of Audit Services) as stated within the Regulation of Investigatory Powers Act 2000.

A RIPA inspection has recently been undertaken by the Investigatory Powers Commissioners Office; recommendations have been responded to and are in the process of being implemented. RIPA activity will be reported to the Governance Committee on an annual basis and a revised Policy was approved by the Committee in March 2020.

## **5.6 Assurance from Customers**

Overall, 711 complaints were received in 2019/20 which is a decrease of 16.5% compared to the 851 complaints in 2018/19. The data will be analysed and full information provided in the annual report.

The Council also received 1273 compliments in 2019/20, which is an increase of 12% compared to the 1136 compliments in 2018/19.

Full details of the numbers and reasons for complaints and compliments are published in the Annual Complaints and Compliments Report, that is expected to be presented to the Resources & Delivering Value Scrutiny Board during October 2020.

## **5.7 Assurance from External Inspections**

### **5.7.1 External Audit**

The last "Audit Findings" Report issued by Grant Thornton was presented to both Audit and Governance Committees in July 2019. The Report was positive, did not identify any control weaknesses and made no recommendations for management to consider.

External Audit provided an unqualified opinion on the accounts for the 31st March 2019, concluded that they are satisfied that in all significant respects the Council put in place proper arrangements to secure economy, efficiency and effectiveness in the use of resources and gave an unqualified opinion on the Council's Whole of Government Accounts submission.

### **5.7.2 Ofsted**

Ofsted is the Office for Standards in Education, Children's Services and Skills, it inspects:

- Services that care for children and young people;
- Services providing education and skills for learners of all ages;
- Local authorities to find out how well they carry out their statutory duties in relation to schools and other providers.

The most recent inspection was of the Council's services for children in need of help and protection, children in care and care leavers in November 2019. Inspection reports are available on the Ofsted website at [www.ofsted.gov.uk](http://www.ofsted.gov.uk)

The overall judgement was that services require improvement, however the services for children in care and care leavers were judged to be good, which is an improvement from the previous inspection in 2016. The report confirmed that no children were found to be at risk of harm during the inspection and the council's revised approach to early help was a strength.

The areas for improvement identified in the report are being addressed through an action plan which was submitted to Ofsted on 15 April 2020. Due to the impact of Covid-19 and the difficulties of being precise about timescales, Ofsted agreed to accept this as a draft rather than the final version. Members of the Children's Services, Education and Skills Scrutiny Board considered the action plan before its submission at a meeting on 12 March 2020.

### **5.7.3 Care Quality Commission (CQC)**

The Care Quality Commission (CQC) monitors, inspects and regulates health and social care services to make sure they meet fundamental standards of quality and safety. The CQC publishes performance ratings to help people choose care that is:

1. Safe
2. Effective
3. Caring
4. Responsive

## 5. Well-led

The latest inspection reports for each home are available on the Council's website at [www.solihull.gov.uk](http://www.solihull.gov.uk) and on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### 5.7.4 Peer Challenges

A peer challenge is a supportive but challenging 'critical friend' approach to assist councils and their partners to identify what is going well and where improvements can be made.

In 2019/20 the Council has benefited from two peer challenges undertaken by the Local Government Association. The first one was an Adult Social Care Peer Challenge and the second one was a Corporate Peer Challenge. The opportunities for future peer challenges continue to be kept under review.

### 5.7.5 Ombudsman Complaints

The Local Government and Social Care Ombudsman (LGSCO) provides a complaints handling service to ensure that local public services are accountable to the people that use them and that local authorities put things right when they go wrong. The LGSCO produces an Annual Review Letter for each council in which it publishes statistics relating to enquiries/complaints made about them to the Ombudsman. A copy of this is published in July each year on their website at <https://www.lgo.org.uk/information-centre/news/2019/jul/mapping-the-changes-ombudsman-issues-annual-review-of-complaints>.

The LGSCO has also launched a new interactive map, which gives people the chance to see how their local authority is performing at the click of a button. The new map collates the annual letters the Ombudsman sends to each local authority, how often they have complied with Ombudsman recommendations, the improvements they have agreed to implement, and published decisions all in one place.

During 2019/20, in terms of overall administration, numbers of complaints referred to the Council by the LGSCO increased very slightly (1%) and were responded to within the timescales agreed with the Ombudsman. All decisions made by the Ombudsman are published on the website at <https://www.lgo.org.uk/decisions>. The number of "at fault" decisions found by the LGSCO for these complaints as at the 31st March 2020 was low.

## 6. Group Activities

Where the Council is in a group relationship with another entity to undertake significant activities, the Annual Governance Statement includes a review of the effectiveness of the system of internal control within such group activities. The following describes the group activities for the year ended 31<sup>st</sup> March 2020:

### Coventry and Solihull Waste Disposal Company Ltd (CSWDC)

CSWDC is owned jointly by Coventry City and Solihull Metropolitan Borough Councils. A formal agreement sets out the operating arrangements between the two councils.

The company is subject to the Waste Incineration Directive and the conditions of its Environmental Permit issued by the Environment Agency. The Director of Resources and Deputy Chief Executive is a Non-Executive Director on the CSWDC Board and there is officer and Councillor representation at CSWDC meetings/panels, as required.

The company has appointed Ernst & Young LLP as its auditors. The latest published Annual Report and Financial Statements (for the year ended 31st March 2019) and the draft statements submitted (for the year ended 31st March 2020) do not highlight any significant control weaknesses.

### Solihull Community Housing (SCH)

SCH is a 'not for profit' company set up and owned by the Council to manage its housing services. A Management Agreement and Annual Delivery Plan sets out the arrangements between SCH and the Council for delivering services and managing performance. SCH is managed by an independent Management Board, has appointed its own external auditors, RSM UK LLP and is subject to internal review by the Council's own Internal Audit.

SCH produces its own Statement of Internal Control and the latest published Statement and the draft accounts submitted (for the year ended 31st March 2020) do not highlight any significant control weaknesses. An audit review of the internal controls for SCH – Procurement did fall below the required standard during 2019/20, however a number of improvement actions have since been implemented and this continues to be monitored and reported to the SCH Audit & Risk Committee and SCH Board.

### Urban Growth Company (UGC)

The UGC is a wholly owned subsidiary of the Council led by a Chairman and a Managing Director, accountable to an Executive Board and Shareholders. The UGC is a special purpose vehicle created to realise the full economic potential of the HS2 Interchange Station and related infrastructure. The UGC will act as a catalyst for growth that will enhance the social and economic infrastructure of the Hub area of UK Central. The UGC is funded by the Council and the West Midlands Combined Authority.

An overarching Collaboration Agreement sets out the arrangements between the UGC and the Council, with individual Service Level Agreements sitting beneath this. The UGC has appointed RSM as its external auditors.

## **7. Covid-19 Governance Impacts**

During March 2020, the Coronavirus pandemic resulted in a nationwide lockdown and an emergency response, which had significant impacts on our 'business as usual' service delivery and alternative models being used to continue the delivery of our critical services. This has and will continue to have an impact on the Council's governance arrangements. The impacts on governance will fall into the following broad categories:

- Impact on business as usual delivery of services;
- New areas of activity as part of the national response to coronavirus and any governance issues arising;
- The funding of the financial implications and logistical consequences of delivering the local government response;
- Assessment of the long-term disruption and consequences arising from the coronavirus.

This continues to be closely monitored and we will conduct a review of the lessons to be learned from our response and identify any improvement actions.

During the lockdown period temporary governance arrangements have been approved to enable essential decision making to continue, including:

- Increased delegation of executive powers to authorise the Chief Executive, in emergency situations, to make any Covid-19 related decision that could be made by the Cabinet or a Cabinet Member, for the period up to 30<sup>th</sup> June 2020.
- Increased delegation to the Director of Resources and Deputy Chief Executive to make individual funding decisions up to a level of £250,000 per decision for urgent spending related to Covid-19, for the period up to 30<sup>th</sup> June 2020.

A number of non-critical meetings were cancelled during the early weeks of the lockdown period and arrangements were made for Cabinet members' decisions to be made following an exchange of emails.

Moving forward the Council has decided to use a video conferencing system to hold remote meetings during the period that physical meetings are not permitted, starting with a remote meeting of the Planning Committee on the 29<sup>th</sup> April 2020.

## **8. Significant Governance Issues**

Using the Council's established risk management approach, "significant" governance issues are those that could potentially lead to one or more of the following impacts:

- avoidable death
- financial implications of more than £250k
- legal action or intervention from a statutory body, partner or enforcement agency
- national media attention, potential Public Interest Report or Judicial Review

In addition the Council will record details of any service areas, where the level of internal control fell below the standards that the Council expects to achieve.

Following completion of the annual review of the Council's governance framework, the following action plan details any governance issues that have been assessed as significant.

## Annual Governance Statement – Action Plan for any Identified Significant Governance Issues

### Issues brought forward from previous year(s):

Identified From	Issue	Description	Responsible Officer(s)	Progress
Internal Audit 2018/19	Limited assurance for the 5 audits listed	<p>In 2018/19 the Council's key financial systems were on the whole found to be operating effectively, many with 'full' or 'substantial assurance'. However, audit reviews of several other service areas identified significant issues with internal control, including non-compliance with the Council's Financial Regulations.</p> <p>There were 5 internal audit reviews undertaken during 2018/19 where the level of internal control fell below the required standard:</p> <ul style="list-style-type: none"> <li>• Library Fines</li> <li>• Small Public Health Contracts</li> <li>• Catering – Cash</li> <li>• Care and Support at Home</li> <li>• ICT Asset Management and Value for Money</li> </ul> <p>In respect of all areas reviewed where recommendations have been made, responsible officers have given assurances that these will be implemented to improve internal control. Internal Audit has a robust mechanism to follow up all recommendations made and report the outcome to senior management and the Audit Committee.</p>	Senior Management and Head of Audit Services	<p>All reviews have been followed up with improvements identified.</p> <p>Implementation of recommendations is monitored through a tracker and overseen by Directorate Leadership Teams.</p>

Risk Register	West Midlands Combined Authority	<p>Within the Council's corporate risk register, the relationship with the West Midlands Combined Authority is currently rated as a net red risk (high likelihood, high impact). This is because there is currently a funding gap within the Combined Authority's Investment Programme, which means that Solihull's funding requirement for UK Central cannot be fully met.</p> <p>The Director of Resources &amp; Deputy Chief Executive, Director of Economy &amp; Infrastructure and the Managing Director of the Council's Urban Growth Company are working with the Combined Authority to find solutions to the funding gap.</p>	Chief Executive	<p>This remains a net red risk for the Council. Although the funding gap has been closed for 2019/20, solutions are still required for future years.</p> <p>This continues to be closely monitored and a Business Case is being developed for additional government funding.</p>
Risk Register	Brexit Implications	<p>Within the Council's corporate risk register, service and business disruption as a result of Brexit was rated as a net red risk. This was due to the uncertainty around Brexit implications and the unknown position in relation to EU law, future trade agreements and uncertainty around long term replacements for existing EU funding.</p> <p>A Local Brexit Planning Group was established to monitor and respond to any Brexit implications/impact.</p>	Chief Executive	<p>A cross council EU Exit Group met until February 2020, reviewing all aspects of proposed or actual legislative changes.</p> <p>This has now been absorbed into individual directorates, for consideration of any Brexit related impacts on key areas including trading standards, implementation of the EU settled status scheme and any other legal changes. Wider economic impacts will be considered within SMBC's Economic Strategy.</p>

**Issues identified during 2019/20:**

Identified From	Issue	Description	Responsible Officer(s)
Internal Audit 2019/20	Limited assurance for the 10 audits listed	<p>In 2019/20 the Council's key financial systems were on the whole found to be operating effectively, many with 'full' or 'substantial assurance'. However, audit reviews of some service areas identified significant issues with internal control, including non-compliance with the Council's Financial Regulations.</p> <p>There were 10 internal audit reviews undertaken during 2019/20 where the level of internal control fell below the required standard:</p> <ul style="list-style-type: none"> <li>• Alternative Education Provision</li> <li>• Children's Educational Placements</li> <li>• Special Educational Needs and Disability (SEND) Service</li> <li>• Catering</li> <li>• Purchasing Cards</li> <li>• Taxi and Private Hire Vehicles (PHV) Licensing Safeguarding</li> <li>• Adult Care &amp; Support – Delegated Authorities</li> <li>• Children's Services &amp; Skills – Order Allowances</li> <li>• Library Fines (follow-up)</li> <li>• Solihull Community Housing - Procurement</li> </ul> <p>In respect of all areas reviewed where recommendations have been made, responsible officers have given assurances that these will be implemented to improve internal control. Internal Audit has a robust mechanism to follow up all recommendations made and report the outcome to senior management and the Audit Committee.</p>	Senior Management and Head of Audit Services

Covid-19 Pandemic	Response to the impacts of Covid-19	<p>The impact of the Covid-19 pandemic has been identified as a net red risk, a range of actions are being taken to try and mitigate the impact of this on the delivery of the Council's critical services. This will be kept under constant monitoring and review. An assessment of the long-term disruption and consequences arising from the coronavirus pandemic will be carried out, which will result in the development of an action plan and an update of the relevant risk registers.</p> <p>A review will also be undertaken around the lessons to be learned from our response to the Covid-19 pandemic, including the identification of any improvement actions.</p>	Chief Executive
Director of Children's Services and Skills	Deficit on Dedicated Schools Grant (DSG)	As at 31 March 2020 there was a deficit in the DSG High Needs Block of £5.934 million. A cross council board has been established to tackle this, which is chaired by the Director of Resources and Deputy Chief Executive. An outline Recovery Plan was endorsed by Cabinet on 13 February 2020 and an updated plan is currently being prepared which will be presented to Cabinet for approval in November 2020.	Director of Children's Services and Skills
Ofsted ILACS Inspection	10 areas for improvement identified	The areas for improvement are around discrete areas of process and do not indicate that there are any widespread, systemic failures. Some of the actions have now been completed, progress on the remaining areas is being monitored through Service and Directorate Leadership Teams and will be reported to the Corporate Leadership Team, Cabinet Member and Scrutiny Board. Ofsted has suspended its usual inspection and monitoring programme due to Covid-19, so we have not yet received feedback on the action plan or on progress with implementation.	Director of Children's Services and Skills
New CIPFA Financial Management Code	Compliance with the Financial Management Code for the start of 2021/22	<p>CIPFA have introduced a new Financial Management Code (FM Code) which provides guidance for good and sustainable financial management in local authorities.</p> <p>A report was presented to Audit Committee in March 2020, setting out an action plan for us to achieve compliance with the code for the start of the 2021/22 financial year, which is when the code comes into effect. The Audit Committee will receive a further report on compliance and delivery of the action plan in March 2021.</p>	Director of Resources and Deputy Chief Executive

## 8. Conclusion and Evaluation

As Leader and Chief Executive, we have been advised on the results of the review of the effectiveness of the Council's governance framework. Our overall assessment is that this Annual Governance Statement is a balanced reflection of the governance environment and the arrangements continue to be regarded as fit for purpose in accordance with the governance framework.

We are also satisfied that over the coming year, the Council will take appropriate steps to address any significant governance issues including the impacts from Covid-19 and we will monitor their implementation and operation as part of our next annual review.

*Nick Page*

**Nick Page**  
**Chief Executive**

*Ian Courts*

**Councillor Ian Courts**  
**Leader of the Council**