



Audit and Standards Committee

Wednesday, 17 January 2018 at 6.30 pm

Council Chamber, King George V House, King George V Road, Amersham

A G E N D A

Item

- 1 Evacuation Procedures
- 2 Minutes (*Pages 5 - 10*)

To agree the Minutes of the meeting held on 27 September 2017.
- 3 Apologies for Absence
- 4 Declarations of Interest
- 5 Interim Progress Report (*Pages 11 - 24*)
- 6 Strategic Plan 2018/19 to 2020/21 and Annual Internal Audit Plan 2018/19 (*Pages 25 - 50*)
- 7 Fraud & Corruption update
- 8 EY Annual Grant Certification Report (*Pages 51 - 58*)
- 9 EY Annual Audit Plan (*Pages 59 - 94*)
- 10 Audit Work Programme (*Pages 95 - 96*)

- 11 Annual Review of Code of Conduct and Complaints Procedure (*Pages 97 - 100*)
- Appendix 1: Code of Conduct with Proposed Amendment to Paragraph 6 (Pages 101 - 110)*
- Appendix 2: Chiltern District Council Complaints Procedure (Pages 111 - 120)*
- Appendix 3: Proposed Arrangements for Dealing with Complaints Revised Jan 2018 (Pages 121 - 142)*
- 12 Review of member training in 2017 (*Pages 143 - 144*)
- 13 Standards Work Programme (*Pages 145 - 146*)
- 14 Freedom of Information Management and RIPA Annual Report (*Pages 147 - 156*)
- Report to be noted.
- 15 Exclusion of the Public (if required)

To resolve that under Section 100(A)(4) of the Local Government Act 1972 the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in Part I of Schedule 12A of the Act.

Note: All reports will be updated orally at the meeting if appropriate and may be supplemented by additional reports at the Chairman's discretion.

Membership: Audit and Standards Committee

Councillors: J Gladwin (Chairman)
A Bacon
C Ford
C Jackson
V Martin
D Phillips
N Varley
C Wertheim
C Langley (Independent Person)
R J Jones
E Jones (Independent Person)

Date of next meeting – Thursday, 8 March 2018

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CHILTERN DISTRICT COUNCIL

MINUTES of the Meeting of the
AUDIT AND STANDARDS COMMITTEE (CDC)
held on **27 SEPTEMBER 2017**

PRESENT: Councillor J L Gladwin - Chairman

Councillors: A K Bacon
C J Jackson
D W Phillips
N I Varley
C J Wertheim
R J Jones

APOLOGIES FOR ABSENCE were received from Councillor V Martin.

17 MINUTES

The Minutes of the meeting of the Audit & Standards Committee held on 29 June 2017 were agreed by the Committee and signed by the Chairman as a correct record.

18 DECLARATIONS OF INTEREST

There were no declarations of interest.

19 CURRENT ISSUES AND UPDATE ON THE STANDARDS FRAMEWORK

The Committee considered the compliance with requirements of the standards framework and considered the current notification documents to ensure the Council met its statutory duty of promoting and maintaining high standards of conduct amongst its members.

The Committee were advised that Members had complied with the requirements to register their relevant interests. The option of Members updating their registers of interest online was advised. Reminder instructions would be sent out in an upcoming Members Bulletin to remind Members of the process to follow.

Failure to declare disclosable pecuniary interests was an offence under section 34 of the Localism Act. In consultation with the Economic Crime Unit at Thames Valley Police and other monitoring officers in Buckinghamshire, the draft protocol attached to the agenda pack was recommended for dealing with DPI complaints.

RESOLVED

1. That the current position on notification procedures be noted.
2. That the draft Protocol with Thames Valley Police for reporting alleged breaches of disclosable pecuniary interests notifications be agreed.
3. That the Monitoring Officer in consultation with the Chairman of the Committee and the Independent Person be authorised to agree the final version of the Protocol.

20 ANNUAL REPORT OF THE COMMITTEE ON STANDARDS IN PUBLIC LIFE

The Committee considered the Committee for Standards in Public Life (CSPL) Annual Report for 2016-17 and it's Forward Plan for the coming year.

RESOLVED

1. That the report be noted.
2. That no formal submission of comments from the Audit & Standards Committee be required.

21 SUBSCRIPTION TO STANDARDS EXCHANGE

The Committee discussed a report which considered the continued subscription to the interactive on-line Standards Exchange web site provided and hosted by Hoey Ainscough Associates.

RESOLVED

1. That the Council renew its membership of the Standards Exchange online service for the forthcoming year.
2. That authority be delegated to the Monitoring Officer to decide on future renewals of the Councils membership of the Standards Exchange online service.

22 STANDARDS WORK PROGRAMME

RESOLVED

That the work programme of the Standards Committee be noted.

23 APPOINTMENT OF INDEPENDENT PERSONS**RESOLVED**

That the Appointment of External Members Panel recommendations to Council that Elizabeth Jones and Caroline Langley be appointed as Independent Persons be noted.

24 INTERIM PROGRESS REPORT - INTERNAL AUDIT

Chris Harris took the Committee through the interim progress report and key points raised included:

1. The Committee noted the recent improvements to the time it had taken for officers' responses to be received on audit recommendations and agreed that the responses should continue to be made promptly.
2. The audit outcomes were said to have been positive and risk management presentations were to take place in November as part of the middle manager development programme.
3. It was explained that a new administration system had been introduced for the Crematorium and this was working effectively.
4. Plans were being made to ensure that what would be required when the GDPR changes come into effect in May 2018 met requirements, and further audit work may be done in 2018/19 in this area. As part of preparing for GDPR, briefing information would be provided to all Members to ensure the changes were understood by all.
5. In relation to the ICT Controls over access to the internet the Committee was advised that the new communications provider would be audited to ensure there was confidence that what was outlined in their method statement was delivered.
6. An extensive piece of work was ongoing to assess how unstructured data stored in personal files/folders would be migrated to shared structured electronic files. The Committee was advised that procedures would be implemented to ensure sound practice was in place moving forward. Following this, focus would be placed on addressing the migration of historic data. The Chairman requested a timetable of provisional dates for the various elements of this project be brought to the Committee for information.

RESOLVED

That the report be noted.

25 FOLLOW UP OF INTERNAL AUDIT RECOMMENDATIONS REPORT

The Committee received and discussed the follow up of internal audit recommendations report. None of the recommendations were said to be concerning and positive progress was reported. 40 recommendations were being implemented, 3 were in the process of being implemented and 4 had a revised target date. A further 15 had not yet reached their implementation date.

In respect of the follow up review on section 106 contributions (housing) the Committee was advised that the Housing Manager had scheduled a report to be made to Cabinet on 12 December 2017 rather than 19 September 2017 as outlined in the report.

The purchasing card review was explained to the Committee. It had originally been thought that new HMRC rules would require all professional subscriptions be recorded via payroll and the use of credit cards or other payment methods would need to cease. However on further exploration this was not the case so the Management Team did not believe a change to the system was required.

Note 1: Cllr Varley left the meeting at 19.30

RESOLVED

That the report be noted.

26 COMPARISON OF ASSURANCE LEVELS

The Committee received the comparison of assurance levels which dated back to 2012/13. It was summarised that a positive trend remained and officers' good work was recognised by the Committee.

RESOLVED

That the report be noted.

27 EXTERNAL AUDIT RESULTS REPORT

Sue Gill presented the external audit results report for the year ended 31 March 2017. The executive summary covered the key areas and the Committee was pleased to be informed that all procedures carried unqualified opinions and no significant issues were discovered.

There were no audit issues in relation to revenue recognition and management override. It was explained to members that following the EY Pensions team and PwC's review of the actuary's work there was no indication of management bias found in the actuary's estimate. Barnett Waddingham were aware that that the big four accounting firms did have concerns around their methodologies used to derive the discount rate and RPI inflation assumptions. Further discussions were to be held between Barnett Waddingham and the big four accounting firms to avoid the possibility of unacceptable assumptions being made in future years.

The external audit team were able to confirm that the timetable for the preparation and approval of accounts was to be brought forward for the 2017/18 financial years and draft accounts would need to be prepared by 31 May 2018 and the publication of the audited accounts by 31 July 2018. The Committee were pleased to be advised that these timescales were met this year successfully which puts the officers and audit team in a positive position for when this change comes into effect next year.

The audit fee was discussed with Members. There was no proposed fee listed for the grant certification fee as this element depended on how much work was required although the Committee were advised that it was not estimated to be significantly different from previous years.

RESOLVED

That the content of the External Audit Results report be noted and the Management Representation letter be signed by the Director of Resources and the Chairman of the Audit & Standards Committee.

28 STATEMENT OF ACCOUNTS 2016 / 17

The Committee received the final 2016/17 Statement of Accounts and were taken through the key points. There had only been minor changes made to the draft document previously brought to the Committee and no significant changes were reported.

The Committee thanked officers for efforts made on the accounts and congratulated all on preparing the accounts for the earlier July deadline in preparation for next year.

Key points discussed were:

1. The income and expenditure statement (p135) showed the net cost of services to be £11.9 million compared to £10.5 million last year. This year for the first time the information was split by the Council's Portfolio areas. The substantial increase to the Environment portfolio

was due to the revaluation of the car parks with a write down of the surface valuation. The land value had increased, however this was reported elsewhere.

2. The movement in reserves statement showed that earmarked reserves had increased by £1.5m and the total usable reserves stood at £15.1m. The general fund balance had decreased by £702k to £3.6m. The pension fund liability had increased to £46.4m mainly due to the change in the discount rate and the revaluation reserve had increased to £23.8m.
3. There would be no national revenue support grant in the next financial year although the business rate retention and the new homes grant would remain.

RESOLVED

That the report be noted and the final 2016/17 Statement of Accounts be approved by the Audit and Standards Committee and signed in accordance with the Accounts and Audit Regulations.

29 AUDIT WORK PROGRAMME

RESOLVED

That the work programme of the Audit & Standards Committee be noted.

The meeting ended at 8.20 pm



Chiltern District Council

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Internal Audit Progress Report 2017/18

Audit and Standards Committee – 17 January 2018

INTRODUCTION

1. This summary report provides the Audit and Standards Committee with an update on the progress of our work at Chiltern District Council as at 5 January 2018.

PROGRESS AGAINST THE 2017/18 ANNUAL PLAN

2. Our progress against the Annual Plan for 2017-18 is set out in Appendix A.

EMERGING GOVERNANCE, RISK AND INTERNAL CONTROL RELATED ISSUES

4. We have not identified any emerging risks which could impact on the overall effectiveness of the governance, risk and internal control framework of the organisation.

AUDITS COMPLETED SINCE THE LAST REPORT TO COMMITTEE

5. The table below sets out details of audits finalised since our last report to the Audit and Standards Committee for 2017/18. Final reports with priority 1 and 2 recommendations are shown at Appendix B.

Review	Evaluation	Key Dates			Number of Recommendations			
		Draft issued	Responses Received	Final issued	1	2	3	OEM*
Governance	Reasonable	3.7.17	9.10.17	11.10.17	-	1	1	-
Contracts and Procurement	Substantial	31.10.17	18.12.17	20.12.17	-	-	3	1
Emergency Planning	Substantial	13.9.17	19.9.17	21.9.17	-	1	1	-
Main Accounting	Substantial	7.11.17	13.11.17	15.11.17	-	-	1	-
Waste Services – Health and Safety	Limited	5.12.17	4.1.18	5.1.18	1	10	7	-
Commercial Rents/Debt Recovery	Substantial	12.8.17	18.10.17	20.10.17	-	-	-	1
HR – Harmonised Policies and Procedures	Substantial	19.6.17	20.9.17	22.9.17	-	-	1	-
HR – iTrent Payroll HR module	Substantial	22.6.17	20.9.17	22.9.17	-	-	-	-

CHANGES TO THE ANNUAL PLAN 2017/18

6. The following changes have been made to the audit plan for 2017/18
- Temporary Accommodation – an additional 6 days to allow for additional work to be undertaken for this audit.
 - Risk Management Assistance – an additional 5 days to allow risk workshops to take place during the year.
 - Waste – Health and Safety audit – an additional 15 day audit
 - Information Governance/Data Quality – 8 day audit deleted (audit completed in 2016/17)
 - Risk Management audit – 8 day audit deleted (risk management assistance provided throughout year)
 - Council Tax and NDR audit – an additional 3 days (audits undertaken as separate audits)
 - Waste – Health and Safety Follow up audit – an additional 4 day audit
 - Business Continuity audit – 7 day audit deleted (will now be done in Quarter 1 of 2018/19)
 - Absence Management audit – 8 day audit deleted (will now be done in Quarter 1 of 2018/19)

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FRAUDS/IRREGULARITIES

7. We have not been advised of any frauds or irregularities in the period since the last summary report was issued.

LIAISON WITH EXTERNAL AUDIT

8. We liaise with EY and provide reports and working paper files, as required.

PROGRESS ACTIONING PRIORITY 1 RECOMMENDATIONS

9. We have made one Priority 1 recommendations (i.e. fundamental control issue on which action should be taken immediately) since the previous Progress Report. This is shown in Appendix B – Waste Services (Health and Safety) audit.

RISK MANAGEMENT

11. The Audit Director with TIAA and the Councils Audit, Fraud & Error Reduction Manager meet on a regular basis to discuss and action Risk Management matters for both Councils.

Item 5

The current Risk Procedures/Guidance for Risk Management is being reviewed and progress is being made to display appropriate information on Risk Management throughout both Councils. This will include posters on all notice boards at the main civic offices for South Bucks and Chiltern Councils, as well as data on the Councils intranet and regular items within the Councils all staff Newsletter.

Appropriate training has been developed and has been delivered on “Risk Management in a Changing Environment” for all middle managers.

DISCLAIMER

12. This report has been prepared solely for management's use and must not be recited or referred to in whole or in part to third parties without our prior written consent. The matters raised in this report not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Progress against the Annual Plan for 2017/18

System	Planned Quarter	Days	Current Status	Comments
Governance – Gifts and Hospitality	1	8	Final report issued October 2017	
Disabled Facilities Grants	1	5	Final report issued July 2017	
Cemeteries	1	8	Audit has commenced	In Progress
HR - Harmonised Policies and Procedures	1	8	Final report issued September 2017	
HR - iTrent Payroll System (HR Module)	1	6	Final report issued September 2017	
Crematorium - Annual Internal Audit	1	5	Final report issued July 2017	
Expenses	1	8	Final report issued July 2017	
Ground Maintenance	1	8	Audit has commenced	In Progress
Risk Management	1	8	Cancelled	Audit cancelled as risk management assistance provided throughout year
Complaints and Compliments	2	6	Final report issued August 2017	
Temporary Accommodation	2	18	Final report issued August 2017	
HR - Absence Management	2	8	Cancelled	Audit cancelled. Will be done Q1 2018/19
Purchase Cards	2	8	Draft report issued January 2018	
HR - Recruitment	3	8	Draft report issued January 2018	
Main Accounting	3	7	Final report issued November 2017	
Payroll	3	12	Planned start date 08/01/18	
Accounts Receivable (Debtors)	3	9	Draft report issued December 2017	
Accounts Payable (Creditors)	3	9	Draft report issued December 2017	

System	Planned Quarter	Days	Current Status	Comments
Contracts and Procurement	3	10	Final report issued December 2017	
Information Governance/Data Quality	3	0(8)	Deleted	Deleted (previous audit completed in 2016/17)
Data Protection	3	8	In progress	
Business Continuity	3	0(7)	Cancelled	Audit cancelled. Will be done Q1 2018/19
Emergency Planning	3	6	Final report issued September 2017	
Benefits	3	13	In progress	
Council Tax Support	3	13	In progress	
Council Tax and NDR	3	20	Council Tax draft report issued Nov 17 NDR draft report issued Sept 17	
Cash and Bank	3	8	In progress	
Treasury Management	3	8	Planned start date 29/01/18	
ICT – Network Controls	2	7	Draft report issued November 2017	
ICT - Telecomms	3/4	7	In progress	
ICT – Mobile/Agile Working	4	7	In progress	
ICT – Information and Data Storage	2	3	In progress	
Waste Services (Chiltern, Wycombe and South Bucks)	3	11	Planned start date February 2018	
Waste Services (Health and Safety)	3	15	Final report issued January 2018	New audit
Waste Services (H & S) – Follow up	4	4	Planned start date February 2018	New audit
Car Parking	4	7	Planned start date February 2018	
Commercial Rents/Debt Recovery	4	8	Final Report issued October 2017	
Crematorium - New Administration System	4	5	Final report issued July 2017	

System	Planned Quarter	Days	Current Status	Comments
Follow up		10		
Risk Management Assistance	ongoing	15		

KEY:

	=	To be commenced
	=	Site work commenced
	=	Draft report issued
	=	Final report issued

Audits Finalised since last Audit Committee

Title of review: **Governance**

Date issued: **October 2017**

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Compliance	<p>Review of the registers of the existing staff declarations indicated that these do not record:</p> <ul style="list-style-type: none"> • whether the gift/hospitality presents either no, potential, actual or perceived conflicts of interest; • the relationship of the person giving the gift to the authority employee; • the reason for the gift and hospitality; and • the department of the Council receiving the gift and hospitality. 	<p>The harmonised CDC/SBDC register of staff declarations of gifts and hospitality be reviewed to include the omissions identified in this report, with the objective of demonstrating transparency to all the Councils' stakeholders.</p>	2	Completed	04/07/17	HR Manager

Title of review: **Emergency Planning**

Date issued: **September 2017**

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	Inspection of the combined strategic risk register found that the risk for a critical incident and the mitigating controls surrounding Emergency Planning are not included.	Combined Strategic Risk Register to be reviewed to recognise the potential incident triggers and Emergency Planning controls which the Councils have, and will, put in place.	2	Done.	19/09/17	Head of Healthy Communities

Title of review: **Waste Services – Health and Safety**

Date issued: **January 2018**

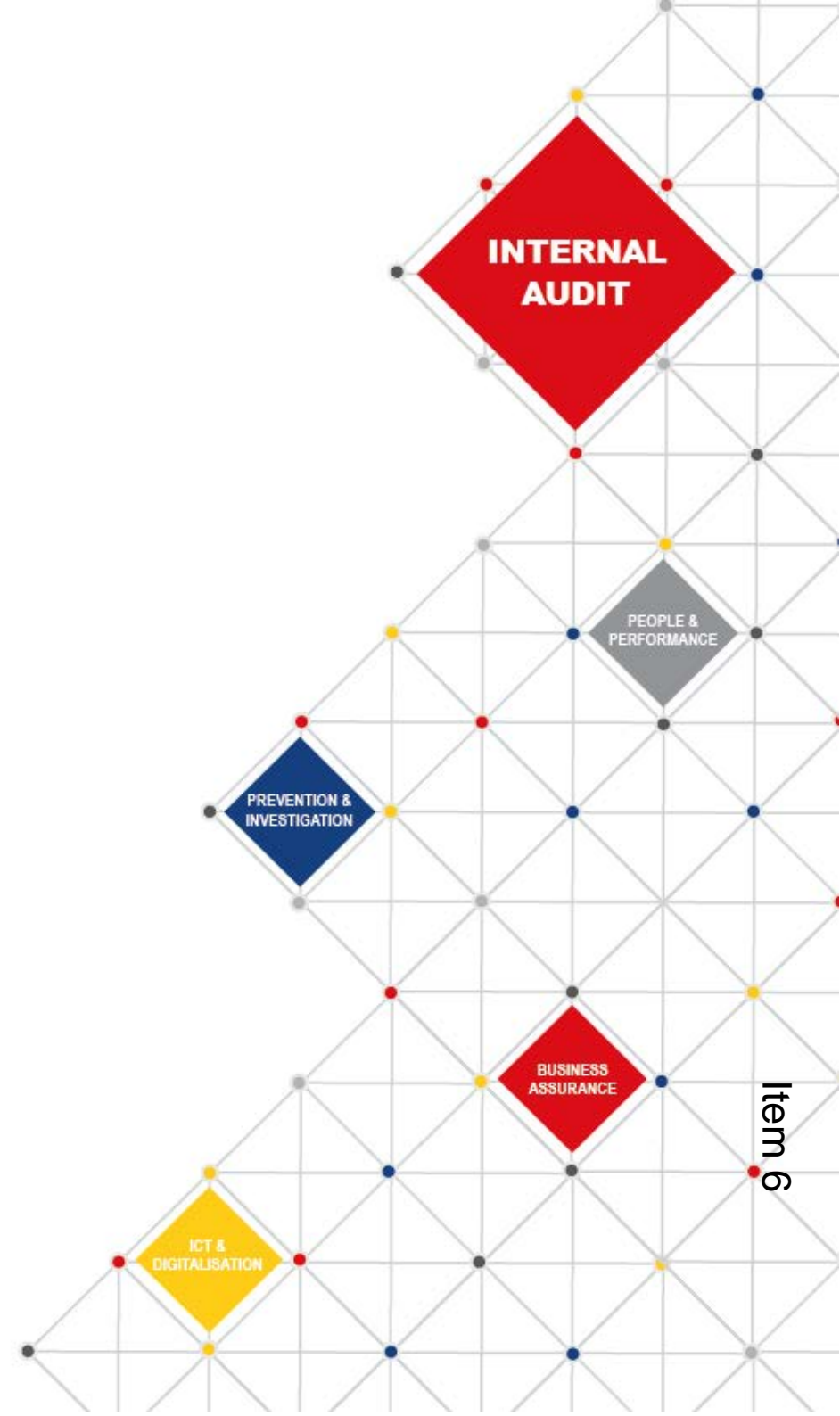
Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
15	Compliance	The Claylane site was cluttered and untidy. (Not Serco related.) Enforcement of strict site rules should be considered for occupants and the public.	The Serco Depot site in High Wycombe is in need of substantial housekeeping by the management company to ensure safety can be maintained.	1	<i>Serco have raised concerns at contract meetings regarding the Clay Lane depot. These have been raised with WDC and the Estates Department will be tasked with undertaking this work</i>	End March 2018	Neil Stannett Environmental Health Manager /RW Contract Manager

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
1	Directed	A waste management strategy was not clearly evidenced during the review. Supporting policies were provided, however none fully detailed the council's strategy thereby clearly setting out its management arrangements.	The waste management leads to draft a corporate waste strategy, setting out the overarching legal requirements, scope, resources and arrangements that are in place.	2	<i>Strategic aims were set out in the specification documents for each of the tendering processes. Staff resources for the client team were set out in the recent shared service review, October 2016, and contractor resources are set out in contract documents. The authorities are also signed up to the Buckinghamshire Municipal Waste Management Strategy. Overarching legal requirements are set out in the Service Plan. A corporate strategy can be drafted prior to tendering or contract extension. As such it is felt that the suggested strategy is not needed at this time and Management and Officer resources would be better spent on projects with a higher H&S impact.</i>	2019	SG Waste Services Manager

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
3	Directed	The Council had evidenced a contractor policy that was last updated in December 2014. Since then changes have occurred and needs to be included within the policy. The policy should also provide more details around monitoring and reference all appropriate documentation.	Review the Management of Contractors policy and update for recent changes to include the contractor management cycle, detail roles of responsible parties identified, reference contractor health and safety documents and explain in sufficient details the streams and resources for monitoring.	2	<i>Policy to be reviewed and updated as required.</i>	<i>Review by end quarter 1 2018/19</i>	CM Head of Environment & Glynis Channell
6	Compliance	Serco risk assessments revealed that not all controls were being noted, such as for example PPE. Risk assessments also did not have clear file names and were difficult to locate from the reference numbers without additional information.	Serco to provide a referencing index for its risk assessments for the contractor and ensure that risk assessments include all necessary controls.	2	<i>Referencing index to be created</i>	<i>End Jan 2018</i>	RW Contract Manager
8	Compliance	Currently there is a limited inspection and audit process in place. It is not targeted, strategic or coordinated to ensure the full range of risks and tasks are monitored. To achieve this the waste team need to undertake an audit needs analysis. (ANA) This should include triangulation of risks, incidents and complaints. The ANA should focus primarily on both quality and safety.	Prepare an audit needs analysis which will inform the annual audit/inspection plan.	2	<i>This had already been recognised by Managers and an annual H&S plan is to be developed to ensure that the full range of risks and tasks are monitored in a timely manner, together with the delivery of necessary training. Contract Monitoring Officers will be involved in this process.</i>	<i>An ANA to be prepared by end of Feb 2018 and an implementation plan in place by May 2018</i>	RW & EC Contract Managers

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
9	Compliance	The team of inspectors currently undertakes random uncoordinated inspections. With the aid of an audit needs analysis a targeted annual audit and inspection plan can be drafted and monitored.	Prepare an annual audit inspection plan which will, once agreed with the Head of Environment, form the spine of auditing and inspections for the year.	2	<i>An inspection plan has already been introduced for the team of Contract Monitoring Officers, with weekly inspections now taking place with results recorded and communicated with contractors, and follow up actions noted.</i>	As above	As above
11	Compliance	The Serco site at London Road was well managed, clean and tidy. Pedestrian segregation improvements were observed and these appear to be ongoing. Clear pedestrian crossing markings and safety aids such as barriers and signage could further support safety efforts.	Site improvements to the London Road site to include consideration for pedestrian safety, public access through additional signage, lighting, and proactive CCTV monitoring as detailed within the report.	2	<i>Plans are currently being drawn up for completion of further site health and safety improvements including re-surfacing and relining of pedestrian walkways, and crossings.</i>	Completed 24 December 2017	RW Contract Manager
12	Compliance	A visit to the Biffa depot at Burnham was also undertaken. The only concern noted at the depot was the lack of segregation between the pedestrian walkway close to the office which was in very close proximity to the working vehicles. This should be reviewed.	Review the pedestrian and vehicle segregation across the Burnham Biffa site to ensure that working vehicles are separated from other traffic and pedestrians walking on site.	2	<i>The issue had already been raised by Biffa. A formal instruction to undertake the work was issued on 25/8/17 and is being arranged.</i>	End Jan 2018	EC Contract Manager

Rec.	Risk Area	Finding	Recommendation	Priority	Management Comments	Implementation Timetable (dd/mm/yy)	Responsible Officer (Job Title)
14	Compliance	The Serco Depot at the Claylane Booker site in High Wycombe was a large and complex site. A site risk assessment was not evidenced considering the multi-site approach which is in close proximity to Serco operations.	Undertake a risk assessment of the multi occupancy Serco Depot site in High Wycombe and its operations and carefully appraise the risks verses the benefits.	2	<i>Serco have raised concerns at contract meetings regarding the Clay Lane depot. These have been raised with WDC and the Estates Department will be tasked with undertaking this work</i>	<i>End January 2018</i>	<i>Neil Stannett Environmental Health Manager /RW Contract Manager</i>
16	Compliance	Serco demonstrated its willingness and commitment to site safety and as a high risk operational site occupant requires regular effective cooperation and support from the Council's management company. This appeared lacking and site meetings were not deemed regular or sufficient.	The management company to engage face to face with Serco and the Council at least monthly to ensure the site remains in a good orderly state.	2	<i>Serco have raised concerns at contract meetings regarding the Clay Lane depot. These have been raised with WDC and the Estates Department will be tasked with undertaking this work</i>	<i>End January 2018</i>	<i>Neil Stannett Environmental Health Manager /RW Contract Manager</i>
18	Compliance	The council evidenced that it is dynamic and forward thinking in utilising cost effective technology to support health and safety risk management. In this regards, all BIFFA vehicles are now equipped with 360 cameras. There are inherent risks operating heavy duty vehicles, which would be more effectively controlled utilising 360 cameras.	Develop a business case to further enhance safety and driver awareness by installing 360 cameras across all heavy duty vehicles in use by the council, applying a systematic cost effective approach.	2	<i>Agree that 360 degree cameras would be of benefit on all large vehicles. Business case to be submitted for consideration.</i>	<i>End March 2018</i>	<i>Sally Gordon – Head of Waste</i>



Internal Audit Annual Plan

Introduction

This Annual Plan is drawn up in accordance with the Terms of Reference of TIAA and the Internal Audit Strategic Plan.

Audit Strategy Methodology

We adopt a proprietary risk based approach (GUARD) to determining your audit needs each year which includes reviewing your risk register and risk management framework, previous internal audit work for the organisation, the Regulatory Framework and assessment of Chiltern and South Bucks Councils, external audit recommendations together with key corporate documentation such as your business and corporate plan, standing orders, and financial regulations. The Strategy will be based predominantly on our understanding of the inherent risks facing the Councils and those within the sector and has been developed with senior management. The resultant risk analysis underpinning your Audit Plans is set out at Annex A.

Internal Audit Strategic and Annual Plan

The rolling strategic plan is set out in Annex B. The Annual Plan (Annex C) sets out the reviews that will be carried out, the planned times and the scopes for each of these reviews. The rolling strategic plan will be subject to ongoing review and could change as the risks change for the organisation and will be formally reviewed with senior management and the Audit and Standards Committee throughout the financial year.

The planned time set out in the Annual Plan for the individual reviews includes: research, preparation and issue of terms of reference, production and review of working papers and reports and site work. The timings shown in the Annual Plan assume that the expected controls will be in place.

Substantive testing will only be carried out where a review assesses the internal controls to be providing 'limited' or 'no' assurance with the prior approval of the Councils and additional time will be required to carry out such testing. Chiltern and South Bucks Councils are responsible for taking appropriate action to establish whether any loss or impropriety has arisen as a result of the control weaknesses.

Audit Committee Responsibility

It is the responsibility of the Audit and Standards Committee to determine that the number of audit days to be provided and the planned audit coverage are sufficient to meet the Committee's requirements and the areas selected for review are appropriate to provide assurance against the key risks within the organisation.

Reporting

Assignment Reports: A separate report will be prepared for each review carried out. Each report will be prepared in accordance with the arrangements contained in the Terms of Reference agreed with TIAA and which accord with the requirements of the Public Sector Internal Audit Standards (PSIAS).

Progress Reports: Progress reports will be prepared for each Audit and Standards Committee meeting. Each report will detail progress achieved to date against the agreed annual plan.

Annual Report: An Annual Report will be prepared for each year in accordance with the requirements set out in the Public Sector Internal Audit Standards (PSIAS). The Annual Report will include our opinion of the overall adequacy and effectiveness of Chiltern and South Bucks Councils governance, risk management and operational control processes.

Satisfaction Questionnaires

A satisfaction questionnaire will be issued with each final report to comply with our ISO requirements. An annual client satisfaction survey will also be issued with the annual report with the feedback received from these survey(s) being used to develop staff and the service we provide.

Liaison with the External Auditor

We will liaise with the Councils External Auditor. Any matters in the areas included in the Annual Plan that are identified by the external auditor in their audit management letters will be included in the scope of the appropriate review.

Background

Chiltern and South Bucks District Councils provide local government services to their respective districts. A regular internal audit of these services is required by the Accounts and Audit Regulations 2015.

Assurance Mapping

For each assurance review an assessment of the combined effectiveness of the controls in mitigating the key control risks will be provided. The assurance mapping process is set out in Annex D.

Audit Remit

The Audit Remit (Annex E) formally defines internal audit's purpose, authority and responsibility. It establishes internal audit's position within Chiltern and South Bucks Councils and defines the scope of internal audit activities and ensures compliance with the PSIAS.

Conflict of Interest

We are not aware of any conflicts of interest and should any arise we will manage them in line with PSIAS requirements, the Councils requirements and TIAA's internal policies.

Key Assurance Risk Areas (KARAS)

We have identified 5 'Key Assurance Risk Areas' upon which our audit planning process for Chiltern and South Bucks Councils will be built. For each audit assignment we will identify to which of the KARAs it is aligned. This then enables our Annual Report to set out our assessment of which, if any, of the individual KARAs the Council is most exposed and equally important how this compares with our other similar clients. The KARA initiative enables the provision of additional assurance to the Council in that as well as a Council specific assurance assessment we are also able to place this assurance assessment in the context of comparable processes at other organisations.

KARA	Rationale
Probity and Statutory non-compliance	Assurance over core compliance risks.
High impact risks	Targets high risks at the Council and risks emerging from elsewhere.
Customer satisfaction	Assurance that the Council is delivering high-quality services to its customers.
Major change	Pro-active work to ensure planned changes do not cause disruption or damage the Council's internal control framework.
Operational delivery	Assurance on efficiency and effectiveness of the Council's service delivery.

Performance

The following Performance Targets will be used to measure the performance of internal audit in delivering the Annual Plan:

Area	Performance Measure	Target
Achievement of the plan	Completion of planned audits.	100%
	Audits completed in time allocation.	100%
Reports Issued	Draft report issued within 10 working days of exit meeting.	95%
	Final report issued within 10 working days of receipt of responses.	95%
Professional Standards	Compliance with Public Sector Internal Audit Standards.	100%

Key Contact Information

Name	Contact Details
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Name: Jonathan Sims Job Title: Client Manager	Email address: jonathan.sims@tiaa.co.uk Phone number: 07976 815945

Limitations and Responsibility

Internal controls can only provide reasonable and not absolute assurance against misstatement or loss. The limitations on assurance include the possibility of one or more of the following situations, control activities being circumvented by the collusion of two or more persons, human error, or the overriding of controls by management. Additionally, no assurance can be provided that the internal controls will continue to operate effectively in future periods or that the controls will be adequate to mitigate all significant risks that may arise in future.

The responsibility for a sound system of internal controls rests with management and work performed by internal audit should not be relied upon to identify all strengths and weaknesses that may exist. Neither should internal audit work be relied upon to identify all circumstances of fraud or irregularity, should there be any, although the audit procedures have been designed so that any material irregularity has a reasonable probability of discovery. Even sound systems of internal control may not be proof against collusive fraud.

Reliance will be placed on management to provide internal audit with full access to staff and to accounting records and transactions and to ensure the authenticity of these documents.

The matters raised in the audit reports will be only those that come to the attention of the auditor during the course of the internal audit reviews and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. The audit reports are prepared solely for management's use and are not prepared for any other purpose.

Release of Report

The table below sets out the history of this plan.

Date plan issued:	January 2018
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Annex A: GUARD Risk Analysis

As part of the audit planning process an assessment of key risks has been completed, to identify those that are most relevant to the organisation and where internal audit assurance would be best focussed. These are summarised by priority below.

INTERNAL RISKS			EXTERNAL RISKS		
HIGH	MEDIUM	LOW	LOW	MEDIUM	HIGH
<p><i>Project Management</i></p> <hr/> <p><i>Being General Data Protection Regulation ready</i></p> <hr/> <p><i>Failing to maintain adequate policy and procedures</i></p> <hr/>			<p>SPECIFIC RISKS TO CHILTERN AND SOUTH BUCKS COUNCILS</p>	<p><i>Loss of Central Government Grant</i></p> <hr/> <p><i>Increase Changes to Interest Rates</i></p> <hr/> <p><i>HS2</i></p> <hr/>	
<p><i>Funding</i></p> <hr/> <p><i>Service delivery</i></p> <hr/> <p><i>Recruitment challenges</i></p> <hr/>				<p>EMERGING CHALLENGES FROM OUR CLIENT BASE</p>	<p><i>Central Government Funding</i></p> <hr/> <p><i>Cyber Crime</i></p> <hr/> <p><i>Other fraudulent activity</i></p> <hr/>

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Annex B: Annual Plan – 2018/19

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
	Governance	Assurance	8	<p><u>Rationale:</u> This is a high priority area and subject to an annual audit</p> <p><u>Scope:</u> To be agreed with Director of Resources for 2018/19 audit</p>	
3	Risk Management	Assurance	8	<p><u>Rationale:</u> A periodic review to test the appropriateness and effectiveness of the risk management arrangements at Chiltern and South Bucks Councils. .</p> <p><u>Scope:</u> The review will include:</p> <ul style="list-style-type: none"> • assess the effectiveness of the controls that mitigate the risk for a number of the key operational risks identified. • challenge the risk management process and how managers/risk owners use risk management for everyday decision making 	
2	Procurement	Assurance	8	<p><u>Rationale:</u> This is a regular audit to provide assurance that the Council's procurement and contracting procedures are sound and working well.</p> <p><u>Scope:</u> The audit will examine the following key areas:</p> <ul style="list-style-type: none"> • The control framework is adequate to ensure that procurement and contracts are issued in compliance with the Council's Constitution, policies and procedures. • Procurement and Contracts are undertaken to support an efficient procurement and contracting process. • Appropriate systems and practices are in place for the sound management of procurement and contracts. • Appropriate records are maintained, in particular the Contracts Register and compliance with the Transparency Code. • Appropriate monitoring and post implementation review takes place to confirm that value for money has been achieved 	
3	Counter Fraud	Assurance	8	<p><u>Rationale:</u> Potential fraudulent activity both internal and external is a real risk for the public sector and a periodic audit should be undertaken to assess the Council's preparedness.</p> <p><u>Scope:</u> The focus of the review will be determined in discussions with the Director of Resources.</p>	
1	Data Protection (GDPR)	Assurance	8	<p><u>Rationale:</u> Failure to comply with the new General Data Protection Regulations could mean very substantial fines. An assurance audit to assess compliance with the Regulations will help to identify any weakness or omission.</p>	

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Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<p><u>Scope:</u> To review compliance with the General Data Protection Regulations (GDPR).</p> <p>The review will directly assess how compliant the Council is with the GDPR. This will include key elements such as (but not limited to):</p> <ul style="list-style-type: none"> • Privacy Impact Assessments • Data Subject rights (e.g. Right to be forgotten) • Data Classification and Asset management • Data Security • Breach Management • Governance • Consent • Data Controllers & Processors 	
3	Business Continuity	Assurance	7	<p><u>Rationale:</u> Business Continuity is essential for maintaining essential services to the community and Business Continuity Plans need to be tested to confirm they are resilient and able to provide continuation of business as usual. A periodic audit will provide assurance that Services will continue as required after a disruption.</p> <p><u>Scope:</u> The review will assess the adequacy and effectiveness of the internal controls in place at the Council for managing the business continuity planning process and ensuring that the Council is resilient to disruptive events that may impact upon the organisation. The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> • Business Continuity risks per the Strategic and Operational risk registers have action plans to mitigate risk; • Appropriate Corporate and Service Continuity plans are in place, which are regularly reviewed and readily accessible to staff; • Business Impact Assessments are completed on a regular basis; • Staff and additional financial resources required to execute the plans are adequate and available; • Adequate training is provided to officers to ensure they are fully aware and understand their responsibilities in the event of an incident occurring; and • Business Continuity Plans are periodically tested to ensure their effectiveness, with lessons learned being integrated into the planning process 	
2	Purchase Cards	Assurance	8	<p><u>Rationale:</u> This is a high profile expense and one that Members have asked for a regular audit to be undertaken.</p>	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place in the Councils for the distribution, monitoring and managing of the Councils Purchasing Cards.</p> <p>The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> • Adequate and effective procedures are in place for the appropriate management of Purchasing Cards to include the authorisation of credit card expenditure, • Spending limits are proportionate and appropriate; • Purchases are in accordance with agreed procedures; • Purchases for officer (and Member) expenses are in accordance with approved expenses procedures • Credit card statements are reconciled and correctly allocated to budgets on a timely basis. <p>As part of the audit an analysis will be made of the types of items being purchased using the purchase cards based on a sample of cards in use.</p>	
1	Expenses	Assurance	8	<p><u>Rationale:</u> This is a high profile expense and one that Members have asked for a regular audit to be undertaken</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place in the Councils for the managing and processing of mileage and expense claims. The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> • Adequate and effective procedures are in place for the processing of expense claims; • The authorisation of expense claims is restricted to appropriate personnel; • Officer (and Member) expense claims are authorised and processed in accordance with approved procedures; • VAT is reclaimed where appropriate and all relevant receipts are retained to support claims made; and • Expenses are correctly allocated to budgets on a timely basis. <p>As part of the audit an analysis will be made of the types of items being reimbursed based on a sample of claims</p>	
1	Project Management	Assurance	8	<p><u>Rationale:</u> Project Management is a high risk and a periodic assurance audit will help identify any weakness in the management of projects.</p> <p><u>Scope:</u> The audit will consider the following key areas:</p> <p>The project management framework including Project Management Toolkit, procedures/templates and guidance covering project management activities;</p>	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<p>Review of a sample project from the initial stages through to when the project is in progress covering:</p> <ul style="list-style-type: none"> • Project Initiation Document (PID) • Initial plan • Risk and Issues logs • Budgetary control • Quality log • Stakeholder Analysis and Communications Plan • Resource management • Approval of projects by Committee/Council • Monitoring of the operational and financial progress of projects by Project Team/Committee/Council; and • Escalation of project risks from individual project risk logs/registers, corporate risk register and strategic risks, as appropriate. 	
2	Main Accounting	Assurance	7	<p><u>Rationale:</u> This is the main financial ledger and an important system for the Councils which is audited annually.</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Councils for the financial accounting system (Integra). The review will focus on the following areas:</p> <ul style="list-style-type: none"> • Adequate policies and procedures are in place and accessible to all relevant staff; • Access to Integra is restricted to authorised personnel only and the system is appropriately backed up; • Financial information is produced which meets all legal/reporting requirements on a timely basis; • Journal entries are supported by adequate narrative, with appropriate separation of duties in place; • New ledger codes/amendments are supported by appropriate authorisation; • Suspense accounts are regularly reviewed and cleared; and <p>Opening balances are brought forward promptly and accurately.</p>	
3/4	Payroll	Assurance	15	<p><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Payroll function. The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> • Recommendations from the previous audit report have been implemented; • Adequate policies and procedures are in place and accessible to all relevant staff; 	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<ul style="list-style-type: none"> System access is restricted to authorised personnel only; Payroll data is supported by proper documentation, properly authorised, and subject to satisfactory segregation of duties; and Reasonableness checks and regular reconciliations are carried out. <p>In addition, a full examination of the total data held will be reviewed using data analytics techniques.</p>	
3/4	Accounts Receivable (Debtors)	Assurance	8	<p><u>Rationale:</u> Due to the high volume of transactions and the income involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Debtors function. The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> Recommendations from the previous audit report have been implemented; Adequate policies and procedures are in place and accessible to all relevant staff; System access is restricted to authorised personnel only; Invoices and credit notes are raised following appropriate authorisation, and are actioned promptly and accurately; Regular reconciliations are carried out between the sales ledger module and the general ledger control account; Regular reviews of outstanding debtors are undertaken using aged debtor listing, with arrears action carried out promptly in accordance with procedures; and Write-offs are approved by senior officers in accordance with procedures 	
3/4	Accounts Payable (Creditors)	Assurance	8	<p><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Creditors function. The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> Recommendations from the previous audit report have been implemented, Adequate policies and procedures are in place and accessible to all relevant staff; System access is restricted to authorised personnel only; New supplier set up/amendments to supplier details are subject to satisfactory segregation of duties; Payments are supported by proper documentation, properly authorised, correctly coded, and subject to satisfactory segregation of duties; and 	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<ul style="list-style-type: none"> Regular reconciliations are carried out between the purchase ledger module and the general ledger control account 	
3/4	Benefits	Assurance	13	<p><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To review and test the controls in place at the Council for the Housing Benefits function. The review will focus on the following key areas:</p> <ul style="list-style-type: none"> Appropriate policies and procedures are in place for managing the Benefits process. Access to the Benefits system is restricted and adequately controlled. Standard variables/parameters are independently reviewed at the start of the year. Benefits are properly due and correctly calculated, with appropriate sample checks carried out. Payment runs are subject to independent review and authorisation prior to payment. System performance is monitored and Benefits data regularly reconciled. Overpayments are identified and promptly followed up. Write-offs are approved by senior officers in accordance with authorised procedures 	
3/4	Council Tax Support	Assurance	13	<p><u>Rationale:</u> Due to the high volume of transactions and the expenditure involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To review and test the controls in place at the Council for the Council Tax Support function. The review will focus on the following key areas:</p> <ul style="list-style-type: none"> Appropriate policies and procedures are in place for managing the Council Tax Support process. Access to the Council Tax Support system is restricted and adequately controlled. Standard variables/parameters are independently reviewed at the start of the year. Council Tax Support is properly due and correctly calculated, with appropriate sample checks carried out. Payment runs are subject to independent review and authorisation prior to payment. System performance is monitored and Council Tax Support data regularly reconciled. Overpayments are identified and promptly followed up. Write-offs are approved by senior officers in accordance with authorised procedures 	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
3/4	Council Tax and NDR	Assurance	25	<p><u>Rationale:</u> Due to the high volume of transactions and the income involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To review the adequacy and effectiveness of the controls in place at the Council for the management of the Business Rates and Council Tax functions. The audit will focus on the following:</p> <ul style="list-style-type: none"> • There are up to date documented procedures for Business Rates/Council Tax; • System access is adequately controlled; • The correct charges have been applied; • Regular reconciliations are carried out with Valuation Office listings; • Discounts and exemptions are approved by authorised staff and supported by documentary evidence; • Refunds are appropriately approved and authorised prior to payment; • Arrears are promptly identified and pursued and any write offs are valid and authorised; • Suspense accounts are regularly cleared and any exception reports are regularly reviewed; and • Systems are adequately monitored and reconciled <p>In addition, a full examination of the total data held will be reviewed using data analytics techniques</p>	
3/4	Cash and Bank	Assurance	7	<p><u>Rationale:</u> Due to the high volume of transactions and the income involved this is a high risk area and subject to an annual audit</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for managing the Income (Cash & Bank) function. The audit will focus on the following key areas:</p> <ul style="list-style-type: none"> • Recommendations from the previous audit report have been implemented; • Adequate policies and procedures are in place and accessible to all relevant staff; • System access is restricted to authorised personnel only; • Adequate controls are in place to ensure amounts received are accurately and promptly banked; • Adequate security is in place to manage all cash received and banking arrangements; • Regular reconciliations are carried out between the cash receipting system, the general ledger and the Council's bank account; and • All items posted to suspense accounts are checked and regularly cleared. 	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
3/4	Budgetary Control	Assurance	7	<p><u>Rationale:</u> This is a periodic audit to provide assurance over the budgetary Control process.</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for the management of the financial budget for the Council. The review will focus on the following areas:</p> <ul style="list-style-type: none"> • Adequate policies and procedures are in place and accessible to all relevant staff; • Budgets are comprehensive, with realistic assumptions, and are appropriately approved; • Budgets are loaded into the ledger completely and accurately; • Budgets are allocated to individuals at an appropriate level, with monitoring responsibilities clearly outlined; • Budget monitoring reports are provided on a timely basis; • Reasonable variance levels are set which trigger action and explanation; and • Budget virements are subject to appropriate authorisation. • 	
3/4	ICT Audits – Annual Network Audit	Assurance	6	<p><u>Rationale</u> To provide ongoing assurance about the quality of controls that operate at the core of the network, including password strength and how users are provided with network accounts and how these are then monitored for changes (e.g. leavers and movers), in order to provide assurance that the PSN requirements are being met..</p> <p><u>Scope</u> A review of the operating controls over the network infrastructure, including :</p> <ul style="list-style-type: none"> • Network security policy; • External penetration testing; • Firewall administration access rights; • Firewall password security settings; • Review of firewall rules; • Failover protection; • Patching of firewall appliances; and • Intrusion prevention 	
2	ICT Audits –Members IT Support	Assurance	6	<p><u>Rationale</u> To ensure that the there are no IT security, or data risks associated with use of ICT equipment by members.</p>	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<u>Scope</u> A review which analyses the security of and use of ICT equipment issued to members, including set-up and configuration, data security controls, password management, information movement.	
2	ICT Audits – GDPR	Assurance	6	<u>Rationale</u> To ensure that the Council has recognised the changes – including the increased penalties for non-compliance - associated with the new GDPR legislation and is compliant with the new requirements. <u>Scope</u> A review which verifies that policy and procedure changes have been made, key roles and responsibilities have been assigned – e.g. information asset owners and data controllers – and that resources have been assigned and a programme of user awareness and training has taken / is taking place.	
2	ICT Audits – Cyber Resilience	Assurance	6	<u>Rationale</u> To ensure that there is an appropriate level of resilience from cyber-attack, including the range of preventive measures in place and also the extent and quality of the backup / recovery arrangements. <u>Scope</u> A review will consider the following:- <ul style="list-style-type: none"> • Information Risk Management Regime • Secure configuration • Network security • Managing user privileges • User education and awareness • Incident management • Malware prevention • Monitoring • Removable media controls • Home and mobile working 	
2	ICT Audits – User Access to Business Systems	Assurance	8	<u>Rationale</u> To ensure that the procedures for allocating user accounts to a selection of significant business applications ensure that those users have only the required access to perform the functions associated with their current role and that the principal of 'least privilege' is adopted.	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<u>Scope</u> A review which captures starters, leavers, changes and amendments to user account activities and also the active control processes for managing the user populations. The review will also capture and analyse the existence and use of privileged user accounts within each application selected to determine the numbers in existence for reasonableness and how these 'superuser' accounts are maintained and used. Where possible we will use CAATS to extract and analyse user data to enhance this audit review.	
2	ICT Audits – Customer Experience	Advice	6	<u>Rationale</u> To ensure that this most significant programme/project in the year ahead is properly and appropriately managed to ensure a successful outcome. <u>Scope</u> An advisory review – likely on a 'call-off' basis as the project unfolds - which provides concurrent guidance and instruction about how the key aspects should be designed, and/or implemented. This could be (but is not restricted to) project management, system integration testing, user security model (application access control configuration), change control processes, data cleansing, data migration (control and testing), Data migration (reconciliation), data migration (security), interface security and data (or interface) error handling.	
2	Housing Homelessness and Temporary Accommodation	Assurance/follow up	8	<u>Rationale:</u> Following concerns at South Bucks Council a full internal audit was conducted into homelessness and temporary accommodation. This audit will follow up on the recommendations made last year <u>Scope:</u> This will be a follow up on recommendations made last year into homelessness and temporary accommodation.	
2	Housing Section 106	Assurance	8	<u>Rationale:</u> Management of Section 106 assets is a key function which receives a periodic audit. <u>Scope:</u> The review will considered the following arrangements for the entering into, and monitoring of, Section 106 Agreements: <ul style="list-style-type: none"> • The determination and monitoring of financial contributions, including the schemes funded as a result of the receipt of such contributions. • The policy and procedures in place for Planning arrangements for Section 106 	
1	Disabilities Facilities Grant	Assurance	5	<u>Rationale:</u> An annual audit which is a central government requirement <u>Scope:</u> To examine all income and expenditure and to confirm money spent is in accordance with the Grant conditions	
1	Safeguarding	Assurance	6	<u>Rationale:</u> This is a periodic audit into an area that has significant reputational	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				<p>risk.</p> <p><u>Scope:</u> The review will consider the following key areas:</p> <ul style="list-style-type: none"> • Appropriate policies and procedures are in place; • Risks are appropriately captured within service area business plans, with a relevant action plan in place; • A training programme is in place to raise awareness of Safeguarding and Prevent issues; and • Adequate reporting mechanisms are in place to keep senior management and Members informed. 	
1	Chiltern Pools	Assurance	8	<p><u>Rationale:</u> This is a significant development for Chiltern Council and an early audit will help support the project</p> <p><u>Scope:</u> To review the business case and progress to date to confirm that PRINCE 2 principles are being followed and the project is on course. There will be a requirement to review the documentation produced to date to confirm PRINCE 2 compliance.</p>	
2	Health and Safety – Contractor Arrangements	Assurance	8	<p><u>Rationale:</u> This is a periodic review to assess the Councils (and Contractors) compliance with Health and Safety regulations for Contractors engaged with the Councils.</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place in Environmental Services for the management of Contractor Health & Safety arrangements. The review will focus on:</p> <ul style="list-style-type: none"> • a review of the controls in place for H&S arrangements for contractors; • a review of the policies and procedures for H&S for contractors; • the monitoring arrangements for H&S; • risk management of H&S; • reporting arrangements for contractor H&S 	
2	Property and Asset Management	Assurance	8	<p><u>Rationale:</u> This is a periodic audit which has not been audited for some time.</p> <p><u>Scope:</u> The audit will review the following:</p> <ul style="list-style-type: none"> • Policy, Procedures and Legislation; • Reviewing inspection regimes; • Council Offices and in particular the management and maintenance of <ul style="list-style-type: none"> i) Capswood – South Bucks main office, and ii) Chiltern DC offices at King George V to include life span, cost of upkeep v cost of disposal fit for purpose now and into the future 	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
				Subletting arrangements	
2	Planning Development and Enforcement	Assurance	11	<p><u>Rationale:</u> This is a periodic audit to provide assurance over the Planning Development and Enforcement process.</p> <p><u>Scope:</u> The audit will include the following keys areas of activity:</p> <ul style="list-style-type: none"> • The policy and procedures to include the Legal, Organisational and Management arrangements • Enforcement Notices • Inspections and Monitoring • Appeals • Data and Information Security • Risk and how this is managed 	
1	Building Control	Assurance	8	<p><u>Rationale:</u> Building Control is an important local authority activity which has not been audited for some time.</p> <p><u>Scope:</u> To assess the adequacy and effectiveness of the internal controls in place at the Council for the building control function. The audit will focus on the following areas:</p> <ul style="list-style-type: none"> • Up to date policies/procedures are in place and accessible, which are compliant with current legislation. • Building control fees are in line with the Building Local Authority Charges Regulation 2010, and are reviewed regularly and presented to Committee for approval. • Applications are assessed in accordance with designated timescales by appropriately qualified personnel, and only processed upon receipt of the correct fee. • Appropriate, accurate and complete records of applications are maintained. • Building control income is received in full, and reconciled to the general ledger with any exceptions investigated 	
<u>CREMATORIUM</u>					
1	Annual Internal Audit	Assurance	6	<p><u>Rationale:</u> As no external audit now takes place this is a detailed internal audit to give management confidence that the systems and procedures are working as expected.</p> <p><u>Scope:</u> An internal audit that includes a review of all the Crematorium's financial transactions</p>	

Quarter	Audit	Type	Days	Rationale & Scope	Prog Ref
1	Additional Audit for 2018/19	Assurance	6	<u>Rationale:</u> Due to system changes at the crematorium an additional audit has been requested for the financial year 2018/19 <u>Scope:</u> To be determined and agreed	
2	Administration System – Follow up	Assurance	4	<u>Rationale:</u> A new administration system went live during 2017/18 and a follow up to the audit is required in 2018/19 <u>Scope:</u> This will be to review the recommendations made during the 2017/18 audit to confirm this have been implemented and the system is now working as expected with the appropriate controls in place	
<u>MANAGEMENT AND FOLLOW UP</u>					
1-4	Follow-up	Follow up	10	<u>Rationale:</u> This is an annual review of the recommendations made during the year to confirm that there has been progress to implement them. <u>Scope:</u> All recommendations made during the year are reviewed to confirm what progress has been to implement them as agreed in the action plan	
1-4	Risk Management Assistance	Assistance	10	Time spent by Audit Director on providing ongoing assistance with Risk Management for the Councils	
4	2018/19 Annual Report	Management	2	Preparing the Annual Assurance report	
1-4	Management & Planning	Management	<u>22</u>	Time spent on managing the contract, liaison meetings, preparation for and attending Audit Committees and other management duties.	
Total days			<u>342</u>		

Annex C: Rolling Strategic Plan

Review Area	KARA Risks 18/19	Type	Days Required				
			2017/18	2018/19	2019/20	2020/21	2021/22
Corporate							
Governance	Probity and Statutory non-compliance	Assurance	8	8	8	8	8
Risk Management	Probity and Statutory non-compliance	Assurance	-	8	-	8	-
Procurement	Probity and Statutory non-compliance	Assurance	-	8	-	-	-
Counter Fraud	Probity and Statutory non-compliance	Assurance	-	8	-	8	-
Complaints and Compliments		Assurance	6	-	6	-	6
Performance Management/Efficient Working		Assurance	-	-	8	-	-
Contracts		Assurance	10	-	9	-	8
Information Governance/Data Quality		Assurance	-	-	8	-	-
Freedom of Information		Assurance	-	-	8	-	-
Data Protection (GDPR)	Probity and Statutory non-compliance	Assurance	8	8	8	-	8
Business Continuity	Probity and Statutory non-compliance	Assurance	-	7	-	8	-
Emergency Planning		Assurance	6	-	-	6	-
Health and Safety – Internal Arrangements		Assurance	-	-	7	-	-
South Bucks – New Company		Assurance	-	-	8	-	-
Purchase Cards	Probity and Statutory non-compliance	Assurance	8	8	8	8	8
Expenses	Probity and Statutory non-compliance	Assurance	8	8	8	8	8
Project Management	Probity and Statutory non-compliance	Assurance	-	8	-	8	-

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Finance							
Main Accounting	Probity and Statutory non-compliance	Assurance	7	7	7	7	7
Payroll	Probity and Statutory non-compliance	Assurance	12	15*	11	15	11
Accounts Receivable (Debtors)	Probity and Statutory non-compliance	Assurance	9	8	8	8	8
Accounts Payable (Creditors)	Probity and Statutory non-compliance	Assurance	9	8	8	8	8
Benefits	Probity and Statutory non-compliance	Assurance	13	13	13	13	13
Council Tax Support	Probity and Statutory non-compliance	Assurance	13	13	13	13	13
Council Tax and NDR	Probity and Statutory non-compliance	Assurance	20	25*	20	25	20
Cash and Bank	Probity and Statutory non-compliance	Assurance	8	7	7	7	7
Treasury Management		Assurance	8	-	7	-	7
Budgetary Control	Probity and Statutory non-compliance	Assurance	-	7	-	7	-
ICT							
Targeted Audits to be agreed and reported to the next Audit (and Standards) Committee		Assurance	24	-	12	18	18
Annual Network Audit	Probity and Statutory non-compliance	Assurance		6	6	6	6
Members IT Support	Probity and Statutory non-compliance	Assurance		6			
GDPR	Probity and Statutory non-compliance	Assurance		6			
Cyber Security	Probity and Statutory non-compliance	Assurance		6			
Business Systems	Probity and Statutory non-compliance	Assurance		8			
Customer Experience	Probity and Statutory non-compliance	Advice		6			
IT Strategy		Assurance		-	6	-	-

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ICT

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Health and Housing							
Housing Homelessness and Temporary Accommodation	Operational Delivery and follow up	Assurance	-	8	-	8	-
Temporary Accommodation (see above)		Assurance	15	-	-	-	-
Housing Section 106	Operational Delivery	Assurance	-	8	-	8	-
Environmental Health		Assurance	-	-	8	-	-
Licensing		Assurance	-	-	8	-	-
Disabilities Facilities Grant	Operational Delivery	Assurance	5	5	5	5	5
Community Services							
Grants		Assurance	-	-	-	6	-
Leisure Contract		Assurance	-	-	8	-	-
Securing	Operational Delivery	Assurance	-	6	-	-	6
Chiltern Pools	Operational Delivery	Assurance	-	8	-	-	-
Environmental Services							
Health and Safety – Contractor Arrangements	Operational Delivery	Assurance	-	8	-	8	-
Grounds Maintenance		Assurance	8	-	-	6	-
Waste services (Chiltern, Wycombe and South Bucks)		Assurance	11	-	11	-	11
Waste Services – Health and Safety		Assurance	15	-	-	-	-
Waste Services – Health and Safety Follow up		Follow up	4	-	-	-	-
Environmental Services Contracts		Assurance	-	-	10	-	-
Car Parking		Assurance	7	-	7	-	7
Property and Asset Management	Operational Delivery	Assurance	-	8	-	8	-

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Cemeteries		Assurance	8	-	-	6	-
Commercial Rents/debt recovery		Assurance	8	-	8	-	8
Sustainable Development							
Planning Development and Enforcement	Operational Delivery	Assurance	-	11	-	11	-
Building Control	Operational Delivery	Assurance	-	8	-	-	8
Legal and Democratic Services							
Land Charges		Assurance	-	-	8	-	-
Electoral Registration		Assurance	-	-	-	8	-
External Solicitors/Court Costs		Assurance	-	-	6	-	-
Human Resources							
Absence Management		Assurance	8	-	8	-	8
Recruitment		Assurance	8	-	-	8	-
Equalities		Assurance	-	-	8	-	-
Harmonised Policies and Procedures		Assurance	8	-	-	7	-
iTrent Payroll System (HR Module)		Assurance	6	-	-	-	6
Performance Monitoring		Assurance	-	-	7	-	-
Other							
Follow up		Follow up	10	10	10	10	10
Risk Management Assistance			15	10	10	10	10
Annual Report			2	2	2	2	2

Audit Management			22	22	22	22	22
		Sub total	337	326	344	322	273
Crematorium							
Annual Internal Audit		Assurance	5	6	6	6	6
Additional audit for 2018/19		Assurance	-	6	-	-	-
Administration System (follow up in 2018/19)		Assurance	5	4	-	-	-
		Grand Total	347	342	350	328	279

- ***Additional days to enable a comprehensive review of key databases using Data Analytics techniques.**

Annex D: Assurance Mapping (For Information)

Corporate Assurance Risks

We consider four corporate assurance risks; directed; compliance; operational and reputational, and tailor the type of audit accordingly. For all types of audit we also taken into account value for money considerations and any linkages to the organisational Assurance Framework. The outcomes of our work on these corporate assurance risks informs both the individual assignment assurance assessment and also the annual assurance opinion statement. Detailed explanations of these assurance assessments are set out in full in each audit report.

Assurance Assessment Gradings

We use four levels of assurance assessment: substantial; reasonable, limited and no. Detailed explanations of these assurance assessments are set out in full in each audit report.

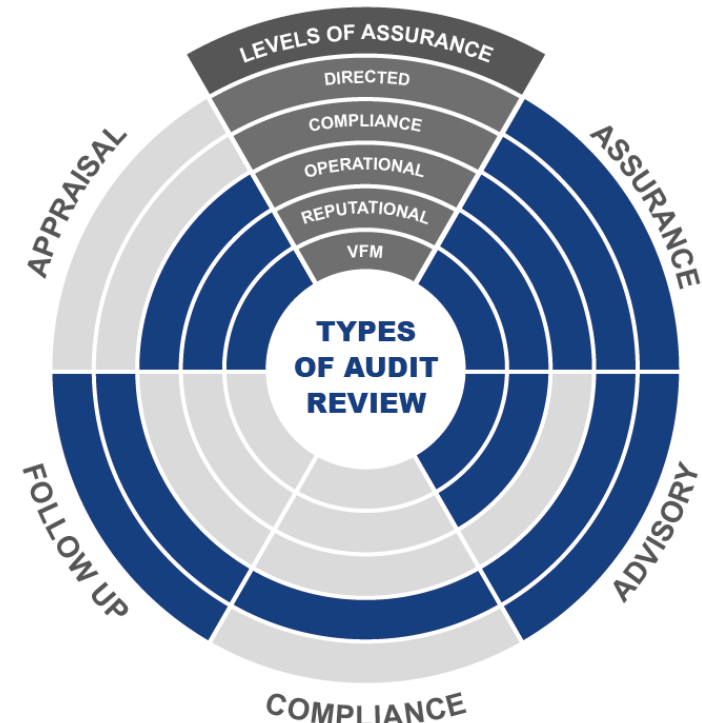
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LEVELS OF ASSURANCE PROVIDED



Types of Audit Review

The Annual Plan includes a range of types of audit review. The different types of review focus on one or more of the corporate assurance risks. This approach enables more in-depth work to be carried out in the individual assignments than would be possible if all four assurance risks were considered in every review. The suite of audit reviews and how they individually and collectively enable us to inform our overall opinion on the adequacy and effectiveness of the governance, risk and control arrangements is set out in the assurance mapping diagram.



Item 6

Annex E: Audit Remit (For Information)

Role

The main objective of the internal audit activity carried out by TIAA is to provide, in an economical, efficient and timely manner, an objective evaluation of, and opinion on, the overall adequacy and effectiveness of the Councils framework of governance, risk management and control. TIAA is responsible for giving assurance to Chiltern and South Bucks Councils on the adequacy and effectiveness of the Councils risk management, control and governance processes.

Scope

All Chiltern and South Bucks Councils activities fall within the remit of TIAA. TIAA may consider the adequacy of controls necessary to secure propriety, economy, efficiency and effectiveness in all areas. It will seek to confirm that the Councils management has taken the necessary steps to achieve these objectives and manage the associated risks. It is not within the remit of TIAA to question the appropriateness of policy decisions. However, TIAA is required to examine the arrangements by which such decisions are made, monitored and reviewed.

TIAA may also conduct any special reviews requested by the board, audit committee or the nominated officer (being the post responsible for the day to day liaison with the TIAA), provided such reviews do not compromise the audit service's objectivity or independence, or the achievement of the approved audit plan.

Standards and Approach

TIAA's work will be performed with due professional care, in accordance with the requirements of the PSIAS.

Access

TIAA has unrestricted access to all documents, records, assets, personnel and premises of the Councils and is authorised to obtain such information and explanations as they consider necessary to form their opinion. The collection of data for this purpose will be carried out in a manner prescribed by TIAA's professional standards, Information Security and Information Governance policies.

Independence

TIAA has no executive role, nor does it have any responsibility for the development, implementation or operation of systems. However, it may provide independent and objective advice on risk management, control, governance processes and related matters, subject to resource constraints. For day to day administrative purposes only, TIAA reports to a nominated officer within the Councils and the reporting arrangements must take account of the nature of audit work undertaken. TIAA has a right of direct access to the chair of the Audit (and Standards) Committee and the Section 151 holder.

To preserve the objectivity and impartiality of TIAA's professional judgement, responsibility for implementing audit recommendations rests with the Councils management.

Consultancy activities are only undertaken with distinct regard for potential conflict of interest. In this role we will act in an advisory capacity and the nature and scope of the work will be agreed in advance and strictly adhered to.

Irregularities, Including Fraud and Corruption

TIAA will without delay report to the appropriate regulator, serious weaknesses, significant fraud, major accounting and other breakdowns subject to the requirements of the Proceeds of Crime Act 2003.

TIAA will be informed when evidence of potential irregularity, including fraud, corruption or any impropriety, is discovered so that TIAA can consider the adequacy of the relevant controls, evaluate the implication of the fraud on the risk management, control and governance processes and consider making recommendations as appropriate. The role of TIAA is not to investigate the irregularity unless commissioned to do so.

Certification of claims and returns annual report 2016-17

Chiltern District Council

7 December 2017

Ernst & Young LLP



Building a better
working world

Audit and Standards Committee
Chiltern District Council
King George V Road
Amersham
BUCKS
HP6 5AW

Direct line: 0118 928 1167
Email: ABrittain@uk.ey.com

Dear Members

Certification of claims and returns annual report 2016-17 Chiltern District Council

We are pleased to report on our certification work on Chiltern District Council's 2016-17 claims, which we summarise here.

Scope of work

Local authorities claim large sums of public money in grants and subsidies from central government and other grant-paying bodies and must complete returns providing financial information to government departments. In some cases these grant-paying bodies and government departments require appropriately qualified auditors to certify the claims and returns submitted to them.

From 1 April 2015, the duty to make arrangements for the certification of relevant claims and returns and to prescribe scales of fees for this work was delegated to the Public Sector Audit Appointments Ltd (PSAA) by the Secretary of State for Communities and Local Government.

For 2016-17, these arrangements required only the certification of the housing benefits subsidy claim. In certifying this we followed a methodology determined by the Department for Work and Pensions and did not undertake an audit of the claim.

Summary

Section 1 of this report outlines the results of our 2016-17 certification work and highlights the significant issues.

We checked and certified the housing benefits subsidy claim with a total value of £19,048,489. We met the submission deadline. We issued a qualification letter; details of the qualification matters are included in section 1. It was not necessary to amend the claim.

Fees for certification and other returns work are summarised in section 2. The housing benefits subsidy claim fees for 2016-17 were published by the Public Sector Audit Appointments Ltd (PSAA) in March 2016 and are available on the PSAA's website (www.psaa.co.uk).

We welcome the opportunity to discuss the contents of this report with you at the Audit and Standards Committee on 17 January 2018.



We would like to thank the Council's officers for their help. The certification process requires considerable input from them to be carried out efficiently and we are most grateful for their assistance.

Yours faithfully

Andrew Brittain
Associate Partner
Ernst & Young LLP
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2. 2016-17 certification fees.....2
3. Looking forward.....3

1. Housing benefits subsidy claim

Scope of work	Results
Value of claim presented for certification	£19,048,489
Amended/Not amended	Not amended
Qualification letter	Yes
Fee – 2016-17	£12,678
Fee – 2015-16	£9,240

Local Government administers the Government's housing benefits scheme for tenants and can claim subsidies from the Department for Work and Pensions (DWP) towards the cost of benefits paid.

The certification guidance requires auditors to complete more extensive '40+' or extended testing if initial testing identifies errors in the calculation of benefit or compilation of the claim. 40+ testing may also be carried out as a result of errors that have been identified in the audit of previous years claims. We found errors and carried out extended testing in several areas.

Extended and other testing identified errors which the Council amended had a small net impact on the claim. We have reported underpayments, uncertainties and the extrapolated value of other errors in a qualification letter. The DWP then decides whether to ask the Council to carry out further work to quantify the error or to claw back the benefit subsidy paid. These are the main issues we reported:

Testing of the initial sample and 40+ identified (2016-17):

- 1 rent allowance case where self-employed earnings was incorrectly calculated. However it did not have an impact on subsidy as it was fully covered by earnings disregard. Therefore we did not test another 40 cases.
- No issues were identified in our initial review of non-HRA cases
- No issues were identified in our initial review of modified schemes.

Testing of the errors identified in 2015-16:

Initial testing did not identify any errors relating to earnings, or misclassification of local authority overpayments as eligible overpayments. However, there was a prior year qualification within this cell or related cells relating to these types of error in both 2014-15 and 2015-16, and the DWP requires us to complete 40+ testing in these cases.

- Testing an additional sample of 40 earnings cases identified 2 cases where the Council had overpaid benefit as a result of earned income errors; 3 cases where benefit was underpaid; and 1 where the error made no difference. The extrapolated impact of the error is £765, if the DWP decides to claw it back.
- 40+ testing for misclassified overpayments identified 7 cases where the Council had overpaid benefit as a result of an overpayment misclassification and 1 case where benefit was underpaid. The final extrapolated impact of the error is £27,456 if the DWP decides to claw it back. As the initial extrapolation resulted in the Council exceeding its threshold (which increases the loss to the Council), Council officers carried out more work to refine the population. We reviewed this work and were able to agree a lower figure which did not breach the threshold.

All these extrapolations were reported to the DWP in the qualification letter. There is no impact on the claim, but a total extrapolation of £28,221 which the DWP may decide to claw back from the Council.

2. 2016-17 certification fees

The PSAA determine a scale fee each year for the audit of claims and returns. For 2016-17, these scale fees were published by the Public Sector Audit Appointments Ltd (PSAA) in March 2016 and are available on the PSAA's website (www.psaa.co.uk).

Claim or return	2016-17	2016-17	2015-16
	Actual fee £	Indicative fee £	Actual fee £
Housing benefits subsidy claim	12,678	12,678	9,240

No changes to the 2016-17 fees are being proposed.

The fee level is set by referring to the actual fee for two years previously, adjusted for the 25% "discount" arising from the last of the savings made through the final Audit Commission regime negotiations.

3. Looking forward

2017/18

From 1 April 2015, the duty to make arrangements for the certification of relevant claims and returns and to prescribe scales of fees for this work was delegated to (PSAA) by the Secretary of State for Communities and Local Government.

The Council's indicative certification fee for 2017/18 is £9,240. This was set by PSAA and is based on final 2015/16 certification fees.

Details of individual indicative fees are available at the following web address:

<https://www.psaa.co.uk/audit-fees/201718-work-programme-and-scales-of-fees/individual-indicative-certification-fees/>

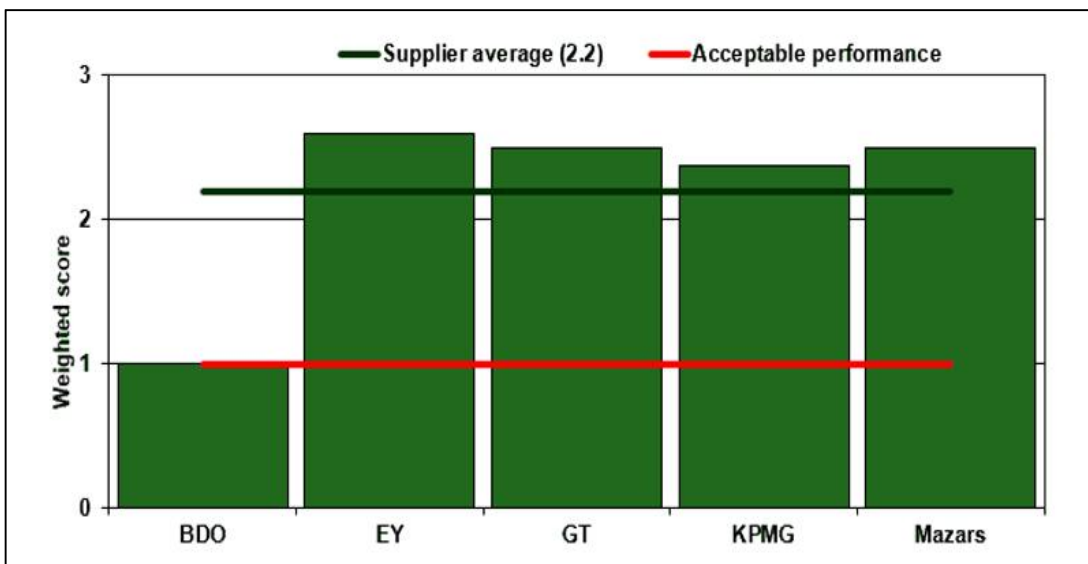
We must seek the agreement of PSAA to any proposed variations to these indicative certification fees. We will inform the Director of Resourcing before seeking any such variation.

2018/19

From 2018/19, the Council will be responsible for appointing their own reporting accountant to undertake the certification of the housing benefit subsidy claim in accordance with the Housing Benefit Assurance Process (HBAP) requirements that are being established by the DWP. DWP's HBAP guidance is under consultation and is expected to be published around January 2018.

We would be pleased to undertake this work for you, and are currently in discussion with officers to provide a competitive quotation for this work.

We currently provide HB subsidy certification to 106 clients through our specialist Government & Public Sector team. We provide a high quality service and are proud that in the PSAA's latest Annual Regulatory and Compliance Report (July 2017) we scored highest of all providers, with an average score of 2.6 (out of 3).



As we also expect PSAA to appoint us your statutory auditor in December 2017, we can provide a comprehensive assurance service, making efficiencies for you and building on the knowledge and relationship we have established with your Housing Benefits service.

Looking forward

EY | Assurance | Tax | Transactions | Advisory

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Chiltern District
Council
Audit planning report
Year ended 31 March 2018

17 January 2018



Private and Confidential

17 January 2018

Audit & Standards Committee
Chiltern District Council
King George V House
King George V Road
Amersham
Buckinghamshire
HP6 5AW

Dear Committee Members

Audit planning report

We are pleased to attach our Audit Plan which sets out how we intend to carry out our responsibilities as auditor. Its purpose is to provide the Committee with a basis to review our proposed audit approach and scope for the 2017/18 audit in accordance with the requirements of the Local Audit and Accountability Act 2014, the National Audit Office's 2015 Code of Audit Practice, the Statement of Responsibilities issued by Public Sector Audit Appointments (PSAA) Ltd, auditing standards and other professional requirements. It is also to ensure that our audit is aligned with the Committee's service expectations.

This plan summarises our initial assessment of the key risks driving the development of an effective audit for the Council, and outlines our planned audit strategy in response to those risks.

This report is intended solely for the information and use of the Committee and management, and is not intended to be and should not be used by anyone other than these specified parties.

We welcome the opportunity to discuss this report with you on 17 January 2018 as well as to understand whether there are other matters which you consider may influence our audit.

Yours faithfully

Andrew Brittain
Associate Partner

For and on behalf of Ernst & Young LLP

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Appendices



In April 2015 Public Sector Audit Appointments Ltd (PSAA) issued "Statement of responsibilities of auditors and audited bodies". It is available from the via the PSAA website (www.PSAA.co.uk). The Statement of responsibilities serves as the formal terms of engagement between appointed auditors and audited bodies. It summarises where the different responsibilities of auditors and audited bodies begin and end, and what is to be expected of the audited body in certain areas. The "Terms of Appointment (updated February 2017)" issued by the PSAA sets out additional requirements that auditors must comply with, over and above those set out in the National Audit Office Code of Audit Practice (the Code) and in legislation, and covers matters of practice and procedure which are of a recurring nature. This report is made solely to the Audit and Standards Committee and management of Chiltern District Council in accordance with the statement of responsibilities. Our work has been undertaken so that we might state to the Audit and Standards Committee, and management of Chiltern District Council those matters we are required to state to them in this report and for no other purpose. To the fullest extent permitted by law we do not accept or assume responsibility to anyone other than the Audit and Standards Committee and management of Chiltern District Council for this report or for the opinions we have formed. It should not be provided to any third-party without our prior written consent.



01

Overview of our 2017/18 audit strategy



Overview of our 2017/18 audit strategy

The following 'dashboard' summarises the significant accounting and auditing matters outlined in this report. It seeks to provide the Audit and Standards Committee with an overview of our initial risk identification for the upcoming audit and any changes in risks identified in the current year.

Audit risks and areas of focus

Risk / area of focus	Risk identified	Change from PY	Details
Misstatements due to fraud or error	Fraud risk	No change in risk or focus	As identified in ISA 240, management is in a unique position to perpetrate fraud because of its ability to manipulate accounting records directly or indirectly and prepare fraudulent financial statements by overriding controls that would otherwise appear to be operating effectively.
Risk of Management Override	Fraud risk	No change in risk or focus	Under ISA240 there is a presumed risk that revenue may be misstated due to improper recognition of revenue. In the public sector, this requirement is modified by Practice Note 10, issued by the Financial Reporting Council, which states that auditors should also consider the risk that material misstatements may occur by the manipulation of expenditure recognition.
Valuation of Land and Buildings	Other risk	No change in risk or focus	The fair value of Property, Plant and Equipment (PPE) and Investment Properties (IP) represents significant balances in the Council's accounts and is subject to valuation changes and impairment reviews. Management is required to make material judgemental inputs and apply estimation techniques to calculate the year-end balances recorded in the balance sheet.

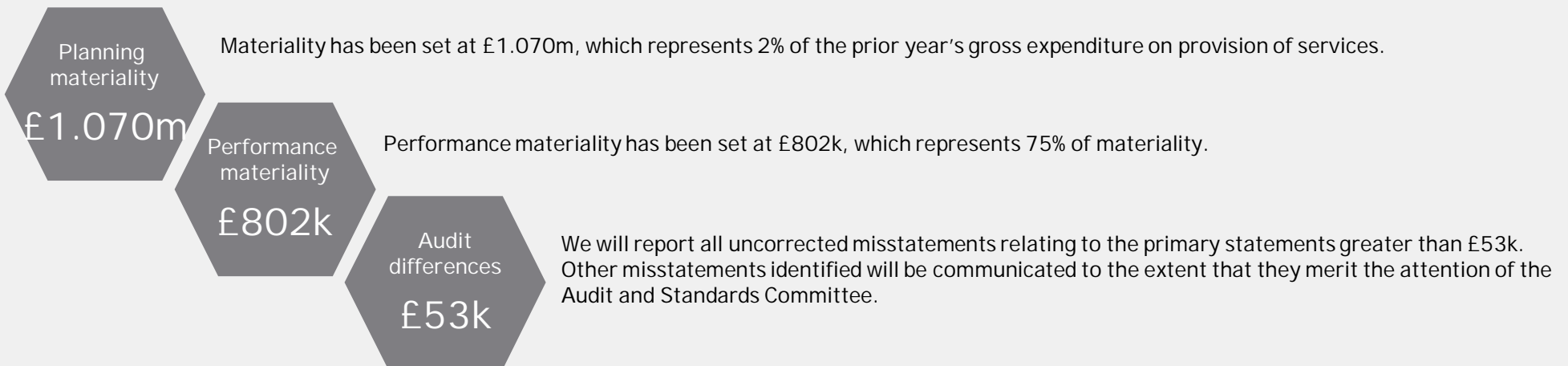
Overview of our 2017/18 audit strategy

The following 'dashboard' summarises the significant accounting and auditing matters outlined in this report. It seeks to provide the Audit and Standards Committee with an overview of our initial risk identification for the audit and any changes in risks identified in the current year.

Pension Liability Valuation	Other risk	No change in risk or focus	<p>The Local Authority Accounting Code of Practice and IAS19 require the Council to make extensive disclosures within its financial statements regarding its membership of the Local Government Pension Scheme administered by the Council.</p> <p>The Council's pension fund liability is a material estimated balance and the Code requires that this asset be disclosed on the Council's balance sheet. The information disclosed is based on the IAS 19 report issued to the Council by the actuary, Barnett Waddingham.</p> <p>Accounting for this scheme involves significant estimation and judgement, so management engages an actuary to undertake the calculations on its behalf. ISAs (UK and Ireland) 500 and 540 require us to undertake procedures on management's use of experts and the assumptions underlying fair value estimates.</p>
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Materiality



Item 9

Overview of our 2017/18 audit strategy

Audit scope

This Audit Plan covers the work that we plan to perform to provide you with:

- § Our audit opinion on whether the financial statements of Chiltern District Council give a true and fair view of the financial position as at 31 March 2018 and of the income and expenditure for the year then ended; and
- § Our conclusion on the Council's arrangements to secure economy, efficiency and effectiveness.

We will also review and report to the National Audit Office (NAO), to the extent and in the form required by them, on the Council's Whole of Government Accounts return.

Our audit will also include the mandatory procedures that we are required to perform in accordance with applicable laws and auditing standards.

When planning the audit we take into account several key inputs:

- § Strategic, operational and financial risks relevant to the financial statements;
- § Developments in financial reporting and auditing standards;
- § The quality of systems and processes;
- § Changes in the business and regulatory environment; and,
- § Management's views on all of the above.

This means that our audit is focused on the areas that matter and our feedback is more likely to be relevant to the Council.



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02

Audit risks



Item 9

Our response to significant risks

We have set out the significant risks (including fraud risks) identified for the current year audit along with the rationale and expected audit approach. The risks identified below may change to reflect any significant findings or subsequent issues we identify during the audit.

<p>Risk of fraud in revenue and expenditure recognition</p>	<p>What is the risk?</p>	<p>What will we do?</p>
<p>Financial statement impact</p> <p>Misstatements that occur in relation to the risk of fraud in revenue and expenditure recognition could affect the income and expenditure accounts.</p>	<p>Under ISA 240 there is a presumed risk that revenue may be misstated due to improper revenue recognition. In the public sector, this requirement is modified by Practice Note 10 issued by the Financial Reporting Council, which states that auditors should also consider the risk that material misstatements may occur by the manipulation of expenditure recognition.</p>	<ul style="list-style-type: none"> • Review and test revenue and expenditure recognition policies • Review and discuss with management any accounting estimates on revenue or expenditure recognition for evidence of bias • Develop a testing strategy to test material revenue and expenditure streams • Review and test revenue cut-off at the period end date • Review in-year financial projections and compare to year-end position. • Review capital expenditure on property, plant and equipment to ensure it meets the relevant accounting requirements to be capitalised

Our response to significant risks (continued)

We have set out the significant risks (including fraud risks) identified for the current year audit along with the rationale and expected audit approach. The risks identified below may change to reflect any significant findings or subsequent issues we identify during the audit.

Risk of Management Override

What is the risk?

The financial statements as a whole are not free of material misstatements whether caused by fraud or error.

As identified in ISA (UK and Ireland) 240, management is in a unique position to perpetrate fraud because of its ability to manipulate accounting records directly or indirectly and prepare fraudulent financial statements by overriding controls that otherwise appear to be operating effectively. We identify and respond to this fraud risk on every audit engagement.

What will we do?

- Identifying fraud risks during the planning stages.
- Inquiry of management about risks of fraud and the controls put in place to address those risks.
- Understanding the oversight given by those charged with governance of management's processes over fraud.
- Consideration of the effectiveness of management's controls designed to address the risk of fraud.
- Determining an appropriate strategy to address those identified risks of fraud.
- Performing mandatory procedures regardless of specifically identified fraud risks, including testing of journal entries and other adjustments in the preparation of the financial statements.
- Reviewing accounting estimates for evidence of management bias.
- Evaluating the business rationale for significant unusual transactions.

Financial statement impact

We have assessed that the risk of management override is most likely to affect the estimates in the financial statements, such as year end accruals, provisions and asset valuations. These impact both on the Balance Sheet and Income Statement.

Other areas of audit focus

We have identified other areas of the audit, not classified as significant risks, but still important when considering the risks of material misstatement to the financial statements and disclosures and therefore may be key audit matters we will include in our audit report.

What is the risk/area of focus?	What will we do?
<p>Valuation of Land and Buildings</p> <p>The fair value of Property, Plant and Equipment (PPE) and Investment Properties (IP) represents significant balances in the Council's accounts and is subject to valuation changes and impairment reviews. Management is required to make material judgemental inputs and apply estimation techniques to calculate the year-end balances recorded in the balance sheet.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Consider the work performed by the Council's valuers (Wilks, Head & Eve), including the adequacy of the scope of the work performed, their professional capabilities and the results of their work; • Sample test key asset information used by the valuers in performing their valuation (e.g. building areas to support valuations based on price per square metre); • Consider the annual cycle of valuations to ensure that assets have been valued within a five-year rolling programme as required by the Code for PPE, and annually for IP. We also consider if there are any specific changes to assets communicated to the valuer; • Review assets not subject to valuation in 2017/18 to confirm that the remaining asset base is not materially misstated; • Consider changes to useful economic lives as a result of the most recent valuation; and • Test accounting entries have been correctly processed in the financial statements,

Other areas of audit focus (continued)

We have identified other areas of the audit, that have not been classified as significant risks, but are still important when considering the risks of material misstatement to the financial statements and disclosures and therefore may be key audit matters we will include in our audit report.

What is the risk/area of focus?	What will we do?
<p>Pension Asset Valuation</p> <p>The Local Authority Accounting Code of Practice and IAS19 require the Council to make extensive disclosures within its financial statements regarding its membership of the Local Government Pension Scheme administered by the Council.</p> <p>The Council's pension fund liability is a material estimated balance and the Code requires that this asset be disclosed on the Council's balance sheet.</p> <p>The information disclosed is based on the IAS 19 report issued to the Council by the actuary Barnett Waddingham.</p> <p>Accounting for this scheme involves significant estimation and judgement and therefore management engages an actuary to undertake the calculations on their behalf. ISAs (UK and Ireland) 500 and 540 require us to undertake procedures on the use of management experts and the assumptions underlying fair value estimates.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Undertake IAS19 protocol procedures assisted by the pension fund audit team to obtain assurances over the information supplied to the actuary in relation to Chiltern District Council; • Assess the work of the Pension Fund actuary (Barnett Waddingham) including the assumptions they have used. We do this by relying on the work of PWC - Consulting Actuaries commissioned by the National Audit Office for all Local Government sector auditors - and considering any relevant reviews by the EY actuarial team; and • Review and test the accounting entries and disclosures made within the Council's financial statements in relation to IAS19.



03

Value for Money Risks





Background

We are required to consider whether the Council has 'proper arrangements' to secure economy, efficiency and effectiveness on its use of resources. This is known as our value for money conclusion.

For 2017/18, this is based on the overall evaluation criterion:

"In all significant respects, the audited body had proper arrangements to ensure it took properly informed decisions and deployed resources to achieve planned and sustainable outcomes for taxpayers and local people"

Proper arrangements are defined by statutory guidance issued by the National Audit Office. They comprise your arrangements to:

- § Take informed decisions;
- § Deploy resources in a sustainable manner; and
- § Work with partners and other third parties.

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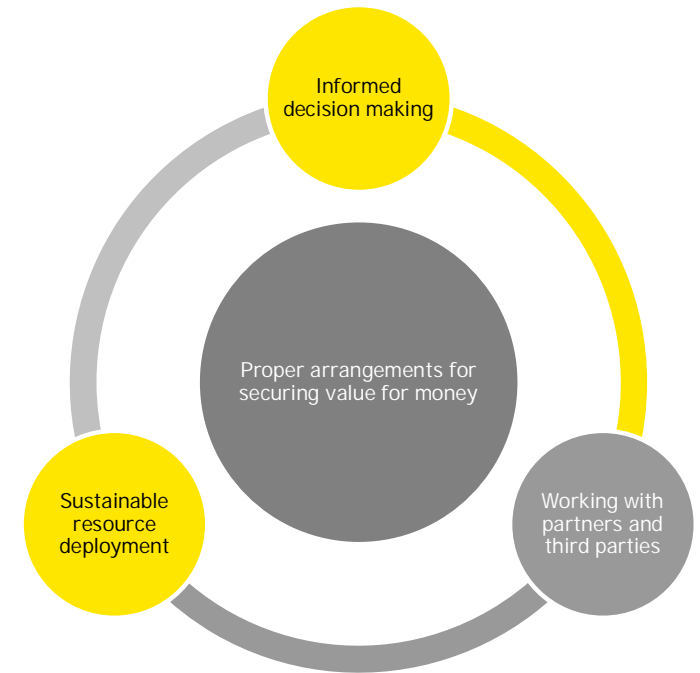
In considering your proper arrangements, we will draw on the requirements of the CIPFA/SOLACE framework for local government to ensure that our assessment is made against a framework that you are already required to have, and to report on through documents such as your annual governance statement.

We are only required to determine whether there are any risks that we consider significant, which the Code of Audit Practice defines as:

"A matter is significant if, in the auditor's professional view, it is reasonable to conclude that the matter would be of interest to the audited body or the wider public"

Our risk assessment supports the planning of sufficient work to enable us to deliver a safe conclusion on arrangements to secure value for money and enables us to determine the nature and extent of further work that may be required. If we do not identify any significant risks there is no requirement to carry out further work.

Our risk assessment has therefore considered both the potential financial impact of any issues we have identified, and also the likelihood that the issue will be of interest to local taxpayers, the Government and other stakeholders. We have found no significant risks which we view as relevant to our value for money conclusion.





04

Audit materiality

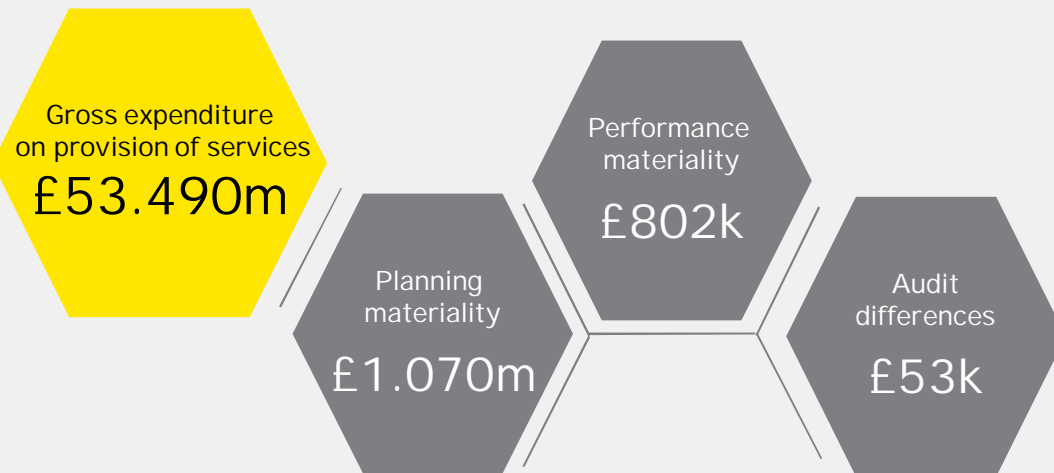


Materiality

Materiality

For planning purposes, materiality for 2017/18 has been set at £1.070m. This represents 2% of the Council's prior year gross expenditure on provision of services. It will be reassessed throughout the audit process. We have provided supplemental information about audit materiality in Appendix D.

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We request that the Audit and Standards Committee confirm its understanding of, and agreement to, these materiality and reporting levels.

Key definitions

Planning materiality – the amount over which we anticipate misstatements would influence the economic decisions of a user of the financial statements.

Performance materiality – the amount we use to determine the extent of our audit procedures. We have set performance materiality at £802k which represents 75% of planning materiality. The rationale for using 75% is that we anticipate finding few or no errors during the audit. This expectation arises from our experience of the Council in the previous year.

Audit difference threshold – we propose that misstatements identified below this threshold are clearly trivial. We will report to you all uncorrected misstatements over this amount relating to the comprehensive income and expenditure statement, balance sheet and collection fund that have an effect on income or that relate to other comprehensive income.

Other uncorrected misstatements, such as reclassifications and misstatements in the cash flow statement and movement in reserves statement or disclosures, and corrected misstatements will be communicated to the extent that they merit the attention of the Audit and Standards Committee, or are important from a qualitative perspective.

Specific materiality – We have set a materiality of £1,000 for remuneration disclosures, related party transactions, members' allowances and exit packages. This is because these areas are more sensitive for users of the financial statements.

Item 9



05

Scope of our audit



Our Audit Process and Strategy

Objective and Scope of our Audit scoping

Under the Code of Audit Practice our principal objectives are to review and report on the Council's financial statements and arrangements for securing economy, efficiency and effectiveness in its use of resources to the extent required by the relevant legislation and the requirements of the Code.

We issue an audit report that covers:

1. Financial statement audit

Our objective is to form an opinion on the financial statements under International Standards on Auditing (UK and Ireland).

We also perform other procedures as required by auditing, ethical and independence standards, the Code and other regulations. We outline below the procedures we will undertake during the course of our audit.

Procedures required by standards

- Addressing the risk of fraud and error;
- Significant disclosures included in the financial statements;
- Council-wide controls;
- Reading other information contained in the financial statements and reporting whether it is inconsistent with our understanding and the financial statements; and
- Auditor independence.

Procedures required by the Code

- Reviewing, and reporting on as appropriate, other information published with the financial statements, including the Annual Governance; and
- Reviewing and reporting on the Whole of Government Accounts return, in line with the instructions issued by the NAO

2. Arrangements for securing economy, efficiency and effectiveness (value for money)

We are required to consider whether the Council has 'proper arrangements' to secure economy, efficiency and effectiveness on its use of resources.

Our Audit Process and Strategy (continued)

Audit Process Overview

Our audit involves:

- Identifying and understanding the key processes and internal controls; and
- Substantive tests of detail of transactions and amounts.

For 2017/18 we plan to follow a substantive approach to the audit, as we have concluded this is the most efficient way to obtain the level of audit assurance required to conclude that the financial statements are not materially misstated.

Analytics:

We will use our computer-based analytics tools to enable us to capture whole populations of your financial data, in particular journal entries. These tools;

- Help identify specific exceptions and anomalies which can then be subject to more traditional substantive audit tests; and
- Give greater likelihood of identifying errors than random sampling techniques.

We will report the findings from our process and analytics work, including any significant weaknesses or inefficiencies identified and recommendations for improvement, to management and the Audit and Standards Committee.

Internal audit:

We will review internal audit plans and the results of their work. We will reflect the findings from these reports, together with reports from any other work completed in the year, in our detailed audit plan, where they raise issues that could have an impact on the financial statements.



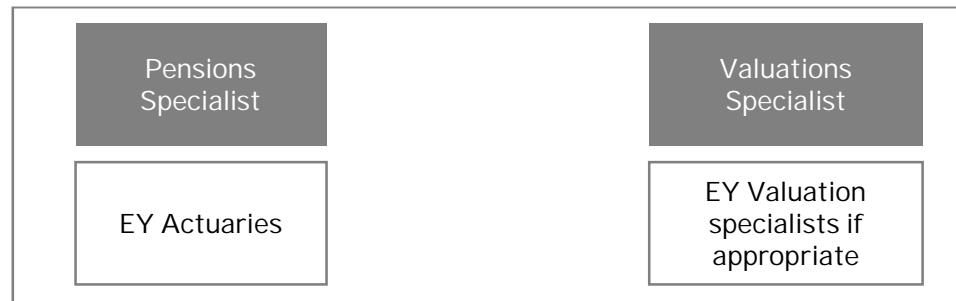
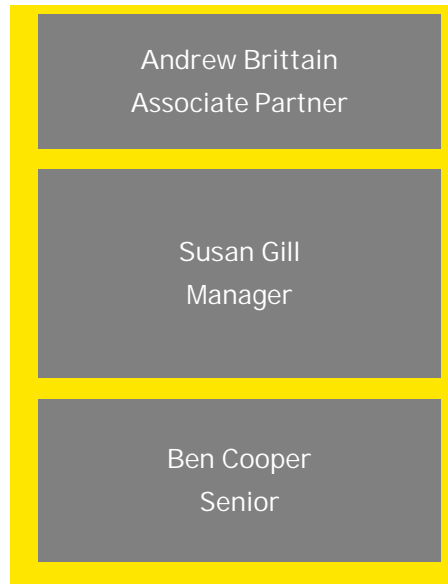
06

Audit team



Audit team

Audit team structure:



Use of specialists

When auditing key judgements, we are often required to rely on the input and advice provided by specialists who have qualifications and expertise not possessed by the core audit team. The areas where either EY or third party specialists provide input for the current year audit are:

Area	Specialists
Valuation of Land and Buildings	Wilks, Head and Eve - RICS Registered Valuers
Pensions disclosure	EY Actuaries PWC Actuary commissioned by NAO Barnett Waddingham - Actuary

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 In accordance with Auditing Standards, we will evaluate each specialist's professional competence and objectivity, considering their qualifications, experience and available resources, together with the independence of the individuals performing the work.

We also consider the work performed by the specialist in light of our knowledge of the Council's business and processes and our assessment of audit risk in the particular area. For example, we would typically perform the following procedures:

- Analyse source data and make inquiries as to the procedures used by the specialist to establish whether the source data is relevant and reliable;
- Assess the reasonableness of the assumptions and methods used;
- Consider the appropriateness of the timing of when the specialist carried out the work; and
- Assess whether the substance of the specialist's findings are properly reflected in the financial statements.



07

Audit timeline





Audit timeline

Timetable of communication and deliverables

Timeline

Below is a timetable showing the key stages of the audit and the deliverables we have agreed to provide to you through the audit cycle in 2017/18.

From time to time matters may arise that require immediate communication with the Audit and Standards Committee and we will discuss them with the Committee Chairman as appropriate. We will also provide updates on corporate governance and regulatory matters as necessary.

Audit phase	Timetable	Audit and Standards Committee timetable	Deliverables
Planning: Risk assessment and setting of scopes. Walkthrough of key systems and processes	November 2017		
	January 2018	Audit and Standards Committee: January 2018	Audit Planning Report
Interim audit testing	February to March 2018	Audit and Standards Committee: March 2018	Interim audit update
Year end audit Audit Completion procedures	May to June 2018		
	July 2018	Audit and Standards Committee: July 2018	Audit Results Report Audit opinions and completion certificates
Conclusion of reporting	August 2018	Audit and Standards Committee: November 2018	Annual Audit Letter
Housing Benefit Claim	April to November 2018		Certified Claim
Reporting on Certification work	December 2018	January 2019	Annual certification work report



08

Independence



Introduction

The FRC Ethical Standard and ISA (UK) 260 “Communication of audit matters with those charged with governance”, requires us to communicate with you promptly on all significant facts and matters that bear upon our integrity, objectivity and independence. The Ethical Standard, as revised in June 2016, requires that we communicate formally both at the planning stage and at the conclusion of the audit, as well as during the course of the audit if appropriate. The aim of these communications is to ensure full and fair disclosure by us to those charged with your governance on matters in which you have an interest.

Required communications

Planning stage	Final stage
<ul style="list-style-type: none"> ▶ Any principal threats to objectivity and independence identified by Ernst & Young (EY) including consideration of all relationships between you, your affiliates and directors and us; ▶ Any safeguards adopted and the reasons why they are considered to be effective, including any Engagement Quality review; ▶ The overall assessment of threats and safeguards; ▶ Information about the general policies and process within EY to maintain objectivity and independence. 	<ul style="list-style-type: none"> ▶ In order for you to assess the integrity, objectivity and independence of the firm and your audit team, we must provide a written disclosure of relationships (including the provision of non-audit services) that may bear on our integrity, objectivity and independence. This is required to consider relationships with the Council, its directors and senior management, its affiliates, and its connected parties and any threats to integrity or objectivity, including those that could compromise independence. We are also required to disclose any safeguards that we have, and why they address such threats, together with any other information necessary to enable our objectivity and independence to be assessed; ▶ Details of non-audit services provided and the fees charged for them; ▶ Written confirmation that all team members are independent; ▶ Details of any inconsistencies between FRC Ethical Standard and your policy for the supply of non-audit services by EY and any apparent breach of that policy; ▶ Details of any contingent fee arrangements for non-audit services provided by us or our network firms; and ▶ An opportunity to discuss auditor independence issues.

During the audit we are also required to communicate with you whenever we make any significant judgements about threats to objectivity and independence, and the appropriateness of safeguards, e.g. when accepting an engagement to provide non-audit services.

We also provide information on any contingent fee arrangements, the amounts of any future contracted services, and details of any written proposal to provide non-audit services that has been submitted;

We ensure that the total amount of fees that EY and our network firms have charged for the provision of services during the reporting period are disclosed.

Relationships, services and related threats and safeguards

We highlight the following significant facts and matters that may be reasonably considered to bear upon our objectivity and independence, including any principal threats. We have adopted the safeguards noted below to mitigate these threats along with the reasons why they are considered to be effective. However we will only perform non-audit services if the service has been pre-approved in accordance with your policy.

Overall Assessment

Overall, we consider that the safeguards that have been adopted appropriately mitigate the principal threats identified. We therefore confirm that EY is independent and the objectivity and independence of Andrew Brittain, your audit engagement partner, and the audit engagement team have not been compromised.

Self interest threats

A self-interest threat arises when EY has financial or other interests in the Council. Examples include where we receive significant fees for non-audit services; where we need to recover long outstanding fees; or where we enter into a business relationship with you. At the time of writing, there are no long outstanding fees.

We believe that it is appropriate for us to undertake permissible non-audit services and we will comply with the policies that you have approved.

Page 8 of 8
None of the services are prohibited under the FRC's ES or the National Audit Office's Auditor Guidance Note 01 and the services have been approved in accordance with your policy on pre-approval. The ratio of non-audit fees to audits fees is not permitted to exceed 70%.

At the time of writing, no non-audit services have been undertaken. No additional safeguards are required.

A self-interest threat may also arise if members of our audit engagement team have objectives or are rewarded in relation to sales of non-audit services to you. We confirm that no member of our audit engagement team, including those from other service lines, has objectives or is rewarded in relation to sales to you, in compliance with Ethical Standard part 4.

There are no other self-interest threats at the date of this report.

Self review threats

Self-review threats arise when the results of a non-audit service performed by EY or others within the EY network are reflected in the amounts included or disclosed in the financial statements.

There are no self-review threats at the date of this report.

Management threats

Partners and employees of EY are prohibited from taking decisions on behalf of management of the Council. Management threats may also arise during the provision of a non-audit service where management is required to make judgements or decision based on that work.

There are no management threats at the date of this report.

Relationships, services and related threats and safeguards

Other threats

Other threats, such as advocacy, familiarity or intimidation, may arise.

There are no other threats at the date of this report.

Other communications

EY Transparency Report 2017

Ernst & Young (EY) has policies and procedures that instil professional values as part of firm culture and ensure that the highest standards of objectivity, independence and integrity are maintained.

Details of the key policies and processes in place within EY for maintaining objectivity and independence can be found in our annual Transparency Report which the firm is required to publish by law. The most recent version of this Report is for the year ended 1 July 2017 and can be found here:

<http://www.ey.com/uk/en/about-us/ey-uk-transparency-report-2017>



09

Appendices



Appendix A

Fees

The duty to prescribe fees is a statutory function delegated to Public Sector Audit Appointments Ltd (PSAA) by the Secretary of State for Communities and Local Government.

PSAA has published a scale fee for all relevant bodies. This is defined as the fee required by auditors to meet statutory responsibilities under the Local Audit and Accountability Act 2014 in accordance with the NAO Code.

	Planned fee 2017/18	Scale fee 2017/18	Final Fee 2016/17
	£	£	£
Total Fee - Code work	41,288	41,288	41,288
Other non-audit services not covered above (Housing benefits)	12,678	12,678	12,678
Total fees	53,966	53,966	53,966

All fees exclude VAT

The audit fee covers:

- ▶ Audit of the financial statements
- ▶ Value for money conclusion
- ▶ Whole of Government Accounts.

For Chiltern District Council our indicative fee is set at the scale fee level. This indicative fee is based on certain assumptions, including:

- ▶ The overall level of risk for the audit of the financial statements is not significantly different from the previous year;
- ▶ Officers meet the agreed timetable of deliverables;
- ▶ Our accounts opinion and value for money conclusion is unqualified;
- ▶ Appropriate quality documentation is provided by the Council;
- ▶ There is an effective control environment;
- ▶ Prompt responses are provided to our draft reports.

If any of the above assumptions prove to be unfounded, we will seek a variation to the agreed fee. This will be discussed with the Council in advance.

Fees for the auditor's consideration of correspondence from the public and formal objections will be charged in addition to the scale fee.

Regulatory update

In previous reports to the Audit and Standards Committee, we highlighted the issue of regulatory developments. The following table summarises progress on implementation:

Earlier deadline for production and audit of the financial statements from 2017/18	
Proposed effective date	Effective for annual periods beginning on or after 1 April 2017.
Details	The Accounts and Audit Regulations 2015 introduced a significant change in statutory deadlines from the 2017/18 financial year. From that year the timetable for the preparation and approval of accounts will be brought forward with draft accounts needing to be prepared by 31 May and the publication of the audited accounts by 31 July.
Impact on Chiltern District Council	<p>These changes provide challenges for both the preparers and the auditors of the financial statements.</p> <p>We are holding faster close workshops for clients in December 2017 and January 2018 to facilitate early discussion and sharing of ideas and good practice.</p> <p>We are working with the Council on ideas arising from the workshop, for example:</p> <ul style="list-style-type: none"> • Streamlining the Statement of Accounts, removing all non-material disclosure notes; • Bringing forward key externally provided information such as IAS 19 pension information, asset valuations; • Providing training to departmental finance staff regarding the requirements and implications of earlier closedown; • Rescheduling substantive testing to earlier phases of the audit to reduce year-end pressure; • Establishing and agreeing working materiality amounts with the Council



Appendix C

Required communications with the Audit and Standards Committee

We have detailed the communications that we must provide to the Audit and Standards Committee.





Our Reporting to you

Required communications	 What is reported?	 When and where
Terms of engagement	Confirmation by the Audit and Standards Committee of acceptance of terms of engagement as written in the engagement letter signed by both parties.	The statement of responsibilities serves as the formal terms of engagement between the PSAA's appointed auditors and audited bodies.
Our responsibilities	Reminder of our responsibilities as set out in the engagement letter	The statement of responsibilities serves as the formal terms of engagement between the PSAA's appointed auditors and audited bodies.
Planning and audit approach	Communication of the planned scope and timing of the audit, any limitations and the significant risks identified. When communicating key audit matters this includes the most significant risks of material misstatement (whether or not due to fraud) including those that have the greatest effect on the overall audit strategy, the allocation of resources in the audit and directing the efforts of the engagement team	Audit planning report
Significant findings from the audit	<ul style="list-style-type: none"> • Our view about the significant qualitative aspects of accounting practices including accounting policies, accounting estimates and financial statement disclosures • Significant difficulties, if any, encountered during the audit • Significant matters, if any, arising from the audit that were discussed with management • Written representations that we are seeking • Expected modifications to the audit report • Other matters if any, significant to the oversight of the financial reporting process 	Audit results report

Appendix C

Required communications with the Audit and Standards Committee (continued)

Our Reporting to you

Required communications	 What is reported?	 When and where
Going concern	<p>Events or conditions identified that may cast significant doubt on the Council's ability to continue as a going concern, including:</p> <ul style="list-style-type: none"> • Whether the events or conditions constitute a material uncertainty • Whether the use of the going concern assumption is appropriate in the preparation and presentation of the financial statements • The adequacy of related disclosures in the financial statements 	Audit results report
Misstatements	<ul style="list-style-type: none"> • Uncorrected misstatements and their effect on our audit opinion, unless prohibited by law or regulation • The effect of uncorrected misstatements related to prior periods • A request that any uncorrected misstatement be corrected • Corrected misstatements that are significant • Material misstatements corrected by management 	Audit results report
Fraud	<ul style="list-style-type: none"> • Ask the Audit and Standards Committee to determine whether they have knowledge of any actual, suspected or alleged fraud affecting the Council • Any fraud that we have identified or information we have obtained that indicates that a fraud may exist • A discussion of any other matters related to fraud 	Audit results report
Related parties	<ul style="list-style-type: none"> • Significant matters arising during the audit in connection with the Council's related parties including, when applicable: • Non-disclosure by management • Inappropriate authorisation and approval of transactions • Disagreement over disclosures • Non-compliance with laws and regulations 	Audit results report

Appendix C

Required communications with the Audit and Standards Committee (continued)

		Our Reporting to you
Required communications	What is reported?	When and where
Independence	<p>Communication of all significant facts and matters that bear on the objectivity and independence of EY and all audit team members</p> <p>Communicating key elements of the audit engagement partner's consideration of independence and objectivity such as:</p> <ul style="list-style-type: none"> • Any principal threats • Safeguards adopted and their effectiveness • An overall assessment of threats and safeguards • Information about the general policies and process within the firm to maintain objectivity and independence 	Audit Planning Report and Audit Results Report
External confirmations	<ul style="list-style-type: none"> • Management's refusal for us to request confirmations • Inability to obtain relevant and reliable audit evidence from other procedures 	Audit results report
Consideration of laws and regulations	<ul style="list-style-type: none"> • Audit findings regarding non-compliance where the non-compliance is material and believed to be intentional. This communication is subject to compliance with legislation on tipping off • Enquiry of the Audit and Standards Committee into possible instances of non-compliance with laws and regulations that may have a material effect on the financial statements and that the Audit and Standards Committee may be aware of 	Audit results report
Internal controls	<ul style="list-style-type: none"> • Significant deficiencies in internal controls identified during the audit 	Audit results report
Representations	Written representations we request from management and/or those charged with governance	Audit results report
Material inconsistencies and misstatements	Material inconsistencies or misstatements of fact identified in other information which management has refused to revise	Audit results report
Auditors report	<ul style="list-style-type: none"> • Key audit matters included in our auditor's report • Any circumstances identified that affect the form and content of our auditor's report 	Audit results report
Fee Reporting	<ul style="list-style-type: none"> • Breakdown of fee information when the audit plan is agreed • Breakdown of fee information at the completion of the audit • Any non-audit work 	Audit planning report and Audit results report
Certification work	Summary of certification work undertaken	Certification report

Additional audit information

Other required procedures during the course of the audit

As well as the key areas of audit focus outlined in section 2, we must perform other procedures as required by auditing, ethical and independence standards and other regulations. We outline these below.

Our responsibilities as required by auditing standards

- Identifying and assessing the risks of material misstatement of the financial statements (either from fraud or error), design and perform audit procedures considering those risks, and obtain enough appropriate audit evidence to provide a basis for our opinion.
- Obtaining an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Council's internal control.
- Evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Concluding on the appropriateness of management's use of the going concern basis of accounting.
- Evaluating the overall presentation, structure and content of the financial statements (including the disclosures), and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtaining enough appropriate audit evidence on the financial information of the services provided by the Council to express an opinion on the financial statements.
- Reading other information in the financial statements, reviewing how the Audit and Standards Committee reporting appropriately addresses matters that we have brought to the Committee's attention, and reporting whether it is materially inconsistent with our understanding and the financial statements; and
- Maintaining auditor independence.

Purpose and evaluation of materiality

For the purposes of determining whether the accounts are free from material error, we define materiality as the magnitude of an omission or misstatement that, individually or in the aggregate, in light of the surrounding circumstances, could reasonably be expected to influence the economic decisions of the users of the financial statements. Our evaluation of it requires professional judgement and necessarily takes into account qualitative as well as quantitative considerations implicit in the definition. We would be happy to discuss with you your expectations regarding our detection of misstatements in the financial statements.

Materiality determines the level of work performed on individual account balances and financial statement disclosures.

The amount we consider material at the end of the audit may differ from our initial determination. At this stage, however, we cannot anticipate all the circumstances that may influence our judgement about materiality. At the end of the audit we will form our final opinion by considering all matters that could be significant to users of the accounts, including the total effect of the audit misstatements we identify, and our evaluation of materiality at that date.

CDC AUDIT COMMITTEE WORK PROGRAMME

Classification: OFFICIAL

Members are asked to consider whether there are any items they wish to add to, remove from, or move within, the proposed work programme.

Topic	Frequency	Jan 18	Mar 18	Jul 18	Sep 18	Jan 19
Risk Management						
Risk Management Update	Annual					
Assurance Statements						
Annual Governance Report	Annual					
Update on Governance / Internal Control Issues	As and when					
Internal Audit						
Audit Plan	Annual					
Interim Progress Reports	Each meeting					
Follow up of Internal Audit Recommendations Report	Annual					
Comparision of Assurance Levels	Annual					
Annual Internal Audit Report	Annual					
Fraud & Corruption						
Fraud & Corruption Update (maybe verbal report)	Annual					
Fraud & Corruption Annual Report	Annual					
External Audit						
Annual Audit Plan	Annual					
Annual Assurance Letter from Committee	Annual					
External Audit Results Report	Annual					
Certification of Claims & Returns Annual Report	Annual					
Annual Audit Letter (Sent out by email to all Members)	-					
Statement of Accounts						
Approval of Accounts	Annual					
Other						
Contract & Financial Procedure Rules	As necessary					
Training	As necessary					
Work Programme	Each meeting					

Classification: OFFICIAL

SUBJECT:	Annual Review of the Code of Conduct and Complaints Procedure
REPORT OF:	Monitoring Officer
RESPONSIBLE OFFICER	Joanna Swift
REPORT AUTHOR	Joanna Swift jswift@chiltern.gov.uk Tel : 01494 732761
WARD/S AFFECTED	None

1. Purpose of Report

To consider if the code of conduct and complaints procedures adopted by the Council in accordance with the Localism Act in 2011, remain fit for purpose.

RECOMMENDATIONS

- 1. That the code of conduct be amended to clarify that a member who declares a personal interest is still entitled to speak and vote on the item of business.**
- 2. That arrangements for dealing with complaints be revised as set out in Appendix 3.**
- 3. That the revised assessment criteria at Appendix 3, Annex 3 be agreed**
- 4. That the proposed procedure for Hearing Committees at Appendix 3, Annexes 5 and 6 be agreed**

2. Reasons for Recommendations

It is good practise for the Council to review its adopted policies and procedures on a regular basis to ensure they remain relevant and effective. This annual review has been brought forward following comments made by the Local Government Ombudsman in a recent decision.

3. Content of Report

- 3.1 As members are aware the Council has a statutory duty under the Localism Act 2011 to promote and maintain high standards of conduct amongst its elected and co-opted members, to adopt a code governing member conduct and to have arrangements in place for dealing with any complaints that members may have breached the code of conduct. Any complaints that town or parish councillors have breached their council's code of conduct are covered by the District Council's arrangements.
- 3.2 Under the Act and accompanying statutory regulations members must disclose any pecuniary interests (DPI's) held by themselves or their spouse/partners in items of Council business. Failure to disclose a DPI is a criminal offence.

THE CODE OF CONDUCT

- 3.3 The Act gives the Council discretion over the contents of their code of conduct provided that it accords with the following 7 principles of conduct in public life:-
- selflessness
 - integrity
 - objectivity
 - accountability
 - openness
 - honesty
 - leadership
- 3.4 The Council's current code of conduct was adopted on 15 August 2012 and is attached at Appendix 1 for reference. It is based on a lighter-touch set of general obligations than the previous national model code but retains the requirement for members to disclose non-pecuniary personal and prejudicial interests, in addition to the new statutory DPI's. This was considered vital in view of the Council's regulatory role in determining planning and licencing applications. South Bucks District Council has adopted the same form of code. It is considered that the obligations in the code of conduct are generally understood by Members and that declarations of interest are being made appropriately. However, following 2 recent complaints about the declaration of personal interests under paragraph 6 of the code the monitoring officer is recommending that an additional sentence is added to this paragraph to make it clear that members who declare a personal remain entitled to speak and vote on the item of business concerned. The additional wording proposed is shown highlighted in red at paragraph 6 of the code at Appendix 1.

THE COMPLAINTS PROCEDURE

- 3.5 The Act also gives the Council discretion on the arrangements it adopts for dealing with complaints. These arrangements must however include the appointment of at least one independent person whose views are to be sought and taken into account, before the Council makes a decision on an allegation that it has decided to investigate. The independent person's view may also be sought by the authority at other stages in the investigation and by subject members.
- 3.8 The Council's current Complaints Procedure was adopted in 2012 and is combined with a complaint form. This adopts a 3 stage process:-
1. The complaint is sent to the subject councillor member who has an opportunity respond. If the complainant is satisfied with the councillor's explanation or proposed remedy, no further action is taken. If the complainant remains dissatisfied the complaint proceeds to Stage 2.
 2. The monitoring officer assesses whether the complaint should be referred for investigation having regard to the referral criteria, in consultation with the chairman of this Committee and an independent person. If a complaints merits investigation it

will proceed to Stage 3. If the monitoring officer decides not to refer the complaint for investigation no further action is taken and no appeal is available.

3. An investigation is carried out and the investigators report is referred to a Hearing Sub-Committee or, in certain cases, this Committee for consideration. The Independent Person's view must be taken into account when deciding what action to take.

A copy of the current procedure is attached at Appendix 2 for ease of reference

3.10 The monitoring officer has reviewed the current complaints procedure in the light of best practise elsewhere and is recommending the following revisions as set out in the draft document at Appendix 3:-

- a. Separating out details of the arrangements adopted from the complaints form. A model complaints form including tick box options is appended at Annex 1 rather than being incorporated into the explanation of the procedure. The model form will be available to download from the Council's website and the monitoring officer will also look into making it available to complete on-line.
- b. The proposed revisions retain the current 3 stage process but also include more detail about how a complaint will be investigated at Stage 3, including the appointment of an investigating officer and the investigation procedure itself. They also explain the procedure that will normally be adopted at meetings of the Hearing Sub-Committee. Whilst the proposed revisions increase the length of the document, the benefit is that all the relevant information for the complainant and subject member are contained in one reference document.
- c. The revised procedure also strengthens the provisions for seeking local resolution of complaints following an investigation. Paragraph 7.1 makes clear, for example, that if an apology is considered an appropriate resolution and the subject member gives such an apology, that no further action would be necessary.

3.11 Members will recall considering a draft Protocol with Thames Valley Police for dealing with DPI complaints at their last meeting and a formal response is still awaited from the Economic Crime Unit. The protocol as finally agreed will also be annexed to the proposed arrangements.

4. Consultation

Not applicable at this stage

5. Options

The Committee has the option of proposing other changes to the code of conduct and complaints procedures which could be the subject of wider consultation with members before formal consideration by Full Council and/or alternative revisions to the complaints procedure.

6. Corporate Implications

Financial - None
Legal – As set out in the report
Risks issues – None
Equalities - None

7. Links to Council Policy Objectives

Whilst there is no direct link to the Council's main objectives the Council has a statutory obligation to adopt a code of conduct and complaints procedure. The effective monitoring of complaints is matter of good governance and is important in preserving the confidence of local communities

8. Next Steps

If agreed by the Committee the proposed revisions to the Code of Conduct at Appendix 1 and to the complaints procedure at Appendix 3 would be recommended to Full Council for adoption.

Background Papers:	None except those referred to in the report
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**CHILTERN DISTRICT COUNCIL
CODE OF CONDUCT FOR MEMBERS
ADOPTED ON 15 AUGUST 2012**

Part 1 – General Provisions

Introduction

1. (1) The Council has adopted this Code of Conduct pursuant to section 27 of the Localism Act 2011 (the Act) to promote and maintain high standards of behaviour by its members and co-opted members whenever they conduct the business of the Council including the office to which they were elected or appointed or when they claim to act or give the impression of acting as a representative of the Council
- (2) This Code of Conduct complies with Section 28 the Act and is consistent with the principles of selflessness, integrity, objectivity, accountability, openness, honesty and leadership.

Scope

2. (1) This Code of Conduct applies to you whenever you are acting in your capacity as a member of Chiltern District Council, including:
 - (a) at formal meetings of the Council, its Committees and Sub-Committees, its Cabinet and PAG's
 - (b) when acting as a representative of the authority
 - (c) in taking any decision as a Cabinet member or a Ward Councillor
 - (d) in discharging your functions as a ward Councillor
 - (e) at briefing meetings with officers
 - (f) at site visits and
 - (g) when corresponding with the authority other than in a private capacity
- (2) Where you act as a representative of the Council:
 - (a) on another authority, you must when acting for that authority, comply with that other authority's code of conduct; or
 - (b) on any other body, you must, when acting for that other body, comply with this Code of Conduct, except and insofar as it conflicts with any other lawful obligations to which that other body may be subject

General obligations

3. You must:
 - (1) provide leadership to the council and communities within its area, by personal example and

- (2) respect others and not bully any person
- (3) recognise that officers (other than political assistants) are employed by and serve the whole council
- (4) respect the confidentiality of information which you receive as a member:
 - i. not disclosing confidential information to third parties unless required by law to do so or where there is a clear and over-riding public interest in doing so; and
 - ii. not obstructing third parties' legal rights of access to information
- (5) not misconduct yourself in a manner which is likely to bring the council into disrepute
- (6) use your position as a member in the public interest and not for personal advantage
- (7) act in accordance with the council's reasonable rules on the use of the resources of the council for private or political purposes
- (8) exercise your own independent judgement, taking decisions for good and substantial reasons:
 - i. attaching appropriate weight to all relevant considerations including, where appropriate, public opinion and the views of political groups
 - ii. paying due regard to the advice of officers, and in particular to the advice of the statutory officers, namely the Head of Paid Service, the Chief Finance Officer and the Monitoring Officer and
 - iii. stating the reasons for your decisions where those reasons are not otherwise apparent
- (9) account for your actions, particularly by supporting the council's scrutiny function
- (10) ensure that the council acts within the law.

Part 2 – Interests**Personal interests**

4. In addition to the statutory requirements under the Act in relation to DPI's and as set out in Paragraph 10 below and save for the subject interest already having been declared as a DPI and the statutory provisions complied with, the following Paragraphs 5 to 9 shall also apply.
5. (1) You have a personal interest in any business of the council where either:
- (a) it relates to or is likely to affect:
 - (i) any body of which you are a member or in a position of general control or management and to which you are appointed or nominated by the council;
 - (ii) any body:
 - (aa) exercising functions of a public nature;
 - (bb) directed to charitable purposes; or
 - (cc) one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union),
 of which you are a member or in a position of general control or management;
 - (iii) any person or body who employs or has appointed you;
 - (iv) the interests of any person from whom you have received a gift or hospitality with an estimated value of at least £50;
 - (b) a decision in relation to that business might reasonably be regarded as affecting your well-being or financial position or the well-being or financial position of a relevant person to a greater extent than the majority of other council tax payers, ratepayers or inhabitants of the ward affected by the decision;
- (2) In sub-paragraph (1)(b), a relevant person is:
- (a) a member of your family or any person with whom you have a close association; or
 - (b) any person or body who employs or has appointed such persons, any firm in which they are a partner, or any company of which they are directors;
 - (c) any person or body in whom such persons have a beneficial interest in a class of securities exceeding the nominal value of £25,000; or
 - (d) any body of a type described in sub-paragraph (1) (a) (i) or (ii).

Disclosure of personal interests

6. (1) Subject to sub-paragraphs (2) to (5), where you have a personal interest in any business of the council and you attend a meeting of the council at which the business is considered, you must disclose to that meeting the existence and nature of that interest at the commencement of that consideration, or when the interest becomes apparent.

- (2) Where you have a personal interest in any business of the council which solely relates to a body of which you are a member or in a position of general control or management and to which you are appointed or nominated by the council, you need only disclose to the meeting the existence and nature of that interest if that interest is prejudicial.
- (3) Where you have a personal interest in any business of the council of the type mentioned in paragraph 5(1) (a) (iv), you need not disclose the nature or existence of that interest to the meeting if the interest was registered more than three years before the date of the meeting.
- (4) Sub-paragraph (1) only applies where you are aware or ought reasonably to be aware of the existence of the personal interest.
- (5) Subject to paragraph 9(1) (b), where you have a personal interest in any business of the council and you have made an executive decision in relation to that business, you must ensure that any written statement of that decision records the existence and nature of that interest.
- (6) **Having declared a personal interest member may continue to speak and vote on the item of business concerned.**

Prejudicial interest generally

7. (1) Subject to sub-paragraph (2), where you have a personal interest in any business of the council you also have a prejudicial interest in that business where the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice your judgement of the public interest.
- (2) You do not have a prejudicial interest in any business of the council where that business:
 - (a) does not affect your financial position or the financial position of a person or body described in paragraph 5;
 - (b) does not relate to the determining of any approval, consent, licence, permission or registration in relation to you or any person or body described in paragraph 5; or
 - (c) relates to the functions of the council in respect of:
 - (i) an allowance, payment or indemnity given to members;
 - (ii) any ceremonial honour given to members; and
 - (iii) setting council tax or a precept under the Local Government Finance Act 1992.

Prejudicial interests arising in relation to overview and scrutiny committees

8. You also have a prejudicial interest in any business before an overview and scrutiny committee of the council (or of a sub-committee of such a committee) where:

- (a) that business relates to a decision made (whether implemented or not) or action taken by the cabinet, PAG's or another of the council's committees, sub-committees, joint committees or joint sub-committees; and
- (b) at the time the decision was made or action was taken, you were a member of the cabinet, PAG's, committee, sub-committee, joint committee or joint sub-committee mentioned in paragraph (a) and you were present when that decision was made or action was taken.

Effect of prejudicial interests on participation

- 9. (1) Subject to sub-paragraph (2), where you have a prejudicial interest in any business of your council:
 - (a) you must declare the existence and nature of your interest and withdraw from the room or chamber where a meeting considering the business is being held:
 - (i) in a case where sub-paragraph (2) applies, immediately after making representations, answering questions or giving evidence;
 - (ii) in any other case, whenever it becomes apparent that the business is being considered at that meeting;unless you have obtained a dispensation from your council's monitoring officer;
 - (b) you must not exercise executive functions in relation to that business; and
 - (c) you must not seek improperly to influence a decision about that business.
- (2) Where you have a prejudicial interest in any business of the council you may attend a meeting (including a meeting of the overview and scrutiny committee of the council or of a sub-committee of such a committee) but only for the purpose of making representations, answering questions or giving evidence relating to the business, provided that the public are also allowed to attend the meeting for the same purpose, whether under a statutory right or otherwise.

10. Disclosable Pecuniary Interest

A Disclosable Pecuniary Interest (DPI) is as defined in 'The Relevant Authorities (Disclosable Pecuniary Interests) Regulations 2012' (The Regulations) and the categories of interest are set out in Appendix A.

Note: In addition to the statutory requirements under the Act, Council Procedure Rules require you to withdraw from the room or chamber where the meeting is being held if you have a DPI in an item of business being considered at that meeting unless a Dispensation has been granted pursuant to and in accordance with Section 33 of the Act.

Part 3 - Registration of Members' Interests**Registration or Disclosure of members' interests**

11. (1) Subject to paragraph 12, you must, within 28 days of:
- (a) in relation to a DPI, the Regulations coming into effect namely 1.7.12
 - (b) in relation to Personal Interests, this Code being adopted by or applied to the council; or
 - (c) otherwise your election or appointment to office (where that is later),
- register in the council's register of members' interests, maintained under Section 29 of the Act, details of any DPI which you or your spouse or civil partner (or person with whom you are living as spouse or civil partner) may have, together with your personal interests where they fall within a category mentioned in paragraph 5(1) (a), by providing written notification to the council's monitoring officer.
- (2) Failure to register or disclose any DPI in accordance with section 30(1) or 31(2), (3) or (7) of the Act, or participating in any discussion or vote in contravention of section 31(4) of the Act, or taking any steps in contravention of section 31(8) of the Act, is a criminal offence and risks a fine not exceeding level 5 on the standard scale (currently £5,000) or disqualification as a member for a period not exceeding 5 years.
- (3) Subject to paragraph 12, you must, within 28 days of becoming aware of any new DPI and/or personal interest or change to any DPI and/or personal interest registered under paragraph (1), register details of that new DPI and/or personal interest or change by providing written notification to the council's monitoring officer.
- (4) Subject to Paragraph 12, you are required to disclose the existence and nature of any DPI when it arises at a meeting even where already registered in the Register or pending registration so the minutes can be duly noted.

Sensitive interest

12. (1) Where you consider that you have a sensitive interest (whether or not a DPI), and the council's monitoring officer agrees, if the interest is entered in the Council's register, copies of the register that are made available for inspection and any published version of the register, must not include details of the interest (but may state that the member has an interest the details of which are withheld under section 32 (2) of the Act) and any public declaration required need only state the fact an interest arises without further detail.
- (2) You must, within 28 days of becoming aware of any change of circumstances which means that information excluded under paragraph (1) is no longer a sensitive interest, notify the Council's monitoring officer asking that the interest be included in the Council's register of members' interests.

- (3) In this Code, "sensitive interest" means an interest, the nature of which is such that you and the Council's monitoring officer consider that disclosure of the details of the interest could lead to you, or a person connected with you, being subject to violence or intimidation.

Dispensations

13. On a written request made to the Council's Monitoring Officer, the Council may grant a dispensation for you to participate in a discussion and vote on a matter at a meeting even if you have a DPI or a prejudicial interest and that you be relieved of the obligation to otherwise withdraw from the room in which the matter is being considered if the Council considers that the number of members otherwise prohibited from taking part in the meeting would be so great a proportion of the body transacting the business that it would impede the transaction of the business; or the representation of different political groups on the body transacting any particular business would be so upset as to alter the likely outcome of any vote on the business; or it is in the interests of the inhabitants in the Council's area to allow you to take part or that without the dispensation the Councils Executive would be prohibited from participating in the matter or it is otherwise appropriate to grant a dispensation.

Disclosable Pecuniary Interests

The duties to register, disclose and not to participate in respect of any matter in which a member has a DPI are set out in Chapter 7 of the Act.

DPI's are defined in the Regulations 2012 as follows:

Interest	Prescribed description
Employment, office, trade, profession or vocation	Any employment, office, trade, profession or vocation carried on for profit or gain.
Sponsorship	<p>Any payment or provision of any other financial benefit (other than from the relevant authority) made or provided within the relevant period in respect of any expenses incurred by M in carrying out duties as a member, or towards the election expenses of M.</p> <p>This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992).</p>
Contracts	<p>Any contract which is made between the relevant person (or a body in which the relevant person has a beneficial interest) and the relevant authority:</p> <p>(a) under which goods or services are to be provided or works are to be executed; and</p> <p>(b) which has not been fully discharged.</p>
Land	Any beneficial interest in land which is within the area of the relevant authority.
Licences	Any licence (alone or jointly with others) to occupy land in the area of the relevant authority for a month or longer.
Corporate tenancies	<p>Any tenancy where (to M's knowledge):</p> <p>(a) the landlord is the relevant authority; and</p> <p>(b) the tenant is a body in which the relevant person has a beneficial interest.</p>
Securities	<p>Any beneficial interest in securities of a body where:</p> <p>(a) that body (to M's knowledge) has a place of business or land in the area of the relevant authority; and</p> <p>(b) either:</p> <p>(i) the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share</p>

	<p>capital of that body; or</p> <p>(ii) if the share capital of that body is more than one class, the total nominal value of the shares of any one class in which the relevant person has a beneficial interest exceeds one hundredth of the total issued share capital of that class.</p>
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For this purpose:

“body in which the relevant person has a beneficial interest” means a firm in which the relevant person is a partner or a body corporate of which the relevant person is a director, or in the securities of which the relevant person has a beneficial interest;

“director” includes a member of the committee of management of an industrial and provident society;

“land” excludes an easement, servitude, interest or right in or over land which does not carry with it a right for the relevant person (alone or jointly with another) to occupy the land or to receive income;

“M” means a member of a relevant authority; “member” includes a co-opted member;
“relevant authority” means the authority of which M is a member;

“relevant period” means the period of 12 months ending with the day on which M gives a notification for the purposes of section 30(1) or 31(7), as the case may be, of the Act;

“relevant person” means M or any other person referred to in section 30(3)(b) of the Act;

“securities” means shares, debentures, debenture stock, loan stock, bonds, units of a collective investment scheme within the meaning of the Financial Services and Markets Act 2000 and other securities of any description, other than money deposited with a building society.



Complaint procedure and form concerning Member conduct

Use this form if you have a complaint about:

- **A member(s) that has, or may have, breached the Code of Conduct of the District or one of the Towns/Parishes in the Chiltern District.** A copy of Chiltern District Council's Code of Conduct can be accessed from the A – Z section at: www.chiltern.gov.uk. The Codes of Conduct for Town/Parish Councils can be obtained by contacting the Clerk to the relevant council.
- **Conduct that occurred while the member(s) in question was in office.** (Conduct of an individual before they were elected, co-opted or appointed, or after they have resigned or otherwise ceased to be a member, cannot be considered).
- **One or more named members of the following authorities:**

- | | |
|--|---|
| <input checked="" type="checkbox"/> Chiltern District Council | <input checked="" type="checkbox"/> Cholesbury-Cum St Leonards Parish Council |
| <input checked="" type="checkbox"/> Amersham Town Council | <input checked="" type="checkbox"/> Coleshill Parish Council |
| <input checked="" type="checkbox"/> Ashley Green Parish Council | <input checked="" type="checkbox"/> Great Missenden Parish Council |
| <input checked="" type="checkbox"/> Chalfont St Giles Parish Council | <input checked="" type="checkbox"/> Latimer and Leyhill Parish Council |
| <input checked="" type="checkbox"/> Chalfont St Peter Parish Council | <input checked="" type="checkbox"/> Little Chalfont Parish Council |
| <input checked="" type="checkbox"/> Chartridge Parish Council | <input checked="" type="checkbox"/> Little Missenden Parish Council |
| <input checked="" type="checkbox"/> Chenies Parish Council | <input checked="" type="checkbox"/> Penn Parish Council |
| <input checked="" type="checkbox"/> Chesham Bois Parish Council | <input checked="" type="checkbox"/> Seer Green Parish Council |
| <input checked="" type="checkbox"/> Chesham Town Council | <input checked="" type="checkbox"/> The Lee Parish Council |

DO NOT use this form if you wish to complain about:

- Dissatisfaction with a decision or action of the authority or one of its committees,
- A service provided by the authority
- The authority's procedures
- The actions of people employed by the authority

These do not fall within the jurisdiction of the Code of Conduct.

Additional help and information:

- Your complaint must be in writing – **(signed and dated please)**. This includes fax and electronic submissions. However, in line with the requirements of the Disability Discrimination Act 2000, we can make reasonable adjustments to assist you if you have a disability that prevents you from making your complaint in writing. Contact the Council's Monitoring Officer or Deputy Monitoring Officer for assistance.
- If English is not your first language we can also help.
- If your complaint is clearly **not** about member conduct then the Monitoring Officer will not consider your complaint – but where possible will refer you to the relevant procedure available.
- If you need any support in completing this form, please let us know as soon as possible.
- Your complaint will be considered in 3 stages as set out below. At each stage we will keep you informed. Not every complaint that falls under the Code will be referred for investigation. A decision will be made using the referral criteria below.

What happens next?

When you submit your complaint we will write to you to let you know we have received it. Your complaint will then be considered in 3 stages – the aim being to reach a satisfactory resolution.

Under Stages One and Two only the details contained on your complaint form will be considered therefore it is very important that you set your complaint out clearly and provide at the outset all the information you wish to be considered.

Stage One

We will tell the Member that you are complaining about that we have received a complaint and provide them with a copy – unless you have completed section 5 requesting confidentiality (in which case your details will not be disclosed unless and until your request for confidentiality has been considered – see further below).

The Member will be invited to respond within 20 working days – including in their response any suggestion to resolve the complaint.

This response will be made available to you and you will be asked if you are satisfied – if yes, no further action will be taken or the action proposed by the Member will proceed - or you will be asked if you wish your complaint to be considered further under Stage Two.

Stage Two

Your complaint will then be considered by the Councils Monitoring Officer and the Chairman/Vice-Chairman of the Councils Audit and Standards Committee – in consultation with a duly appointed 'Independent Person'* whose views will be taken into account - who will decide whether your complaint should be referred for investigation. This will happen within an average of 20 working days of the date of the commencement of Stage Two.

Whilst each allegation will be considered on its individual merits, the following "Referral Criteria" will be used to decide whether to accept a complaint for investigation or take no further action.

Referral Criteria

- the public benefit in investigating the alleged complaint
- the availability and cost of resources with regard to the seriousness of the alleged matter
- is the information submitted, sufficient to make a decision as to whether to refer for investigation
- is the subject member still a serving member
- is the complaint the same as or similar to a previous complaint
- the time passed since the alleged conduct occurred
- the complaint involves conduct too trivial to warrant further action
- does the complaint appear to be malicious, politically motivated or tit for tat
- whether the matter complained of is an individual act or part of a continuous pattern of behaviour which should be cumulatively considered
- steps taken or proposed to remedy the action complained of
- the complainants view of the action taken or proposed.

When a decision has been made, you will be notified in writing whether your complaint has been referred for investigation or not. At the same time we write to you, we will also write to the member(s) you have complained about and the parish or town clerk (if applicable). We will send these letters within five working days of the decision being reached. The decision is made available for public inspection once the member the complaint is about has been given a copy of the decision.

There is no right of appeal under this complaints procedure if the decision at Stage Two is not to investigate.

Stage Three

If the decision at Stage Two is to investigate the complaint, the monitoring officer will appoint an investigator whose report will be considered by the Hearings Sub-Committee of the Councils Audit and Standards Committee– or in some cases to the full Committee - in most cases you will be invited to attend.

The remedies available if a breach is found to have occurred are limited to the following –

- Report to Council
- Formal letter to subject Councillor
- Formal censure by motion
- Recommendation to Leader/Group Leader or Town/Parish Council as applicable, that the member is removed from Special Responsibilities – i.e. Cabinet/Committees/Outside Bodies.
- Press release or other publicity.

Please note the Council has no authority to withhold allowances or to suspend members.

Your completed form should be submitted to:



The Monitoring Officer
Chiltern District Council
King George V House
King George V Road
Amersham
Buckinghamshire HP6 5AW



Monitoring Officer – Joanna Swift

Tel: 01494 732761



Deputy Monitoring Officer – Sue Markham

Tel: 01494 732203



01494 – 729000



monitoringofficer@chiltern.gov.uk

* **An Independent Person** is someone who has been appointed by the Council under Section 28 of the Localism Act 2011. Independent Persons must be appointed through a process of public advertisement, application and appointment by a positive vote of a majority of all members of the District Council – i.e. by full Council.

A Person is considered not to be 'independent' if :-

- they are or have been in the previous 5 years an elected or co-opted member or officer of the District Council or any Parish in the area an elected or co-opted member of any committee or sub-committee of the District Council or any Parish in the area or
- they are a relative or close friend of a current elected or co-opted member or officer of the District Council or any Parish in the area – or any elected or co-opted members of any committee or sub-committee of such a Council.

Except that previous co-opted independent members of Standards Committees can be independent persons if they are appointed on or before 24July 2012

COMPLAINT FORM**1. Please provide us with your name and contact details:**

Title:	
First name:	
Last name:	
Address:	
Daytime telephone:	
Evening telephone:	
Mobile telephone:	
Email address:	
Signed:	
Dated:	

2. Please tick the box which best describes you:

<input type="checkbox"/>	A member of the public
<input type="checkbox"/>	An elected or co-opted member of an authority
<input type="checkbox"/>	Member of Parliament
<input type="checkbox"/>	Local authority Monitoring Officer
<input type="checkbox"/>	Other council officer or authority employee
<input type="checkbox"/>	None of the above - please give details below:

3. Please provide the name(s) of the Member(s) that you believe have breached the Code of Conduct and the name of their authority.

Title	First name	Last name	Council or authority name

IMPORTANT INFORMATION

When completing your complaint form:

Your address and contact details will not usually be released unless necessary or to deal with your complaint.

We will tell the following people that you have made this complaint:

- the member(s) you are complaining about
- the monitoring officer of the authority
- the Independent Person/s
- the Chairman/ Vice-Chairman of the Councils Audit and Standards Committee who consider your complaint
- the parish or town clerk (if applicable)

We will give them:

- Your name
- A copy of your complaint

If you have serious concerns about your name or details of your complaint being released, please complete section 5 of this form.

Nature of your complaint

It is very important that you set your complaint out fully and clearly, and provide all the information at the outset. You should also provide any documents or other material that you wish to be considered. Although you are not required to prove your complaint at this stage of the proceedings, you do have to demonstrate that you have reasonable grounds for believing that the member(s) complained about has breached the Code of Conduct.

Please therefore explain in this section (or on separate sheets) what the member has done that you believe breaches the Code of Conduct. If you are complaining about more than one member you should clearly explain what each individual person has done that you believe breaches the Code of Conduct.

For example:

- You should be specific, wherever possible, about exactly what you are alleging the member said or did. For instance, instead of writing that the member insulted you, you should state what it was they actually said.
- You should provide the dates of the alleged incidents wherever possible. If you cannot provide exact dates it is important to give a general timeframe.
- You should confirm whether there are any witnesses to the alleged conduct and provide their names and contact details if possible.
- You should provide any relevant background information.

4. Please provide us with the details of your complaint. Continue on a separate sheet if there is not enough space on this form

5. Only complete this next section if you are requesting that your identity/full details of your complaint are kept confidential

In the interests of fairness and natural justice, we believe members who are complained about have a right to know who has made the complaint. We also believe they have a right to be provided with full details of that complaint.

We are unlikely to withhold your identity or the details of your complaint unless you have good reason to believe that to do so would be contrary to the public interest, would prejudice any subsequent investigation or you have reasonable grounds for believing you or any witness in the matter would be at risk.

The Member will still be informed that a complaint has been made - and unless to do would lead to the disclosure of your identity, will be informed the paragraphs of the Code alleged to have been breached - however your details and a full copy of the complaint will be withheld until your request has been considered.

The assessment of a request for confidentiality will be considered against the following criteria – but with the balance always being in favour of disclosure unless exceptional circumstances exist to determine otherwise:

1. The complainant has reasonable grounds for believing that they will be at risk of physical harm if their identity is disclosed.
2. The complainant is an officer who works closely with the subject member and they are afraid of the consequences to their employment or of losing their job if their identity is disclosed.
3. The complainant suffers from a serious health condition and there are medical risks associated with their identity being disclosed (medical evidence may be required to be submitted).
4. Any other very special circumstances put forward by the complainant which identify reasonable grounds for believing that disclosure of details would result in the complainant or witnesses being intimidated or lead to evidence being compromised or destroyed.

Please note that requests for confidentiality or requests for suppression of complaint details will not automatically be granted. The Monitoring Officer will consult with the Independent Person to consider your request alongside the substance of your complaint. If your request for confidentiality is not granted, please indicate if you wish the Council to continue to consider your complaint.

However, it is important to understand that in certain exceptional circumstances where the matter complained about is very serious, we can proceed with an investigation and disclose your name even if you have expressly asked us not to.

Please provide us with details of why you believe we should withhold your name and/or the details of your complaint:

NOTE – If you request confidentiality – you must answer the following question by deleting YES or NO.

Do you still wish to have your complaint

considered if your request for confidentiality

YES

NO

is denied in full or part?

THIS PAGE TO BE REMOVED - FOR STATISTICAL PURPOSES ONLY

Please could you provide some monitoring data? This data will not be disclosed to a third party. We will only use personal information internally for the purposes for which it has been provided.

<i>Please tick one box.</i>	Male	Female
Are you male or female?	<input type="checkbox"/>	<input type="checkbox"/>

Which of these age groups apply to you? Please tick one box.			
Up to 16	<input type="checkbox"/>	45 – 54	<input type="checkbox"/>
16 – 18	<input type="checkbox"/>	55 – 64	<input type="checkbox"/>
19 – 24	<input type="checkbox"/>	65 – 79	<input type="checkbox"/>
25 – 44	<input type="checkbox"/>	80 plus	<input type="checkbox"/>

<i>Please tick one box</i>	Yes	No
Do you have any long-standing illness, disability or infirmity? (Long standing means anything that has troubled you over a period of time or that is likely to affect you over a period of time).	<input type="checkbox"/>	<input type="checkbox"/>
Are you without a permanent home?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have access to your own method of transport?	<input type="checkbox"/>	<input type="checkbox"/>
Are you registered as unemployed?	<input type="checkbox"/>	<input type="checkbox"/>
Do you provide unpaid care for another person?	<input type="checkbox"/>	<input type="checkbox"/>

To which of these groups do you consider you belong? Please tick one box.			
WHITE		BLACK OR BLACK BRITISH	
British	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Irish	<input type="checkbox"/>	African	<input type="checkbox"/>
Other White background	<input type="checkbox"/>	Other Black background	<input type="checkbox"/>
Roma Gypsy or Traveller	<input type="checkbox"/>		
MIXED		ASIAN OR ASIAN BRITISH	
White and Black Caribbean	<input type="checkbox"/>	Indian	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Other mixed background	<input type="checkbox"/>	Other Asian background	<input type="checkbox"/>
CHINESE	<input type="checkbox"/>	OTHER ETHNIC GROUP	<input type="checkbox"/>

CHILTERN DISTRICT COUNCIL**Arrangements for dealing with standards allegations under the Localism Act 2011****1. Context**

These "Arrangements" set out how to make a complaint that an elected or co-opted Member of Chiltern District Council or a Parish or Town Council in the area has failed to comply with the Code of Conduct, and sets out how the Council will deal with allegations of a failure to comply with the Code of Conduct.

Under Sections 28(6) and (7) of the Localism Act 2011, the Council must have "arrangements" in place under which allegations that a Member or co-opted Member of the Council or of a Parish or Town Council in the area has failed to comply with the Code of Conduct can be investigated and decisions made on such allegations.

These arrangements must provide for the Council to appoint at least one Independent Person whose views must be sought before the Council takes a decision on an allegation which it has decided shall be investigated, and whose views can be sought by the Council at any other stage, or by a Member, or co-opted Member of a Parish or Town Council in the area, against whom an allegation has been made.

2. The Code of Conduct

The Council has adopted a Code of Conduct for its Members, which is attached at Appendix 2 and is available for inspection on the Council's website and on request by emailing the monitoring officer at: monitoringofficer@chiltern.gov.uk.

Each Town and Parish Council is also required to adopt a Code of Conduct and copies are available either on the Parish or Town Council's website or on request from the Clerk to the relevant Council.

3. Making a complaint

The monitoring officer is a senior officer of the Council who has statutory responsibility for maintaining the Register of Members' Interests and administers the procedure for dealing with complaints of Member misconduct.

To ensure the monitoring officer has all the information necessary to process your complaint, please complete the Model Complaint Form at Appendix 1, which can be downloaded from the Councils website at www.chiltern.gov.uk/contactus/commentscomplimentsandcomplaints and is also available on request from the Monitoring Officer by email to monitoringofficer@chiltern.gov.uk or by telephone to: 01494 732761.

Please provide your name and a contact address or email address your complaint can be acknowledged and we can keep you informed of its progress. If you want to keep your name and address confidential, please indicate this and the reason why, in the space provided on the Complaint Form. Please note that we will not deal with anonymous complaints.

Please send your completed Complaint Form and any relevant documents by email to:

monitoringofficer@chiltern.gov.uk or

By post to: Monitoring Officer
Chiltern District Council,
King George V House,
King George V Road,
Amersham HP6 5AW

4. What Happens Next

The monitoring officer will acknowledge receipt of your complaint within 5 working days. If your complaint is **not** about member conduct then the Monitoring Officer will not consider it but will, where possible, refer you to any relevant procedure available.

For example the following are not covered by this complaints procedure:

- Complaints about the conduct of councillors when acting in their personal capacity i.e. not acting as an elected or co-opted member of the Council
- Dissatisfaction with a decision or action of the Council or one of its committees
- Complaints about a service provided by the Council
- Complaints about the Council's procedures
- The actions of people employed by the Council

If a complaint alleges that Members may have committed a criminal offence by breaching the "disclosable pecuniary interest" provisions under Section 34 of the Localism Act 2011, it will be referred to Thames Valley Police for consideration, in accordance with the Protocol at Appendix 8.

Your complaint will be considered in three Stages with the aim of reaching a satisfactory resolution. Under Stages One and Two only the details contained in the Complaint Form will be considered. Therefore it is important that you set out your complaint clearly and provide all the information you wish to be considered at the outset.

As a matter of fairness and natural justice we believe members who are complained about have a right to know who has made the complaint and to be provided with full details of the complaint. We are unlikely to withhold your identity or the details of your complaint unless you have good reason to believe that to do so would be contrary to the public interest, would prejudice any subsequent investigation or you have reasonable grounds for believing you or any witness in the matter would be at risk.

The Member will still be informed that a complaint has been made - and unless to do so would lead to the disclosure of your identity, will be informed of the paragraphs of the Code which are alleged to have been breached. However, your details and a full copy of the complaint will be withheld until your request has been considered.

The assessment of a request for confidentiality will be considered against the following criteria – but with the balance always being in favour of disclosure unless exceptional circumstances exist to determine otherwise:

- 1) The complainant has reasonable grounds for believing that they will be at risk of physical harm if their identity is disclosed.
- 2) The complainant is an officer who works closely with the subject member and they are

afraid of the consequences to their employment or of losing their job if their identity is disclosed.

- 3) The complainant suffers from a serious health condition and there are medical risks associated with their identity being disclosed (medical evidence may be required to be submitted).
- 4) Any other very special circumstances put forward by the complainant which identify reasonable grounds for believing that disclosure of details would result in the complainant or witnesses being intimidated or lead to evidence being compromised or destroyed.

Please note that requests for confidentiality or requests for suppression of complaint details will not be automatically be granted. The monitoring officer will consult with the Independent Person to consider your request alongside the substance of your complaint. If your request for confidentiality is not granted, you will be asked whether you wish the Council to continue to consider your complaint.

5. Stage One

We will tell the Member that you are complaining about that we have received a complaint and provide them with a copy (unless your request for confidentiality has been agreed).

The Member will be invited to respond within 20 working days – including in their response any suggestion to resolve the complaint.

This response will be made available to you and you will be asked if you are satisfied – if yes, no further action will be taken or the action proposed by the Member will proceed – or you will be asked if you wish your complaint to be considered further under Stage Two.

6. Stage Two

Your complaint will then be assessed by the monitoring officer having regard to the Referral Criteria at Appendix 3 and who will decide, after consultation with the Chairman/Vice-Chairman of the Councils Audit & Standards Committee and the Independent Person (whose views will be taken into account), whether your complaint should be referred for investigation. This will happen within an average of 20 working days from the commencement of Stage Two.

When a decision has been made you will be notified in writing. The monitoring officer will also write to the member(s) you have complained about and the parish or town clerk (if applicable). These letters will be sent within five working days of a decision being reached. The decision is made available for public inspection once the member concerned has been given a copy of the decision.

The decision of the monitoring officer is final and there is no right of appeal.

In appropriate cases, the monitoring officer may seek to resolve the complaint informally, without the need for a formal investigation. Such informal resolution may involve the Member accepting that his/her conduct was unacceptable and offering an apology or the complaint maybe considered suitable for mediation or such other remedial action by the Council on the recommendation of the monitoring officer. Where the Member concerned makes a reasonable offer of informal resolution such as an apology or agrees for the complaint to be mediated but you

are not willing to accept that offer, the monitoring officer will take this into account in deciding whether the complaint merits formal investigation

7. Stage Three

If the decision at Stage Two is to investigate the complaint the monitoring officer will appoint an Investigating Officer, who may be another senior officer of the Council, an officer of another Council or an external investigator. The investigator's report will be considered by the Hearings Sub-Committee of the Council's Audit & Standards Committee. The Council has adopted a model procedure for the investigation of complaints, which is attached at Appendix 4 together with an explanatory flowchart. Details of the both the investigation procedure and the procedure if the matter proceeds to a hearing are explained further below.

8. How is the investigation conducted?

Ordinarily the Council would hope that investigations will take no more than 6 months to complete from the date the decision to investigate is taken. This will very much depend on the facts of each complaint and some investigations may be concluded earlier and others may take longer.

It is vital to the timely completion of investigations that you, as the complainant, and the subject Member under investigation, comply with the reasonable requirements of the Investigating Officer in terms of interview attendance and supplying relevant documents. If you, as the complainant, do not co-operate the Investigating Officer monitoring officer for direction as to whether the investigation should be terminated. Similarly if the subject Member does not comply, the Investigating Officer will proceed to determine the investigation in the absence of their contribution and may draw an adverse inference from their non-cooperation.

The Investigating Officer will normally carry out the investigation in accordance with the model procedure detailed at Appendix 4 although may decide to depart from this if the circumstances of the complaint warrant it.

As an initial step, and subject to any ruling on disclosure, the Investigating Officer may write to the subject Member at the beginning of the investigation to see if the subject Member still wishes to contest the complaint. Subject to this the investigation will normally follow the model procedure at Appendix 4.

At the end of the investigation, the Investigating Officer will produce a draft report and will send copies of the draft report, in confidence, to you and to the Member concerned to give you both an opportunity to identify any matter in that draft report which you disagree with or which you consider requires more consideration.

Having received and taken account of any comments which you may make on the draft report, the Investigating Officer will send his/her final report to the Monitoring Officer.

It should be noted that at any time during an investigation, the Investigating Officer may, following consultation with the Independent Person, refer the matter back to the monitoring officer for re-consideration as to whether the investigation should proceed if the Investigating Officer considers that the Re-consideration Criteria in Appendix 3 are satisfied.

9. What happens if the Investigating Officer concludes that there is no evidence of a failure to comply with the Code of Conduct?

The monitoring officer will review the Investigating Officer's report and consult with the Independent Person thereon. If having done so the monitoring officer is satisfied that the Investigating Officer's report is sufficient, the monitoring officer will write to you and to the Member concerned and to the Parish or Town Council on which the Member serves, notifying you that he is satisfied that no further action is required, and give you both a copy of the Investigating Officer's final report. If the monitoring officer is not satisfied that the investigation has been conducted properly, the Investigating Officer may be asked to re-consider his/her report.

10. What happens if the Investigating Officer concludes that there is evidence of a failure to comply with the Code of Conduct?

The Monitoring Officer will review the Investigating Officer's report and after consulting the Independent Person will consider whether Local Resolution should be attempted or the matter should proceed direct to hearing before the Hearings Sub-Committee.

- Local Resolution

The monitoring officer will consult with the Independent Person and with you as complainant and seek to resolve the complaint in a way that helps to ensure higher standards of conduct for the future. Such resolution may include the Member accepting that his/her conduct was unacceptable and offering an apology or the complaint being referred for mediation or such other remedial action as is considered appropriate in the circumstances. If the Member complies with the suggested resolution, the monitoring officer will report the matter to the Audit & Standards Committee and for complaint about Town/Parish councillors, the relevant Parish or Town Council, but will take no further action. However, if the Member concerned does not accept that the matter should be resolved in such a manner, the monitoring officer will refer the matter for a hearing before the Hearings Sub-Committee.

- Hearings Sub-Committee

If the monitoring officer considers that Local Resolution is not appropriate or the Member concerned does not accept that the matter should be resolved in such a manner, then the monitoring officer will submit the Investigating Officers report to the Hearings Sub-Committee which will conduct a Hearing before deciding whether the Member has failed to comply with the Code of Conduct and, if so, whether to take any action in respect of the failure.

In readiness for convening a meeting of the Hearings Sub-Committee, the monitoring officer will conduct a written "pre-hearing process", requiring the Member concerned to give their response to the Investigating Officer's report in order to identify what is likely to be agreed and what is likely to be in contention at the Hearing.

If, through the "pre-hearing process", the Member concerned accepts the Investigating Officer's report, they will be given the opportunity to provide a statement of mitigation which they may invite the Hearings Sub-Committee to consider in their absence. Alternatively, the Member may elect to attend a Hearings Sub-Committee to present their mitigation. In either case, the

“uncontested” hearing procedure will be followed as set out at Appendix 5.

Where, following the “pre-hearing process”, the Investigating Officer’s report remains in contention, the matter will be set down for a “contested” hearing before the Hearings Sub-Committee and the hearing procedure set out at Appendix 6 will be followed.

At the hearing, the Investigating Officer will present his/her report, call such witnesses as considered necessary and make representations to substantiate the conclusion that the Member has failed to comply with the Code of Conduct. For this purpose, the Investigating Officer may ask you, as the complainant, to attend and give evidence. Unless called to do so by the Investigating Officer, you do not have the right to address the Hearings Sub-Committee of your own volition.

The Member will then have an opportunity to give evidence, to call witnesses and to make representations about why they consider they did not fail to comply with the Code of Conduct. The Member may be represented legally or otherwise.

The Hearings Sub-Committee, with the benefit of any advice from the Independent Person, may conclude that the Member did not fail to comply with the Code of Conduct and so dismiss the complaint. If the Hearings Sub-Committee concludes that the Member did fail to comply with the Code of Conduct, the Chairman will inform the Member of this finding and the Hearings Sub-Committee will then consider what action, if any, should be taken. In doing this, the Hearings Sub-Committee will give the Member an opportunity to make representations to them and will consult the Independent Person before deciding what action, if any, to take in respect of the matter.

11. What action can the Hearings Sub-Committee take where a Member has failed to comply with the Code of Conduct?

The Council has delegated to the Hearings Sub-Committee such of its powers to take action in respect of individual Members as may be necessary to promote and maintain high standards of conduct. Accordingly, the Sub-Committee may -

- Write to the Member over their conduct;
- Publish its findings in the local media in respect of the Member’s conduct;
- Report its findings to the Council or to the Parish or Town Council concerned;
- Recommend to the Member’s Group Leader (or in the case of un-grouped Members, recommend to the Council or to Committees) that he/she be removed from any or all Committees or Sub-Committees of the Council;
- Recommend to the Leader of the Council that the Member be removed from the Cabinet or removed from particular Portfolio responsibilities;
- Instruct the monitoring officer to, or recommend to the Parish or Town Council concerned that it, arrange training for the Member;
- Recommend removal, or recommend to the Parish or Town Council concerned removal,

of the Member from all outside appointments to which he/she has been appointed or nominated by the Council or the Parish or Town Council;

- Withdraw, or recommend to the Parish or Town Council concerned that it withdraws, facilities provided to the Member by the Council, such as a computer, website and/or email and Internet access; or
- Recommend that any aspects of the complaint that are considered suitable be referred for mediation between the parties; or
- Exclude, or recommend to the Parish or Town Council concerned that it excludes, the Member from the Council's offices or other premises with the exception of meeting rooms as necessary for attending Council, Committee and Sub-Committee Meetings.

The Hearings Sub-Committee has no power to suspend or disqualify the Member or to withdraw a Member's basic allowance or any special responsibility allowances.

12. What happens at the end of the Hearing?

At the end of the hearing, the Chairman will announce the Sub-Committee's decision as to whether the Member has failed to comply with the Code of Conduct and as to any action which the Sub-Committee resolves to take.

As soon as reasonably practicable thereafter, the monitoring officer will prepare a formal decision notice in consultation with the Chairman of the Sub-Committee and send a copy to you, to the Member concerned and to any relevant Parish and Town Council, make such decision notice available for public inspection and report the decision to the next convenient meeting of the Audit & Standards Committee.

The decision of the Hearings Sub-Committee is final and is not subject to a right of appeal.

13. What is the Hearings Sub-Committee?

The Hearings Sub-Committee is made up of 3 elected Members of the Council's Audit & Standards Committee.

An Independent Person is invited to attend all meetings of the Hearings Sub-Committee and their views are sought and taken into consideration on whether a Member's conduct constitutes a failure to comply with the Code of Conduct and as to any action to be taken following a finding of failure to comply with the Code of Conduct.

14. Who is the Independent Person?

An Independent Person is someone who has been appointed by the Council under Section 28 of the Localism Act 2011.

Independent Persons must be appointed through a process of public advertisement, application and appointment by a positive vote of a majority of all members of the District Council – i.e. by full Council.

A Person is considered not to be 'independent' if they are, or have been in the previous 5 years:

- an elected or co-opted member or officer of the District Council or any Parish in the area
- an elected or co-opted member of any committee or sub-committee of the District Council or any Parish in the area

or they are a relative or close friend of a current elected or co-opted member or officer of the District Council or any Parish or Town Council the area – or any elected or co-opted members of any committee or sub-committee of such a Council.

15. Revision of these arrangements

The Audit & Standards Committee may amend these arrangements.

The Chairman of any Hearings Sub-Committee may, following consultation with the Independent Person, depart from the procedures detailed above where he/she considers it is expedient to do so in order to secure the effective and fair consideration of any matter.

If the monitoring officer considers that he/she may be conflicted in the discharge of these arrangements, he may delegate such matters to a Deputy monitoring officer to discharge.

16. Appeals

There is no right of appeal for you as complainant or for the Member against a decision of the monitoring officer or the Hearings Sub-Committee.

If you feel that the Council has failed to deal with your complaint in accordance with these arrangements, you may make a complaint to the Local Government Ombudsman.

Appendix 1	Model Complaint Form
Appendix 2	<i>Current Code of Conduct to be annexed</i>
Appendix 3	Assessment Criteria
Appendix 4	Procedure for Investigations
Appendix 5	Uncontested hearing procedure
Appendix 6	Contested hearing procedure
Appendix 7	<i>Final protocol to be annexed</i>

COMPLAINT FORM MEMBER(S) CONDUCT**Your details**

1. Please provide us with your name and contact details:

Title:	
First name:	
Last name:	
Address:	
Daytime telephone:	
Evening telephone:	
Mobile telephone:	
Email address:	

Your address and contact details will not usually be released unless necessary or to deal with your complaint.

However, we will tell the following people that you have made this complaint:

- the member(s) you are complaining about
- the monitoring officer of the authority
- the parish or town clerk (if applicable)
- the council's Independent Person (if required)
- members of the Hearings Sub- Committee convened to consider your complaint
- officers involved in mediation (if applicable)

We will tell them your name and give them a summary of your complaint. We will give them full details of your complaint where necessary or appropriate to be able to deal with it. If you have serious concerns about your name and a summary, or details of your complaint being released, please complete section 5 of this form.

2. Please tell us which complainant type best describes you:

- Member of the public
- An elected or co-opted member of an authority
- Member of Parliament
- Local authority monitoring officer
- Other council officer or authority employee
- Other

Making your complaint

Once your complaint has been received a decision will be taken in accordance with the council's published arrangements as to what action, if any, should be taken on it. (insert link to arrangements). You will not have the opportunity to attend a meeting at this stage. It is important that you provide all the information that you want taken into account as part of your complaint.

Please refer to the council's published arrangements under the heading "Making a complaint" which explains the Three Stage process for dealing with your complaint.

3. Please provide us with the name of the member(s) you believe have breached the Code of Conduct and the name of their authority:

Title	First name	Last name	Council or authority name

It is important that you provide a summary of the information you wish to have taken into account (within the space provided below) so a decision can be made, in accordance with the published arrangements, whether to take any action on your complaint.

For example:

- You should be specific, wherever possible, about exactly what you are alleging the member said or did. For instance, instead of stating that the member insulted you, you should give the exact words used.
- You should provide the dates of the alleged incidents wherever possible. If you cannot provide exact dates it is important to give a general timeframe.
- You should confirm whether there are any witnesses to the alleged conduct and provide their names and contact details if possible.
- You should provide any relevant background information.

Please indicate which paragraphs of the Code of Conduct you consider the member(s) to have breached by ticking the appropriate box(es).

- 3.1 " You must provide leadership to the council and communities within its areas by personal example"
- 3.2 "You must respect others and not bully any person".
- 3.3 "You must recognize that officers (other than political assistants) are employed by and serve the whole council."
- 3.4 "You must respect the confidentiality of information which you received as a member."
"
- 3.5 "You must not misconduct yourself in a manner which is likely to bring the council into disrepute".
- 3.6 "You must use your position as a member in the public interest and not for personal advantage. "
- 3.7 "You must act in accordance with the council's reasonable rules on the use of the resources of the council for private or political purposes."
- 3.8 "You must exercise your own independent judgment, taking decisions for good and substantial reasons."
- 3.9 "You must account for your actions, particularly by supporting the council's scrutiny functions."
- 3.10 "You must ensure the council acts within the law."
- 6, 9 or 10 (Interest requirements re: Personal, Prejudicial or Disclosable Pecuniary Interests)

4. Please explain in this section (or on separate sheets) what the member has done that you believe breaches the Code of Conduct. If you are complaining about more than one member you should clearly explain what each individual person has done that you believe breaches the Code of Conduct.

Please provide us with details of your complaint (within the space provided)

Please explain what steps, if any, you have taken to resolve this complaint directly with the member concerned?

Would you be prepared to engage in mediation with the member concerned, if considered appropriate, to try and resolve the complaint?

Yes

No

If you answered no please state reason why below:

Mediation is a way of resolving disputes with the assistance of an independent mediator who will try and help the parties reach a solution to the dispute that both parties are agreeable to. The independent mediator will avoid taking sides, making judgements or giving guidance. They are simply responsible for developing effective communications between the parties with a view to a common sense settlement being arrived at. Mediation is a voluntary process and will only take place if the parties agree and remains confidential to the parties involved.

Only complete this next section if you are requesting that your identity is kept confidential

5. In the interests of fairness and natural justice, we believe members who are complained about have a right to know who has made the complaint. We also believe they have a right to be provided with a summary of the complaint. We are unlikely to withhold your identity or the details of your complaint unless you have good reasons.

Please note that requests for confidentiality or requests for suppression of complaint details will not automatically be granted. If your request for confidentiality is not granted, we will usually allow you the option of withdrawing your complaint.

However, it is important to understand that in certain exceptional circumstances where the matter complained about is very serious, we can proceed with an investigation or other action and disclose your name even if you have expressly asked us not to.

Please provide us with details of why you believe we should withhold your name and/or the details of your complaint:

6. Additional Help

Complaints must be submitted in writing. This includes fax and electronic submissions. However, in line with the requirements of the Disability Discrimination Act 2000, we can make reasonable adjustments to assist you if you have a disability that prevents you from making your complaint in writing.

If you need any support in completing this form, please let us know as soon as possible.

**CHILTERN DISTRICT COUNCIL
CODE OF CONDUCT FOR MEMBERS**
Current version to be annexed

ASSESSMENT CRITERIA

Stage 1 Criteria

Before the assessment of a complaint begins, the monitoring officer must be satisfied that the complaint meets the following requirements:

- (i) It is a complaint against one or more named Members of the Council or a Parish or Town Council within the area;
- (ii) The named Member or Members were in Office at the time of the alleged conduct and acting in their official capacity; and
- (iii) The complaint, if proven, would be a breach of the Council's Code of Conduct in force at the relevant time.

If the complaint fails any one of these tests, it cannot be investigated as a breach of the Council's Code of Conduct and the complainant must be informed that no further action can be taken in relation to the complaint. If it passes all three tests then it can be assessed according to the criteria set out below.

Stage 2 Criteria

The monitoring officer is/are unlikely to refer a complaint for investigation where it falls into any of the following categories:-

- (a) The complaint appears to be vexatious, malicious, politically motivated, relatively minor, insufficiently serious, tit-for-tat, or there are other reasons why an investigation may not be in the public interest.
- (b) The same, or substantially similar, complaint has already been the subject of assessment or investigation and there is nothing more to be gained by further action being taken.
- (c) It appears that the complaint concerns or is really about dissatisfaction with a Council decision or policy rather than a breach of the Code of Conduct.
- (d) There is not enough information currently available to justify a decision to refer the matter for investigation.
- (e) The complaint is about someone who has died, resigned, is seriously ill or is no longer a Member of the Council concerned and therefore it is not in the public interest to pursue.
- (f) Where the allegation is anonymous, unless it includes documentary or photographic evidence indicating an exceptionally serious or significant matter and it is considered in the public interest that it be investigated.

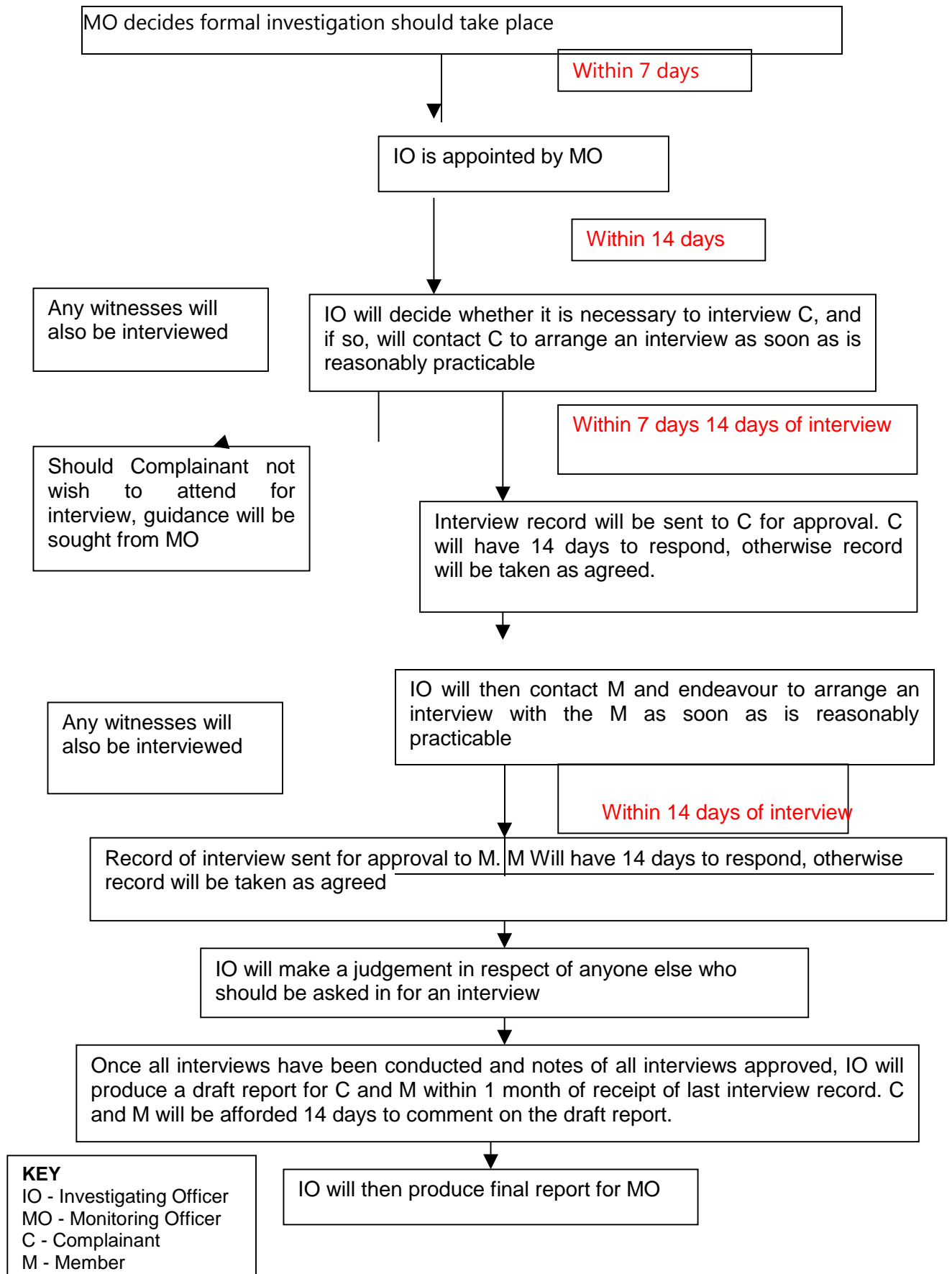
- (g) Where the event/s or incident/s took place more than 6 months prior to the date of complaint being received or where those involved are unlikely to remember the event/s or incident/s clearly enough to provide credible evidence.
- (h) The complaint is such that it is unlikely that an investigation will be able to come to a firm conclusion on the matter and where independent evidence is likely to be difficult or impossible to obtain.
- (i) If it is considered that the subject Member has **offered** a satisfactory remedy to the complainant (for example by apologising) or the complaint is capable of other informal resolution **such as mediation** and the Member complained of is amenable to such approach.
- (j) If it is satisfied that having regard to the nature of the complaint and the level of its potential seriousness, the public interest in conducting an investigation does not justify the cost of such an investigation.
- (k) Where the allegation discloses a potential breach of the Code of Conduct but it is considered that the complaint is not serious enough to warrant any further action and:
 - the Member and Officer resource needed to investigate and determine the complaint is wholly disproportionate to the matter complained about; or
 - **in** all the circumstances there is no overriding public benefit or interest in carrying out an investigation.

Re-consideration Criteria

The Investigating Officer may, following consultation with the Independent Person, refer an investigation to the monitoring officer for re-consideration as to whether the investigation should proceed where:

- As a result of new evidence or information, the Investigating Officer is of the opinion that the matter is materially less serious than may have seemed apparent to the monitoring officer when the decision was made to refer the complaint for investigation, and a different decision may have been made had the monitoring officer been aware of the new evidence or information;
- The Member who is the subject of the allegation has died, is seriously ill or has resigned from the Council concerned and in the circumstances the Investigating Officer is of the opinion that it is no longer appropriate to proceed with the investigation; or
- Other circumstances arise, which in the reasonable opinion of the Investigating Officer, render it appropriate for the investigation to be referred to the monitoring officer for re-consideration.

PROCEDURE FOR INVESTIGATIONS



**AUDIT & STANDARDS COMMITTEE
OUTLINE PROCEDURE FOR HEARINGS SUB-COMMITTEE (UNCONTESTED)**

Preliminary Procedural Issues

1. Introductions.
2. Declarations of Interest (if any).
3. To consider any request for the exclusion of Press and Public.

Breach of the Code of Conduct

4. Monitoring officer (or his/her representative) to present summary report, including the findings of fact made by the Investigating Officer, and refer to outcome of pre-hearing process.
5. Views of the Independent Person sought.
6. Members of the Sub-Committee to raise/clarify issues.
7. The Sub-Committee will retire, along with the monitoring officer, to determine whether there has been a breach of the Code of Conduct. The Sub-Committee's decision will be reported back to the meeting by the Democratic Services Officer.

Action to be taken

8. Monitoring officer (or his/her representative) to outline possible sanctions.
9. Investigating officer to make submissions on appropriate sanction, if any.
10. Member or (his/her representative) to present statement of, or provide oral, mitigation, including on what sanction, if any, should be imposed.
11. Views of the Independent Person sought.
12. Members of the Sub-Committee to raise/clarify issues.
13. The Sub-Committee will retire, along with the monitoring officer, to consider what sanction, if any, should be imposed. The Sub-Committee's decision will be reported back to the meeting by the Democratic Services Officer.

Close of Hearing

**AUDIT & STANDARDS COMMITTEE
OUTLINE PROCEDURE FOR HEARINGS SUB-COMMITTEE (CONTESTED)**

Preliminary Procedural Issues

1. Introductions.
2. Declarations of Interest (if any).
3. To consider any request for the exclusion of Press and Public.

Findings of Fact

4. Monitoring officer (or his/her representative) to present summary report and refer to outcome of pre-hearing process.
5. Investigating Officer to present report and call such witnesses as he/she considers necessary to substantiate his/her conclusion(s) within the report.
6. Member (or his/her representative) to raise/clarify issues with the Investigating Officer, including the questioning of the Investigating Officer's witnesses.
7. Members of the Sub-Committee to raise/clarify issues with the Investigating Officer, including the questioning of the Investigating Officer's witnesses.
8. Member (or his/her representative) to present their case and call such witnesses as he/she considers necessary.
9. Investigating Officer to raise/clarify issues with the Member (or his/her representative), including the questioning of the Member's witnesses.
10. Members of the Sub-Committee to raise/clarify issues with the Member (or his/her representative), including the questioning of the Member's witnesses.
11. Views of the Independent Person sought.
12. Members of the Sub-Committee to raise/clarify issues with the Independent Person.
13. The Sub-Committee will retire, along with the monitoring officer, to determine its findings of fact.
14. The Sub-Committee's decision will be reported back to the meeting by the Democratic Services Officer.

Breach of the Code of Conduct

15. The Sub-Committee will need to consider whether or not, based on the facts it has found, the Member has breached the Code of Conduct.
16. Investigating Officer to address the Panel on whether the facts found constitute a breach of the Code of Conduct.
17. Member (or his/her representative) to address the Sub-Committee as to why the facts found do not constitute a breach of the Code of Conduct.
18. Views of the Independent Person sought.
19. Members of the Sub-Committee to raise/clarify issues.
20. The Sub-Committee will retire, along with the monitoring officer, to determine whether there has been a breach of the Code of Conduct. The Sub-Committee's decision will be reported back to the meeting by the Democratic Services Officer.

(If the Sub-Committee determine that there has been no breach of the Code of Conduct, the complaint will be dismissed. If, however, the Sub-Committee determine that there has been a breach of the Code of Conduct, the procedure at paragraph 21 will apply).

Action to be taken

21. The Sub-Committee will need to determine what sanction, if any, should be imposed as a result of the Member's breach of the Code of Conduct.
22. Monitoring officer (or his/her representative) to outline possible sanctions.
23. Investigating officer to make submissions on appropriate sanction, if any.
24. Member (or his/her representative) to make submissions on whether any sanction should be imposed.
25. Views of the Independent Person sought.
26. Members of the Sub-Committee to raise /clarify issues.
27. The Sub-Committee will retire, along with the monitoring officer, to consider what sanction, if any, should be imposed. The Sub-Committee's decision will be reported back to the meeting by the Democratic Services Officer.

Close of Hearing

**PROTOCOL BETWEEN CHILTERN DISTRICT
COUNCIL AND THAMES VALLEY POLICE**

Final version to be annexed

SUBJECT:	Review of Member Training in 2017
REPORT OF:	Monitoring Officer
RESPONSIBLE OFFICER	Joanna Swift
REPORT AUTHOR	Joanna Swift
WARD/S AFFECTED	None

1. Purpose of Report

This report considers what standards training has been held for members in 2017 and whether it would be appropriate to organise further training sessions/workshops in 2018.

RECOMMENDATION

That the Committee note the position on training in 2017 and agree any areas/topics for refresher training/workshops on standards issues in the coming year.

2. Reasons for Recommendations

To ensure that the Council continues to meet its statutory duty to promote and maintain high standards of behaviour by its members when conducting council business.

3. Content of Report

- 3.1 The Council has a statutory duty under the Localism Act 2011 to promote and maintain high standards of behaviour by its members. The Audit and Standards Committee is tasked with ensuring this duty is met. When the Council adopted the current Code of Conduct in 2012 it also required all elected members to receive training on the obligations contained in the code. In addition members of the Planning Committee and Licensing Sub-Committee are required to have specialist training in the Council's planning and licensing functions/procedures as a pre-requisite of sitting on these regulatory committees. Members of other committees including Overview and Scrutiny and Audit also receive briefings on the committees' roles and responsibilities at the beginning of the Council term.
- 3.2 The Committee last considered the position on member training at their meeting in March 2017 and noted that a full induction and training had been provided for all new and continuing members after the District Council elections in May 2015. A further refresher session on declarations of interest and predetermination was held for members in November 2015. The Committee agreed that as members approached the halfway point in the Council term further refresher training be arranged with outside speakers as necessary on specialist areas such as Planning and Licensing particularly targeted Committee members but to which all members are invited. Training for members dealing with homelessness appeals on the

Appeals and Complaints Committee and local government finance/budgets at Resources Overview Committee were also considered.

- 3.4 Refresher training for members was provided on planning matters in July by the in-house officer team. In August an external speaker provided training on licensing issues. The 2 newly elected district councillors received their mandatory training session on the Code of Conduct in May and November respectively. Planning training was also given to a newly appointed member of the Planning Committee. More detailed training on homelessness legislation for members of Appeals and Complaints Committee is being considered and also a joint update on compliance with the Prudential Code (covering Medium Term Financial Strategy, Capital Strategy and Treasury Management Strategy).
- 3.5 The Committee is invited to suggest any standards or other training issues where they consider further member awareness or training would be beneficial.

4. Consultation

Not applicable.

5. Options

The Committee has the option of proposing alternative topics for member training/briefing or deferring further training until a future date.

6. Corporate Implications

Financial - None
 Legal – As set out in the report
 Risks issues – None
 Equalities - None

7. Links to Council Policy Objectives

Whilst there is no direct link to the Council's main objectives, ensuring that members are aware of, and understand, their obligations under the code of conduct and standards framework is an important assurance for the good governance of the Council.

8. Next Steps

Suitable dates for any further training sessions will be canvassed with relevant Chairmen and senior members.

Background Papers:	None except those referred to in the report
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CHILTERN DISTRICT COUNCIL

AUDIT AND STANDARDS COMMITTEE

STANDARDS WORK PROGRAMME

2017/2018

		2017			2018	
	Contact	29.06.17	27.09.17	17.01.18	08.03.18	
29.06.17						
<ul style="list-style-type: none"> Complaints Monitoring Report 2016/17 	Joanna Swift	X				
<ul style="list-style-type: none"> Appointment of Independent Persons 	Joanna Swift	X				
<ul style="list-style-type: none"> Protocol on Gifts & Hospitality 	Joanna Swift	X				
27.09.17						
<ul style="list-style-type: none"> Current issues and update on the Standards Framework 	Joanna Swift		X			
<ul style="list-style-type: none"> Annual Report of the Committee on Standards in Public Life 	Joanna Swift		X			
<ul style="list-style-type: none"> Subscription to Standards Exchange 	Joanna Swift		X			
17.01.18						
<ul style="list-style-type: none"> Annual Review of Code of Conduct and Complaints Procedure 	Joanna Swift			X		
<ul style="list-style-type: none"> Review of member training in 2017 	Joanna Swift			X		
08.03.18						
<ul style="list-style-type: none"> Review of Protocol on the Role of the Monitoring Officer 	Joanna Swift				X	
<ul style="list-style-type: none"> Work programme for 2018/19 	Joanna Swift				X	

SUBJECT:	<i>Freedom of Information Management and RIPA Annual Report</i>
REPORT OF:	<i>The Chairman of the Joint Information Governance Group</i>
RESPONSIBLE OFFICER	<i>Director of Resources Head of Business Support</i>
REPORT AUTHOR	<i>Zoë Bloomfield, 01895 837357, zoe.bloomfield@southbucks.gov.uk Corporate Information Manager</i>
WARD/S AFFECTED	<i>All</i>

1. Purpose of Report

To provide Members with an update on the public engagement with the Freedom of Information Act 2000, Environmental Information Regulations 2004, the Data Protection Act 1998, the Transparency Code of Practice, the INSPIRE Regulations, RIPA, Protection of Freedoms Act 2012.

RECOMMENDATION

To note the report.

2. Executive Summary

This report is a reflexive analysis of the past year's FOI and EIR progress and activities in response to requests processed by the Council.

3. Reasons for Recommendations

This report is to inform Members about the number of requests received and the response rate.

4. Freedom of Information Requests

The service areas that received the most FOI requests were Healthy Communities, Business Support and Customer Services. The majority of requests are for commercial information that would be useful for businesses.

The busiest months of the year for FOIs were

January, February and June

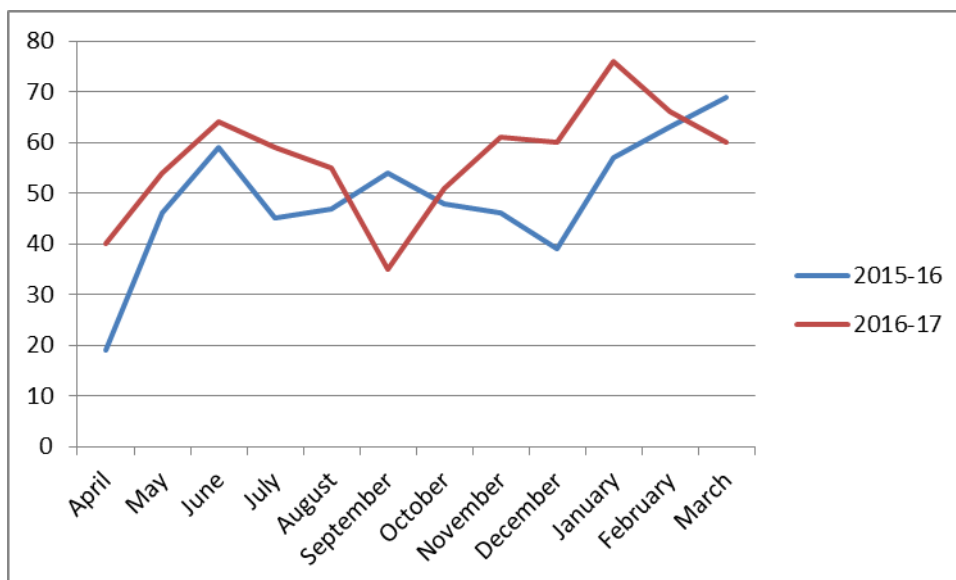
The quieter months of the year for FOIs were

April, September and October

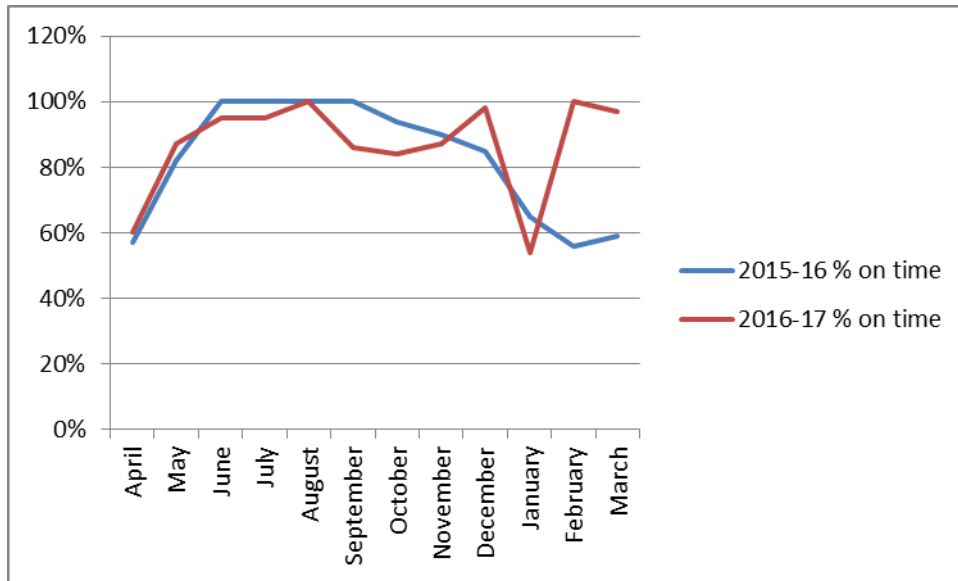
CDC FOI REQUESTS RECEIVED OVER THE LAST FINANCIAL YEAR

CDC	Financial Year 2015-2016 Number Requests	% requests Within 20 Working Days	Financial Year 2016-2017 Number Requests	% requests Within 20 Working Days
April	19	57%	40	60%
May	46	82%	54	87%
June	59	100%	64	95%
July	45	100%	59	95%
August	47	100%	55	100%
September	54	100%	35	86%
October	48	94%	51	84%
November	46	90%	61	87%
December	39	85%	60	98%
January	57	65%	76	54%
February	63	56%	66	100%
March	69	59%	60	97%
Year Totals	592	82% average	681	87% average
Requests received equals 15% increase on year 2015-2016				

Chiltern District Council Number of Requests Received

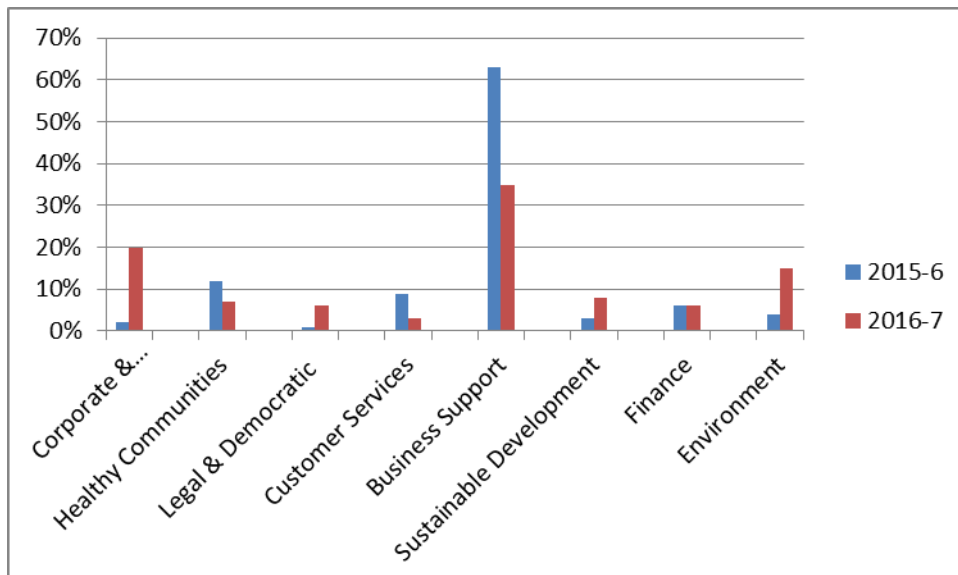


Chiltern District Council % response within 20 working days



Chiltern District Council

Breakdown of the volumes received by service area



Healthy Communities receive many requests for housing, licencing, environmental health, community safety and leisure. Business Support Officers encourage all service areas to publish and make available data sets that are frequently asked for on each Council's website. For example Licensing data is now available in electronic format and open for public inspection.

The Local Government Association (LGA) has been promoting and supporting digital transformation and transparency. The Council accordingly is increasingly publishing its data sets, to enhance proactive transparency and by making more information publicly available and to promote the effective operation of FOI in the public interest. This work is on-going.

The FOIA Code of Practice under section 45 has been updated and guidance for practitioners has now been published by the ICO. There is more emphasis on openness about certain types of information and withholding information will be harder to justify. The code provides guidance on the practice it would be desirable for public authorities to follow to meet their obligations under FOIA. Adhering to the code will result in positive benefits for an authority, and in practical terms offer good customer service.

5. RIPA

The Regulation of Investigatory Powers Act 2000 (RIPA) addresses human rights issues arising from the carrying out of surveillance and the accessing of communications data by local authorities and other law enforcement agencies. On the 1st September 2017, The Office of Surveillance Commissioners, The Intelligence Services Commissioner's Office and The Interception of Communications Commissioner's Office were abolished by the Investigatory Powers Act 2016. [The Investigatory Powers Commissioner's Office \(IPCO\)](#) is now responsible for the judicial oversight of the use of covert surveillance by public authorities throughout the United Kingdom.

Chapter 2 of Part 2 of the Protection of Freedoms Act 2012 [POFA] (sections 37 and 38) came into force on 1 November 2012. The procedure for the authorisation of local authority surveillance under the Regulation for Investigatory Powers Act 2000 (RIPA) changed and now requires magistrate's prior authorisation. There were no Regulation of Investigatory Powers Act 2000 (RIPA) investigations conducted for the year 2016 at CDC or SBDC.

6. Links to Council Policy Objectives

6.1 The aim is to support corporate information management policy, information governance procedures and strategy.

6.2 The objective is to inform Members and senior management of the response to statutory duties that aligns with the code of Corporate Governance ensuring openness and transparency, encouraging better community engagement and supporting economic activities, thus empowering citizens through increased access to information.

Background Papers:	ICO Model Publication Scheme 2013 The Protection of Freedoms Act 2012 (POFA) Regulation of Investigatory Powers Act 2000 (RIPA) Freedom of Information Act 2000 (FOIA) Environmental Information Regulations 2004 (EIR) Data Protection Act 1998 (DPA) EU General Data Protection Regulation (GDPR) 2016 Human Rights Act 1998 INSPIRE Regulation 2009 PSN Local Data Handling Guidelines (August 2014) Re-use of Public Sector Information Regulations 2015 (ROPSI) Local Government Transparency Code 2015 <i>Strengthening Local Government Transparency</i> <i>Consultation on changes to the Local Government Transparency Code 2015</i>
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APPENDIX

Explanatory Background information for the applicable legislation

(a) The Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) give rights of access to information held by public authorities. All requests are dealt with irrespective of who has sent them and why they want the information.

EIR gives access to information and there is an express presumption in favour of disclosure. The EIR is invoked when the request is for information about the environment, specifically

- The state of the elements of the environment, such as air, water, soil, land and biological diversity;
- Emissions and discharges, noise, energy, radiation, waste and other such substances;
- Measures and activities such as policies, plans, and agreements affecting or likely to affect the state of the elements of the environment;
- Reports, cost-benefit and economic analyses used in these policies, plans and agreements;
- The state of human health and safety, contamination of the food chain and cultural sites and built structures (to the extent they may be affected by the state of the elements of the environment).

Thus, requests for planning and environmental health fall under the EIR conditions.

(b) The Data Protection Act (DPA) 1998 establishes a legal framework of rights and duties which are designed to safeguard personal data. Under Section 7(1) of the DPA an individual only has a right of access to information held about them and not to information relating to other people. It provides a right to see the information contained in personal data, rather than a right to see or have copies of the documents that include that information.

These requests are more commonly referred to as subject access requests (SARS). A data controller has 40 calendar days in which to provide the requested data. The data controller is allowed to ask for proofs of identity and charge a fee of £10. Processing can only begin once the identity is validated and payment cleared. These requests take an average of 10 working days of officer time to process, (ie £1,800 cost). They are very time intensive to process, which includes the retrieval, collation, and redaction of third-party data. If the requester is not happy with the response they can make a complaint to the ICO.

(c) **The INSPIRE Regulation 2009** provides a technical standards framework to publish geospatial information. The INSPIRE Regulations confer a statutory duty on councils to provide access to its geographical information systems (GIS) and make available via the GIS mapping technology spatial data sets relating to environment and society within its district area under the provision of the INSPIRE Regulations.

The European INSPIRE Directive requires that Member States provide public access to location based data related to the environment. Council data sets will be uploaded Data.Gov.uk to support the UK location infrastructure data. The public will be able to find, share and reuse, location data, including all data published under the INSPIRE Directive.

INSPIRE is based on a number of common principles:

- Data should be collected only once and kept where it can be maintained most effectively.
- It should be possible to combine seamless spatial information from different sources across Europe and share it with many users and applications.
- It should be possible for information collected at one level/scale to be shared with all levels/scales; detailed for thorough investigations, general for strategic purposes.
- Geographic information needed for good governance at all levels should be readily and transparently available.
- It should be easy to find what geographic information is available, how it can be used to meet a particular need, and under which conditions it can be acquired and used.

The Department of Environment, Food and Rural Affairs (DEFRA) is the lead Department in the UK for implementing the INSPIRE Directive, which they propose to do in conjunction with the UK Location Strategy. DEFRA have set up a cross-government governance body – the UK Location Council. Its responsibilities in relation to INSPIRE will include:

- Co-ordinating implementation and ongoing operations;
- Providing contact point for the European Commission;
- Compiling and submitting 3-yearly monitoring reports to EC;
- Co-ordinating UK representation to INSPIRE Committees and working groups;
- Collating material on costs and benefits of the Implementing Rules;
- Responsible for central communications;
- Providing policy and technical guidance to support public authorities in meeting their obligations;
- Promoting skills development.

Work across SBDC and CDC with support from seconded specialist AVDC GIS officer within Business Support continues in order to optimise and develop existing skills, and to benefit from local officer knowledge and to achieve publishing of required GIS datasets.

(d) Local Government Transparency Code 2015 from the Department for Communities and Local Government (CLG) has established the Local Government Transparency Code. This code has been issued using the powers in section 2 of the Local Government, Planning and Land Act 1980 to issue a Code of Recommended Practice requiring local authorities to publish specific information and the code sets out requirements for the following categories of information which must be published:

- Spending on corporate GPC cards on quarterly basis including:
 - date of the transaction
 - local authority department which incurred the expenditure
 - beneficiary amount
 - Value Added Tax that cannot be recovered
 - summary of the purpose of the expenditure, and
 - merchant category (eg computers, software, etc)
- Expenditure exceeding £500 on a quarterly basis

- Procurement information

The council is required to publish details of every invitation to tender for contracts to provide goods and/or services with a value that exceeds £5,000. For each invitation, the following details must be published: reference number; title; description of the goods and/or services sought; start, end and review dates; and local authority department responsible.

The council must also publish details of any contract, commissioned activity, purchase order, framework agreement and any other legally enforceable agreement with a value that exceeds £5,000

- Detail of money raised from parking charges
- Information in relation to trade unions including 'facility time'
- Information on council contract and tenders to make it easier for small and medium firms to bid for work
- Property assets
- Local authority land

The council must publish details of all land and building assets including all service and office properties occupied or controlled by user bodies, both freehold and leasehold; any properties occupied or run under Private Finance Initiative contracts; all other properties they own or use, for example, hostels, laboratories investment properties and depots garages unless rented as part of a housing tenancy agreement; surplus, sublet or vacant properties; undeveloped land; serviced or temporary offices where contractual or actual occupation exceeds three months; all future commitments, for example under an agreement for lease, from when the contractual commitment is made.

Information to be published annually:

- Local Authority land
- Social housing assets
- Grants to voluntary, community and social enterprise organisations
- Organisation chart
- Trade union facility time
- Parking account
- Parking spaces
- Senior Salaries
- Constitution
- Pay multiple
- Fraud
- Contracts register

