

# Unrestricted Document Pack

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DIRECTOR OF STRATEGY,  
PERFORMANCE AND  
GOVERNANCE'S OFFICE  
DIRECTOR OF STRATEGY, PERFORMANCE  
AND GOVERNANCE  
Paul Dodson

17 February 2021

Dear Councillor

You are summoned to attend the meeting of the;

## **PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE**

on **THURSDAY 25 FEBRUARY 2021 at 2.00 pm.**

Please note that this will be a **remote meeting** – Members to access the meeting via Microsoft Teams. Members of the press and public may listen to the live stream via the [Council's YouTube channel](#).

A copy of the agenda is attached.

Yours faithfully



Director of Strategy, Performance and Governance

### COMMITTEE MEMBERSHIP

#### CHAIRMAN

Councillor Mrs J C Stilts

#### VICE-CHAIRMAN

Councillor K W Jarvis

#### COUNCILLORS

Mrs P A Channer, CC  
M S Heard  
M W Helm  
A L Hull  
J V Keyes  
S P Nunn  
N G F Shaughnessy  
W Stamp

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**AGENDA**  
**PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE**  
**THURSDAY 25 FEBRUARY 2021**

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1. **Chairman's Notices**
2. **Apologies for Absence**
3. **Minutes** (Pages 5 - 10)

To confirm the minutes of the meeting held on 14 January 2021, (copy enclosed).

4. **Disclosure of Interest**

To disclose the existence and nature of any Disclosable Pecuniary Interests, other Pecuniary Interest or Non-Pecuniary Interests relating to items of business on the agenda having regard to paragraphs 6 – 8 of the Code of Conduct for Members.

(Members are reminded that they are also required to disclose any such interest as soon as they become aware should the need arise through the meeting.)

5. **Public Participation**

To receive the views of members of the public, of which prior notification in writing has been received (no later than noon on the Tuesday prior to the day of the meeting).

Should you wish to submit a question please complete the online form at:  
[www.maldon.gov.uk/publicparticipation](http://www.maldon.gov.uk/publicparticipation)

6. **Internal Audit Draft Annual Plan - 2021/22** (Pages 11 - 32)

To consider the report of the Director of Resources, (copy enclosed).

7. **Review of Corporate Risk - Quarter 3** (Pages 33 - 40)

To consider the report of the Director of Strategy, Performance and Governance, (copy enclosed).

8. **Review of Corporate Performance - Quarter 3** (Pages 41 - 62)

To consider the report of the Director of Strategy, Performance and Governance, (copy enclosed).

9. **Health and Safety Update- Quarter 3** (Pages 63 - 68)

To consider the report of the Director of Service Delivery, (copy enclosed).

10. **Any other items of business that the Chairman of the Committee decides are urgent**

### **NOTICES**

#### **Sound Recording of Meeting**

Please note that the Council will be recording and publishing on the Council's website any part of this meeting held in open session. At the start of the meeting an announcement will be made about the recording.



**MINUTES of  
PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE  
14 JANUARY 2021**

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**PRESENT**

Chairman	Councillor Mrs J C Stilts
Vice-Chairman	Councillor K W Jarvis
Councillors	Mrs P A Channer, CC, M S Heard, M W Helm, A L Hull, J V Keyes, S P Nunn, N G F Shaughnessy and W Stamp
In Attendance	Councillor C Morris

**177. CHAIRMAN'S NOTICES**

The Chairman welcomed everyone to the remote meeting, held under new regulations which came into effect on 4 April 2020 in response to the COVID-19 pandemic. She took Members through some general housekeeping issues, together with the etiquette for the meeting. Finally, she asked Officers and Councillors in attendance to introduce themselves.

This was followed by a roll call of Committee Members present.

**178. APOLOGIES FOR ABSENCE**

There were no apologies for absence.

**179. MINUTES OF THE LAST MEETING**

**RESOLVED** by assent that the Minutes of the meeting of the Committee held on 26 November 2020 be approved and confirmed.

**180. DISCLOSURE OF INTEREST**

Councillor Mrs P A Channer, CC, declared a non-pecuniary interest as a Member of Essex County Council in relation to any items on the agenda pertaining to that organisation.

**181. PUBLIC PARTICIPATION**

No requests had been received.

## **182. VERBAL UPDATE FROM THE DIRECTOR OF RESOURCES**

The Director of Resources updated the Committee on the External Audit fee situation. As a result of the substantial increase in audit fees for 2021/22 (in relation to the 2020/21 accounts) and following discussions with the External Auditors it had been agreed to refer the issue to the Public Sector Audit Appointments Limited (PSAA) for review. The response, due by the end of January 2021, will then be discussed with the external auditors. It was noted that due to pressures in the audit market and increased audit requirements, both the government and the PSAA have stated that audit fees for Local Government will increase.

## **183. INTERNAL AUDIT REPORT:- PROGRESS, SECTOR UPDATE, FOLLOW-UP OF RECOMMENDATIONS, WORKFORCE MANAGEMENT AUDIT AND INFORMATION MANAGEMENT AUDIT**

The Committee considered the report of the Director of Resources and associated appendices that covered six reports from the Internal Auditors BDO LLP, the *Internal Audit Progress Report; Sector Update; Follow-up of Recommendations Report; Workforce Management and Information Management Audits*.

The Chairman introduced the report and deferred to the Internal Auditors to present the detail. The Internal Audit Partner then presented the Progress, Sector Update and Follow-up of Recommendations reports.

With reference to the Progress report he said that, in addition to the two audits on today's agenda, work was finalised supporting Officers on the new leases accounting standard. Overall progress was good despite delays as a result of Covid, five out of eleven pieces of work completed, two other audits underway and on track to provide the internal audit opinion within the normal timescales. The Sector Update report was self-explanatory, and the Follow-up of Recommendations report had one outstanding recommendation. This related to climate change and waste strategy which had been delayed due to operational pressures.

In response to a question on the moderate assessment of the Safeguarding Audit at the last committee he said that the auditors were content that this was an appropriate assessment level. They identified overall reasonable processes in place and a number of mitigating controls to ensure no abuses take place. It was noted that following this meeting an update would be circulated to Members on the detailed timetable for delivery of the Safeguarding recommendations.

The Audit Manager then presented the two audits. The *Workforce Management* audit level of assurance was substantial on both design and effectiveness. The auditors had looked at the Workforce Management Audit strategy and plan which aligned with both the Medium-Term Financial Plan and IT Strategy and was on track to achieve the objectives outlined in the Council's Corporate Plan. The People Workforce Development Plan was supported by action plans covering recruitment/resourcing, retention, learning and development and employee engagement, all monitored by the Human Resources Service Plan. The auditors found that there was an action plan in place to address issues raised in response to the staff survey and an updated plan will be produced in February 2021, monitored by the Corporate Leadership Team (CLT).

Overall there was clear direction and appropriate oversight of the workforce strategy and appropriate response to COVID issues, hence the substantial assurance level.

The *Information Management* audit level of assurance was moderate on both design and effectiveness. The purpose of the audit was to assess the design and effectiveness of the Council's information management controls and processes for the storage, retention and destruction of paper documents to support compliance with the Council's document retention schedule and current legislation.

The auditors noted that the Council had identified, and recorded assets and a detailed information Asset Register was in place. There were appropriate controls to ensure information was only accessed where there was a valid business need and a Document Retention Schedule was in place in line with current legislation and statutory requirements, together with defined procedures for the destruction of documents.

The auditors identified two medium level findings 1) that document retention and data protection policies were out of date at the time of the audit but have now been updated and approved by the Strategy and Resources Committee in November 2020, which included a refresh of digital records, and 2) that responsibility of information asset owners had not been defined but will be covered through the annual review of the Asset Register this year.

There being no further comment the Chairman moved the recommendations in the report and they were seconded by Councillor Nunn. She then put the recommendations to the Committee and they were agreed by assent.

**RESOLVED** that the Committee considered, commented and approved the:

- (i) Internal Audit Progress Report - December 2020 at appendix 1;
- (ii) Internal Audit Sector Update – January 2021 at appendix 2;
- (iii) Follow-up of Recommendation Report – December 2020 at appendix 3;
- (iv) Workforce Management Audit – November 2020 at appendix 4;
- (v) Information Management – December 2020 at appendix 5.

#### **184. BALANCE SCORECARD EXCEPTIONS REPORT**

The Committee considered the report of the Director of Strategy, Performance and Governance that required the Committee to be given visibility of any identified Balance Scorecard key performance indicators (KPI) that have met their threshold, supported by an action plan to ensure targets were met. This provided assurance that operational performance was being managed proactively and effectively.

The Chairman introduced the report and deferred to the Programmes, Performance and Governance Manager to present the detail. The Manager took the Committee through the report that built further on the Council's performance insight, providing the operational exceptions in addition to the corporate outcomes reported quarterly to the Committee. She advised that internally the Extended Leadership Team reviewed a monthly performance dashboard that covered financial, operational, customer,

organisational and statutory performance indicators. It was noted that a full copy of this was available on the Members' SharePoint.

This report aimed to draw Members' attention to the exceptions, where, as a Council, there was either underperformance or performance that surpassed targets. She referred to section 3.5 of the covering report where areas of underperformance were highlighted, along with their associated management response and action. These were impacted by the changes brought about by the pandemic and wider economic issues, but the reporting provided the opportunity to track the extent of the impact and account for this in the medium term financial strategy.

She then drew Members' attention to section 3.6 of the covering report where areas of overperformance were highlighted around channel shift and website feedback. It was noted that work continued around digital improvements, a website refresh and moving processes online, and, in addition, these indicators were likely to have been impacted by the pandemic and general customer move to online transactions.

Councillor Nunn observed that given the current difficult climate the hard work by Officers and performance levels achieved were remarkably good. In response to a question regarding phone contact performance the Manager said that the contact statistic of over 90% related to channel shift only. She added that going forward phone contact data would be included. Councillor Heard observed that 90% online contact was a great achievement given the demographic of the district.

There being no further comment the Chairman then moved the recommendations in the report and they were seconded by Councillor Helm. She then put the recommendations to the Committee and they were agreed by assent.

## **RESOLVED**

- (i) That the committee reviewed and commented on exceptions to service reporting provided in the report;
- (ii) That Members confirmed they were assured through this review, Operational performance was being managed effectively.

## **185. ANNUAL GOVERNANCE STATEMENT ACTIONS UPDATE**

The Committee considered the report of the Director of Strategy, Performance and Governance that updated the Committee on the actions identified in the 2019/20 Annual Governance Statement (AGS).

The Chairman introduced the report and deferred to the Programmes, Performance and Governance Manager to present the detail. The Manager took the Committee through the report and advised that although there were no significant areas of Governance concerns, some aspirational actions around best practice for future Governance had been identified in the annual governance statement.

She reminded Members that the Annual Governance Statement was approved as part of the Annual Statement of accounts at Council on 13 December 2020, although it was separately approved by Performance Governance and Audit Committee on 30 July

2020. It was noted that this was the first time the Committee had received an update on the Annual Governance Statement actions and that this would be reported quarterly going forwards as agreed at the July 2020 meeting.

The Manager drew Members' attention to the table at section 3.4 of the covering report that contained details of the actions taken and a commentary on their progress. She advised that depending on levels of progress, some actions would also be included in the 2020/21 Annual Governance Statement.

Councillor Nunn, noting the reference in the report around monitoring the impacts of Covid, observed that it was crucial to assess this as having to redirect support to deal with the additional demands of Covid-19 would have a knock-on effect resourcing other elements of the service. The Manager concurred and said that there would be significant focus on this area in the next iteration of the AGS.

There being no further comment the Chairman moved the recommendation in the report and it was seconded by Councillor Helm. She then put the recommendation to the Committee and it was agreed by assent.

**RESOLVED** that the Committee reviewed the AGS action table and updates and challenged where appropriate.

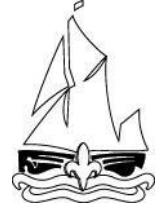
**186. ANY OTHER ITEMS OF BUSINESS THAT THE CHAIRMAN OF THE COMMITTEE DECIDES ARE URGENT**

The Chairman reported that the issue of setting up a Working Group for the Performance, Governance and Audit Committee would form part of the agenda for a future meeting. She concluded by thanking Officers for their reports and all in attendance for their contributions.

The meeting closed at 2.36 pm.

MRS J C STILTS  
CHAIRMAN

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## **REPORT of DIRECTOR OF RESOURCES**

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to  
**PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE**  
**25 FEBRUARY 2021**

### **INTERNAL AUDIT DRAFT ANNUAL PLAN – 2021/22**

#### **1. PURPOSE OF THE REPORT**

- 1.1 To present for consideration and approval by the Committee the following report issued by BDO LLP, the Council's internal audit service provider:-
- Internal Audit Draft Annual Plan – 2021/22 at **APPENDIX 1**.

#### **2. RECOMMENDATION**

That the Committee considers, comments and approves the Internal Audit Draft Annual Plan – 2021/22 at **APPENDIX 1**.

#### **3. SUMMARY OF KEY ISSUES**

- 3.1 BDO LLP are the Council's contracted Internal Audit Service provider. The Partner, Mr. Greg Rubins, fulfils an equivalent role to that of Head of Internal Audit.
- 3.2 The Internal Audit Service is there to provide assurance to the Director of Resources, Management and Members of the adequacy of internal controls and checks in the organisation and to highlight any risks that the Council may be exposed to in its overall and day to day operations.
- 3.3 As such, Internal Audit is independent of Management and operates, performs to and is measured against The UK Public Sector Internal Audit Standards (PSIAS) issued by the Chartered Institute of Public Finance and Accountancy (CIPFA). In addition CIPFA has also issued a Statement on the Role of the Head of Internal Audit.
- 3.4 The report attached in the appendix will be presented to the Committee and discussed by Mr. Greg Rubins or his representative on his behalf.

#### **4. CONCLUSION**

- 4.1 This report together with the report attached as an appendix allows the Committee to fulfil its remit of overseeing governance.

#### **5. IMPACT ON STRATEGIC THEMES**

- 5.1 Internal Audit cuts across the delivery of all the Strategic Themes of the Council.

## 6. IMPLICATIONS

- (i) **Impact on Customers** – any impact on customers will be highlighted with the reports in the appendices.
- (ii) **Impact on Equalities** – any impact on equalities will be highlighted with the reports in the appendices if it is within the scope of the audit work carried out.
- (iii) **Impact on Risk** – Any risks identified as a result of the findings of the internal audit work are highlighted with the individual reports and summarised in the Progress Update and Follow Up of recommendations reports.
- (iv) **Impact on Resources (financial)** – Same comment applies here as for Impact on Risk above.
- (v) **Impact on Resources (human)** – Same comment applies here as for Impact on Risk above.
- (vi) **Impact on the Environment** – Same comment applies here as for Impact on Risk above.

Background papers: None.

Enquiries to: Chris Leslie, Director of Resources, Maldon District Council  
Greg Rubins (BDO LLP)  
Emma Donnelly (BDO LLP)

# INTERNAL AUDIT DRAFT ANNUAL PLAN

## MALDON DISTRICT COUNCIL

2021/22

IDEAS | PEOPLE | TRUST



# AUDIT RISK ASSESSMENT

## Background

Our risk based approach to Internal Audit uses the Council's own risk management process and risk register as a starting point for audit planning as this represents the client's own assessment of the risks to it achieving its strategic objectives.

The extent to which we can rely on management's own perception of risk largely depends on the maturity and effectiveness of the Council's own risk management arrangements. In estimating the amount of audit resource required to address the most significant risks, we have also sought to confirm that senior management's own assessment of risk accurately reflects Council's current risk profile.

## Planned approach to internal audit 2021/22

The indicative Internal Audit programme for 2021/22 is shown from page 8, with an indicative strategic plan for 2021/22 shown from page 11. We will meet with s151 Officer, Directors and the Chairman of Performance, Governance and Audit in order to bring together a full plan which will be presented at the March Performance, Governance and Audit (PGA) Committee. We will keep the programme under continuous review during the year and will introduce to the plan any significant areas of risk identified by management during that period.

The plan is set within the context of a multi-year approach to internal audit planning, such that all areas of key risks would be looked at over a three year audit cycle. In setting the number of days in the plan we have assumed that the control environment within the Council's will improve as we work with you to address the issues you have.

## Individual audits

When we scope each review, we will reconsider our estimate for the number of days needed to achieve the objectives established for the work and to complete it to a satisfactory standard in light of the control environment identified within the Council. Where revisions are required we will obtain approval prior to commencing fieldwork.

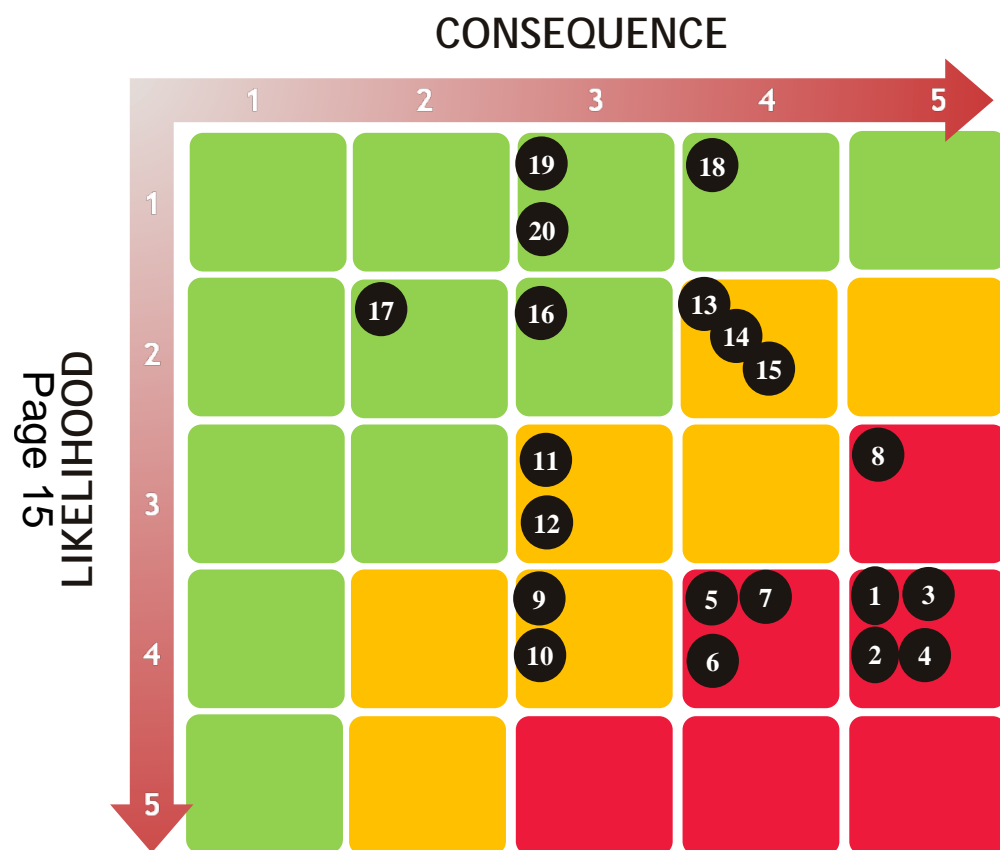
In determining the timing of our individual audits we will seek to agree a date which is convenient to the Council and which ensures availability of key management and staff.

## Variations to the Plan

We review the three year strategic plan each year to ensure we remain aware of your ongoing risks and opportunities. Over the coming pages we have mapped your key risks along with the audit work we are undertaking, demonstrating we are focussing on your most important issues.

As such our strategic audit programme follows the risks identified during our planning processes and confirmed via discussions with the Executive Directors.

# MAPPING YOUR STRATEGIC RISKS



Ref	Strategic Risks from your CRR	Score
1	R15: Failure to plan and deliver balanced budgets over the medium term	20
2	R7: Failure to maintain a 5 year supply of housing land	20
3	R8: Failure to meet the affordable housing need	20
4	R9: Failure to have a co-ordinated approach to supporting inward investment and maximising business rates growth	20
5	R23: Financial resource and process issues	16
6	R25: Failure to deliver finances associated to transformation programme	16
7	R5: Failure to deliver the required infrastructure to support development arising from the LDP	16
8	R1: Failure to safeguard children and vulnerable adults	15
9	R3: Failure to target services/influence partners effectively to support identified housing needs of increasing aging population	12
10	R4: Failure to influence Community Safety Partners to address the key areas of public concern	12
11	R10: Failure to develop jobs to support the growing population	9
12	R14: Unable to recruit and retain staff with specific skill sets in specialist areas to meet the demands of the service (i.e. planners)	9
13	R11: Failure to protect personal or commercially sensitive information	8

14	R2: Failure to target services and influence partners with the aim of having an effective outcome on the identified (health and wellbeing) needs of the vulnerable population	8
15	R29: Failure to deliver services as a result of Covid-19	8
16	R19: Failure to manage the impact of organisational change	6
17	R16: Corporate policies not managed and reviewed	4
18	R26: Failure to deliver channel shift, through lack of customer engagement or undelivered processes	4
19	R12: A committee structure which may not be cost effective	3
20	R24: Loss of key skills and knowledge across the organisation, and failure to embrace new working cultures	3

# MAPPING YOUR CRR TO THE STRATEGIC PLAN

Ref	Strategic Risks from your CRR	2021/22	
1	R15: Failure to plan and deliver balanced budgets over the medium term	Main Financial Systems	Main Financial Systems Budgets and Performance Management
2	R7: Failure to maintain a 5 year supply of housing land		Local Development Plan
3	R8: Failure to meet the affordable housing need		Local Development Plan
4	R9: Failure to have a co-ordinated approach to supporting inward investment and maximising business rates growth	Commercialisation	
5	R23: Financial resource and process issues	Main Financial Systems	Main Financial Systems Budgets and Performance Management
6	R25: Failure to deliver finances associated to transformation programme	Main Financial Systems IT Strategy & Transformation	
7	R5: Failure to deliver the required infrastructure to support development arising from the LDP		Local Development Plan
8	R1: Failure to safeguard children and vulnerable adults	Strategic Performance- Community	Safeguarding
9	R3: Failure to target services/influence partners effectively to support identified housing needs of increasing aging population	Partnerships	
10	R4: Failure to influence Community Safety Partners to address the key areas of public concern	Strategic Performance- Community Partnerships	Community Safety
11	R10: Failure to develop jobs to support the growing population	Communications and Stakeholder Engagement	

12	R14: Unable to recruit and retain staff with specific skill sets in specialist areas to meet the demands of the service (i.e. planners)	Workforce Management	
13	R11: Failure to protect personal or commercially sensitive information	IT Strategy & Transformation	
14	R2: Failure to target services and influence partners with the aim of having an effective outcome on the identified (health and wellbeing) needs of the vulnerable population	Strategic Performance- Community	
15	R29: Failure to deliver services as a result of Covid-19	Covid Recovery Plan	Covid Recovery Plan
16	R19: Failure to manage the impact of organisational change	IT Strategy & Transformation	
17	R16: Corporate policies not managed and reviewed	Policy Review	
18	R26: Failure to deliver channel shift, through lack of customer engagement or undelivered processes	IT Strategy & Transformation	
19	R12: A committee structure which may not be cost effective		Corporate Governance
20	R24: Loss of key skills and knowledge across the organisation, and failure to embrace new working cultures	Workforce Management	Workforce Management

# INTERNAL AUDIT OPERATIONAL PLAN 2021/22

Area	Days	Timing	Description of the Review	Reason for Inclusion
CORE				
Main Financial Systems	20	Q3	Detailed review to include GL controls, system interfaces, journals, as well as cyclical audits of debtors, creditors, payroll, budgetary control, treasury management, council tax and NNDR.	This is a mandatory element of the internal audit programme and forms a key component of the Head of Internal Audit opinion. We undertake a rotational set of reviews covering the Council's key financial systems.
Workforce Management	15	Q4	Review of the internal processes for HR, including workforce planning, recruitment, appraisals and training and assess if the People and Workforce Development Strategy has been implemented effectively.	{R14: Unable to recruit and retain staff with specific skill sets in specialist areas to meet the demands of the service (i.e. planners)}
Strategic Performance-Community	20	Q3	Deep dive review into effectiveness of the actions underpinning the Community theme and the success of these actions given the impact of the Covid-19 pandemic on vulnerable members of the community.	{R3: Failure to target services/influence partners effectively to support identified housing needs of increasing aging population} {R4: Failure to influence Community Safety Partners to address the key areas of public concern}
Covid Recovery Plan	15	Q1	Review how the implementation of the Council's Covid-19 recovery strategy is monitored and managed so that it is effective in its objectives.	{R29: Failure to deliver services as a result of Covid-19}
Communications & Stakeholder Management	20	Q2	Review how the Council engages with stakeholders internally and externally, ensuring communications are in line with agreed corporate priorities.	{Failure to target services and influence partners with the aim of having an effective outcome on the identified (health and wellbeing) needs of the vulnerable population}

IT Strategy & Transformation	20	Q3	Review to determine if the Council's IT strategy has been appropriately developed and aligned to the post-covid working arrangements and that all Members and Council staff are adhering to the policies surrounding the new way of working.	{Failure to deliver channel shift, through lack of customer engagement or undelivered processes}
Total	110			

Area	Days	Timing	Description of the Review	Reason for Inclusion
OPERATIONAL				
Climate Change & Sustainability	20	Q1	The purpose of the audit is to provide assurance over the management of the environment and climate emergency through review of the newly drafted Councils Environment and Climate Change policy and compare the Councils preparations to the developments across Essex and other local authorities.	Key risk for the Council and its population.
Policy Review	15	Q3covid	Review of the Council's policies to ensure they are transparent, robust, consistent, up to date and that there is a plan in place for reviewing and refreshing them.	Policies require a fresh review following transformation {CRR 16 - Corporate policies not managed and reviewed}
Total	35			

Area	Days	Timing	Description of the Review	Reason for Inclusion
ADVISORY				
Commercialisation	20	Q3	To review the Council's strategy to have a co-ordinated approach to supporting inward investment and maximising business rates growth. The audit will also consider the Council's future strategy and plans regarding on-going commercialisation activities.	{R9: Failure to have a co-ordinated approach to supporting inward investment and maximising business rates growth}
Partnerships	20		To assess the adequacy and effectiveness of the Council's arrangements for the management of Partnerships given the outcomes within the Corporate Plan to deliver various projects with partner involvement e.g. enterprise centre.	{R3: Failure to target services/influence partners effectively to support identified housing needs of increasing aging population} {R4: Failure to influence Community Safety Partners to address the key areas of public concern}
Total	40			

Area	Days	Description of the Review
Planning, Reporting, and Follow-up		
Follow Up Work	10	Creation of audit plan, meeting with Executive Directors.
Audit Management	20	Assessment and reporting of recommendations raised.
Contingency	5	
Total	35	
Overall Total	220	

# INTERNAL AUDIT STRATEGIC PLAN

## 2021-2024

Area	2020/21	2021/22	2022/23	Description of the Review
<b>CORE</b>				
<b>Main Financial Systems</b>	20	20	20	Detailed review to include GL controls, system interfaces, journals, as well as cyclical audits of debtors, creditors, payroll, budgetary control, treasury management, council tax and NNDR.
<b>Risk Maturity Assessment</b>			15	Review the process in place for risk management, including risk appetite, identification, controls, scoring and mitigation. This will follow up on the previous assessment to determine if the Council has progress towards a mature approach to risk management.
<b>Budgets and Performance Management</b>			15	Review of the performance management processes such as the strength of business planning, use of data, governance and follow up of services not meeting targets.
<b>Corporate Governance</b>			15	Review of the operation of the newly established Committee Structure to ensure that it is fit for purpose and delivering the outcomes required by the District.
<b>Workforce Management</b>	15	15	15	Review of the internal processes for HR, including workforce planning, recruitment, appraisals and training and assess if the People and Workforce Development Strategy has been implemented effectively.
<b>Fraud</b>	17			Fraud risk management assessment and preventative measures, including training, presentations and advice on fraud.
<b>Strategic Performance - Cyclical (Place,</b>		20	20	Cyclical deep dive review into effectiveness of the actions underpinning the various strategic

Community & Prosperity)				themes (Place, Community & Prosperity) theme and the success of these actions given the impact of the Covid-19 pandemic.
Covid Recovery Plan		15	15	Review how the implementation of the Council's Covid-19 recovery strategy is monitored and managed so that it is effective in its objectives.
Communications and Stakeholder Engagement		20		Review how the Council engages with stakeholders internally and externally, ensuring communications are in line with agreed corporate priorities.
Capital project management			15	Review of significant capital projects, to include the planning, funding, delivery and the approach to project management to ensure there is sufficient due diligence and that projects are delivered in line with expectations.
<b>OPERATIONAL</b>				
Flood Management			10	Review of the Council's relationships with the Lead Local Flood Authority and other organisations to manage respective responsibilities over the risk of surface water flooding. (Follow up review)  This will also re-asses previous actions from the strategic ownership of flooding responsibilities.
Information Management	15			To assess the design and effectiveness of the Council's information management controls and the processes for the storage, retention and destruction of paper documents to support compliance with the Council's retention schedule and current legislation.
Customer Service-CRM Post Implementation	20			Review of areas such as effectiveness of customer service centre, customer feedback and complaints and telephony.
Climate Change & Sustainability		20		Reviews of the Council's waste management contract, collection and recycling arrangements, carbon footprint and activities to providing a safe and clean environment.

Knowledge Management & Transfer	20			Review of the Council's approach to knowledge management and how it is stored and shared
Management of Property	15			Review of the arrangements in place for ensuring property is managed effectively and efficiently.
Housing Needs and Affordable Housing	15			Review of how effectively the Council is managing its strategy around provision of social housing and developing the private rented sector.
Safeguarding	15		15	Follow up of previous internal audit to review of the Council's policies and arrangements to ensure the safeguarding of children and vulnerable adults.
Community Safety			15	Review of the Council's policies and arrangements to ensure residents' safety, progression of the Community Safety Plan and engagement with public to reduce crime given reduced policing capacity.
Local Development Plan			15	Review of the implementation of the Local Development Plan and consistency with other Council strategic needs assessments.
Policy Review		15		Review of the Council's policies to ensure they are transparent, robust, consistent, up to date and that there is a plan in place for reviewing and refreshing them.
ADVISORY				
CIPFA FM Code Readiness	18			To review the Council's compliance with the upcoming CIPFA Code and assess readiness against each requirement.
Commercialisation		20		To review the Council's strategy to have a co-ordinated approach to supporting inward investment and maximising business rates growth. The audit will also consider the Council's future strategy and plans regarding on-going commercialisation activities.
IFRS16 Readiness	15			We will assist the Council in preparing for the implementation of IFRS 16, by ensuring that the Council has a robust project plan in place for the

				transition, including required steps to follow and milestones.
Partnerships		20		To assess the adequacy and effectiveness of the Council's arrangements for the management of Partnerships given the outcomes within the Corporate Plan to deliver various projects with partner involvement e.g. enterprise centre.
Planning, Reporting and Follow Up				
Follow up	10	10	10	Assessment and reporting of recommendations raised.
Management Time	20	20	20	Creation of audit plan, attendance at PGA.
Contingency	5	5	5	
Total	220	220	220	

# APPENDIX I

## Internal Audit Charter - Role and Scope of Internal Audit

### Purpose of this charter

This charter is a requirement of Public Sector Internal Audit Standards (PSIAS).

The charter formally defines internal audit's mission, purpose, authority and responsibility. It establishes internal audit's position within Maldon District Council and defines the scope of internal audit activities.

Final approval resides with the Board, in practice the charter shall be reviewed and approved annually by management and by the PGA on behalf of the board of Maldon District Council.

### Internal audit's mission

Internal audit's mission is to enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.

### Standards of internal audit practice

To fulfil its mission, internal audit will perform its work in accordance with PSIAS, which encompass the mandatory elements of the Institute of Internal Auditors (IIA) International Professional Practices Framework (IPPF): Definition of Internal Auditing, Code of Ethics, and International Standards for the Professional Practice of Internal Auditing.

### Internal audit definition and role

Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.

Internal audit acts primarily to provide the PGA with information necessary for it to fulfil its own responsibilities and duties. Implicit in internal audit's role is that it supports management to fulfil its own risk, control and compliance responsibilities. The range of work performed by internal audit is set out in PSIAS and not repeated here.

### Internal audit's scope

The scope of internal audit activities includes all activities conducted by Maldon District Council. The Internal Audit Plan sets out those activities that have been identified as the subject of specific internal audit engagements.

The provision of assurance services is the primary role for internal audit in the UK public sector. This role requires the chief audit executive to provide an annual internal audit opinion based on an objective assessment of the framework of governance, risk management and control.

Assurance engagements involve the objective assessment of evidence to provide an independent opinion or conclusions regarding an entity, operation, function, process, system or other subject matter. The nature and scope of the assurance engagement are determined by internal audit.

Consulting engagements are advisory in nature and are generally performed at the specific request of management, with the aim of improving governance, risk management and control and contributing to the overall opinion. The nature and scope of consulting engagement are subject to agreement with management. When performing consulting services, internal audit should maintain objectivity and not assume management responsibility.

### **Effective internal audit**

Our internal audit function is effective when:

- It achieves the purpose and responsibility included in the internal audit charter
- It conforms with the Standards
- Its individual members conform with the Code of Ethics and the Standards
- It considers trends and emerging issues that could impact the organisation.

The internal audit activity adds value to Maldon District Council (and its stakeholders) when it considers strategies, objectives and risks, strives to offer ways to enhance governance, risk management and control processes and objectively provides relevant assurance.

We will agree with you an audit plan for a total number of days activity. Once agreed, we will turn this into a cash budget which we will work to, in order to ensure that you have certainty around the fees you will pay us.

### **Independence and internal audit's position within Maldon District Council**

To provide for internal audit's independence, its personnel and external partners report to the Head of Internal Audit, who reports functionally to the PGA. The Head of Internal Audit has free and full access to the Chair of the PGA. The Head of Internal Audit reports administratively to the Director of Resources who provides day-to-day oversight.

The appointment or removal of the Head of Internal Audit will be performed in accordance with established procedures and subject to the approval of the Chair of the PGA.

The internal audit service will have an impartial, unbiased attitude and will avoid conflicts of interest. The internal audit service is not ordinarily authorised to perform any operational duties for Maldon District Council.

In the event that internal audit undertakes non-audit activities, safeguards will be agreed to ensure that independence or objectivity of the internal audit activity are not impaired. This might include a separate partner review of the work or a different team undertaking the work. Approval of the arrangements for such engagements will be sought from the PGA prior to commencement.

In the event that internal audit provides assurance services where it had previously performed consulting services, an assessment will be undertaken to confirm that the nature of the consulting activity did not impair objectivity and safeguards will be put in place to manage individual objectivity when assigning resources to the engagement. Such safeguards will be communicated to the PGA.

Internal audit must be free from interference in determining the scope of internal auditing, performing work and communicating results. Should any interference take place, internal audit will disclose this to the PGA to discuss the implications.

### **Internal audit's role in fraud, bribery and corruption**

Management, not internal auditors are responsible for the prevention and detection of fraud, bribery and corruption. Auditors will, however, be alert in all their work to risks and exposures that could allow fraud or corruption as well as seeking to identify indications that fraud and corruption may have been occurring. Audit procedures alone, even when performed with due professional care, cannot guarantee that fraud and corruption will be detected. In the event that internal audit suspect a fraud, this will be referred to appropriate management in the first instance and then the PGA.

### **Access to records and confidentiality**

There are no limitations to internal audit's right of access to Maldon District Council officers, records, information, premises, or meetings which it considers necessary to fulfil its responsibilities.

When the auditors receive confidential information about your affairs it shall at all times be kept confidential, except as required by law or as provided for in regulatory, ethical or other professional pronouncements applicable. All information will be maintained in line with appropriate regulations, for example the Data Protection Act 1998.

### **Coordination and reliance with other assurance providers**

In co-ordinating activities internal audit may rely on the work of other assurance and consulting service providers.

A consistent approach is adopted for the basis of reliance and internal audit will consider the competency, objectivity, and due professional care of the assurance and consulting service providers. Due regard will be given to understanding of the scope, objectives and results of the work performed by other providers of assurance and consulting services.

Where reliance is placed upon the work of others, internal audit is still accountable and responsible for ensuring adequate support for conclusions and opinions reached by the internal audit activity.

### **Internal audit's commitments to Maldon District Council**

Internal audit commits to the following:

- working with management to improve risk management, controls and governance within the organisation
- performing work in accordance with PSIAS
- complying with the ethical requirements of PSIAS
- dealing in a professional manner with Council staff, recognising their other commitments and pressures
- raising issues as they are identified, so there are no surprises and providing practical recommendations
- liaising with external audit and other regulators to maximise the assurance provided to Maldon District Council
- Reporting honestly on performance against targets to the PGA.

### Internal audit performance measures and indicators

The tables on the right contain some of the performance measures and indicators that are considered to have the most value in assessing the efficiency and effectiveness of internal audit.

The PGA should approve the measures which will be reported to each meeting and / or annually as appropriate. In addition to those listed here we also report on additional measures as agreed with management and included in our Progress Report.

### Quality assurance and improvement programme

As required by PSIAS an external assessment of the service will be performed at least every five years. BDO also has an internal quality assurance review process in place, which takes place annually. This is performed by a separate team independent to the internal audit team.

The results of internal and external assessments will be communicated to the PGA as part of the internal audit annual report, along with corrective action plans.

**Table One: Performance measures for internal audit**

Measure / Indicator
<b><i>Audit Coverage</i></b> Annual Audit Plan delivered in line with timetable Actual days are in accordance with Annual Audit Plan
<b><i>Relationships and customer satisfaction</i></b> Customer satisfaction reports - overall score at average at least 3.5 / 5 for surveys issued at the end of each audit. Annual survey to PGA to achieve score of at least 70% External audit can rely on the work undertaken by internal audit (where planned)
<b><i>Staffing and Training</i></b> At least 60% input from qualified staff
<b><i>Audit Reporting</i></b> Issuance of draft report within 3 weeks of fieldwork `closing` meeting Finalise internal audit report 1 week after management responses to report are received. 90% recommendations to be accepted by management Information is presented in the format requested by the customer.

**Audit Quality**

High quality documents produced by the auditor that are clear and concise and contain all the information requested.

Positive result from any external review

**Management and staff commitments to Internal Audit**

The management and staff of Maldon District Council commit to the following:

- providing unrestricted access to all of Maldon District Council's records, property, and personnel relevant to the performance of engagements
- responding to internal audit requests and reports within the agreed timeframe and in a professional manner
- implementing agreed recommendations within the agreed timeframe
- being open to internal audit about risks and issues within the organisation
- not requesting any service from internal audit that would impair its independence or objectivity
- providing honest and constructive feedback on the performance of internal audit

**Management and staff performance measures and indicators**

The following three indicators are considered good practice performance measures but we go beyond this and report on a suite of measures as included in each PGA progress report.

**Table Two: Performance measures for management and staff**

Measure / Indicator
<p><i>Response to Reports</i></p> <p>Audit sponsor to respond to terms of reference within one week of receipt and to draft reports within two weeks of receipt</p>
<p><i>Implementation of recommendations</i></p> <p>Audit sponsor to implement all audit recommendations within the agreed timeframe</p>
<p><i>Co-operation with internal audit</i></p> <p>Internal audit to confirm to each meeting of the PGA whether appropriate co-operation has been provided by management and staff</p>

## BDO contacts

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## **REPORT of DIRECTOR OF STRATEGY, PERFORMANCE AND GOVERNANCE**

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to  
**PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE**  
**25 FEBRUARY 2021**

### **REVIEW OF CORPORATE RISK – QUARTER 3**

#### **1. PURPOSE OF THE REPORT**

- 1.1 The Risk Management Policy requires this Committee to undertake a quarterly review of the Corporate Risk Register as assurance that the corporate risks are being managed effectively. **APPENDIX 1** is attached to the report for this purpose.

#### **2. RECOMMENDATIONS**

- (i) That Members review the Corporate Risk Register in **APPENDIX 1** and provide comment and feedback for consideration;
- (ii) That Members are assured through this review that corporate risk is being managed effectively;
- (iii) That Members challenge risk where the Committee feels that the Council's corporate goals may not be achieved.

#### **3. SUMMARY OF KEY ISSUES**

- 3.1 **APPENDIX 1** shows a table of the Corporate Risk Register, the latest ratings and officer commentary.

3.2 Summary of risk direction / changes since Quarter Two (Q2)

- There is one risk that has seen a decrease in score: R23.
- There are no risks that have seen an increase in score.
- There is one risk that has been recommended for closure: R23.

#### **4. CONCLUSION**

- 4.1 Overall, no major Corporate Risk Register concerns have been raised. Work continues to ensure risks are mitigated, and where possible, working towards their closure.

## 5. IMPACT ON STRATEGIC THEMES

- 5.1 It is important that risk is monitored and managed effectively, to ensure that Maldon District Council progresses towards and achieves its stated outcomes.

## 6. IMPLICATIONS

- (i) **Impact on Customers** – Those risks in the Corporate Risk Register are defined as having a wider impact on our customers and delivery. The monitoring and mitigation of these will reduce the impact on customers.
- (ii) **Impact on Equalities** – None.
- (iii) **Impact on Risk** – If risk is not managed effectively by the Council, it puts the Council's strategic delivery at risk and increases unnecessary exposure to potential, operational, reputational or regulatory consequences.
- (iv) **Impact on Resources (financial)** – All risk management is undertaken within existing planned budget. Exceptions being for a potential enactment of a recommendation outside of pre-defined resource.
- (v) **Impact on Resources (human)** – All risk management is undertaken within existing planned budget. Exceptions being for a potential enactment of a recommendation outside of pre-defined resource.
- (vi) **Impact on the Environment** – None.
- (vii) **Impact on Strengthening Communities** – None.

Background Papers: None.

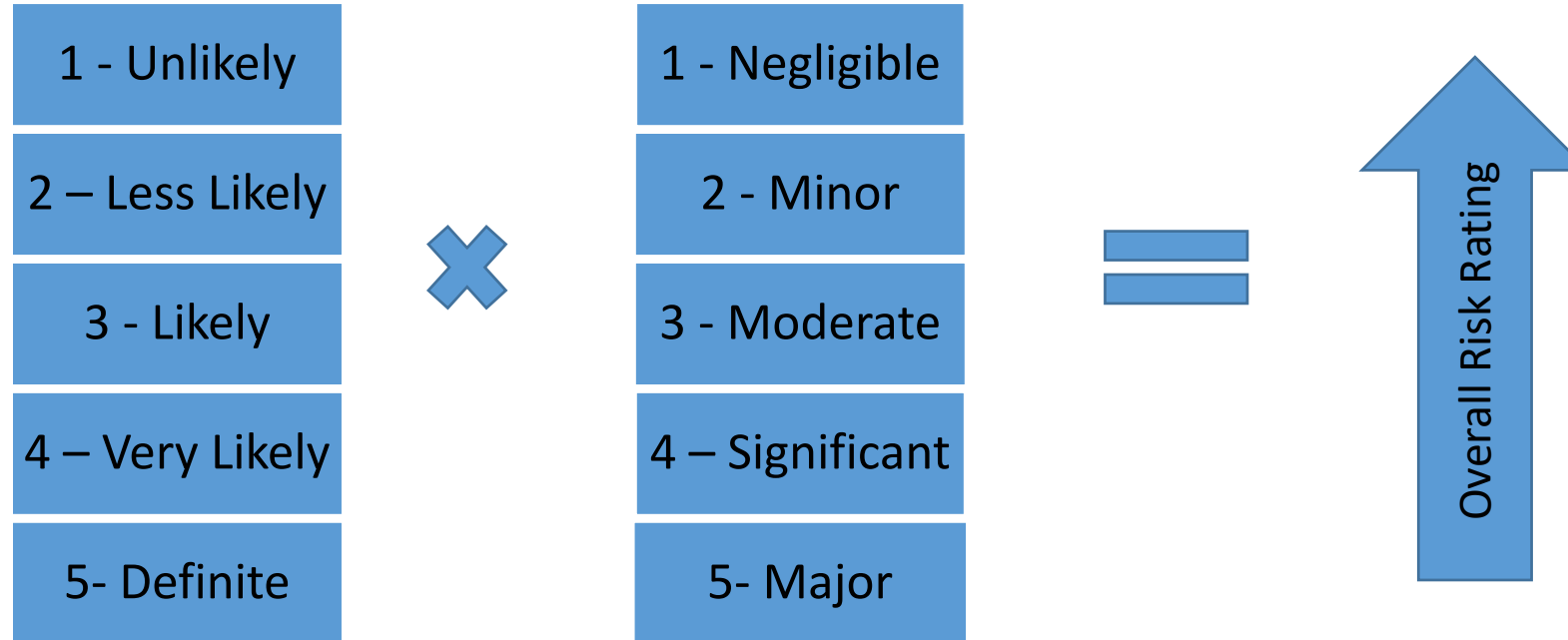
Enquiries to: Paul Dodson, Director of Strategy, Performance and Governance.

# Corporate Risk Report Q3 – Appendix 1





25/02/2021

\*Please note risks are sorted in 'Overall Risk Rating' descending order\*

# Risk Assessment Scale



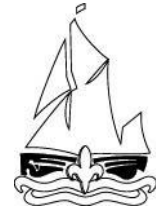
Title	Risk Description	Likelihood	Impact	Overall Risk Rating	Rating direction	Commentary
R15	Failure to plan and deliver balanced budgets over the medium term	4	5	20	Risk Rating Unchanged	Q3 - The MTFS is constantly being updated and reported to Members. There is a significant financial impact as a result of COVID-19 but in the short term there are sufficient reserves to address this. For 2021/22 a balanced budget has been drafted for member approval but the uncertainty around COVID is a significant risk to this being delivered and the future years projections show further pressures ahead.
R7	Failure to maintain a 5 year supply of Housing Land	4	5	20	Risk Rating Unchanged	Q3 - The 5YHLS Statement has been published (December 2020) and is 4.9 years, so under the threshold of 5 years. A Master Spreadsheet for housing is being prepared to make monitoring easier and to analyse stats more quickly and clearly.
R8	Failure to meet the affordable housing need	4	5	20	Risk Rating Unchanged	Q3 - Looking to provide additional affordable housing through sites outside of the LDP process. This has been slowed down, in some instances, by Covid 19 including officers having competing work priorities. A technical issue has also arisen that MDC is looking to resolve.
R9	Failure to have a coordinated approach to supporting inward investment and maximising business rate growth	4	5	20	Risk Rating Unchanged	Q3 - Delivery has been delayed as resources have been diverted to the Covid response. The future of inward investment work by ECC remains unclear but enquires have been dealt with on a case by case basis. However, work has now been scoped for the development of a Maldon District Investment Prospectus encouraging new investment in the Maldon District, aligned with local strategic plans and the District's approved Local Development Plan for employment land sites. Supporting commercial opportunities that enrich the economic landscape and 'Place'. This is aligned with additional Place Strategy Outcomes and the Sense of Place Plan.
R25	Failure to deliver finances associated to transformation programme.	4	4	16	Risk Rating Unchanged	Q3 - No Change - ongoing challenges with delivery of additional savings and income in current environment - budget being updated to reflect position

Title	Risk Description	Likelihood	Impact	Overall Risk Rating	Rating direction	Commentary	   
R5	Failure to deliver the required infrastructure to support development arising from the LDP	4	4	16	Risk Rating Unchanged	Q3 - The S106 Master Spreadsheet has been redone so it is more readable and manageable and is an effective way of monitoring commencements and completions of housing which then triggers contributions for required infrastructure delivery set out in the LDP. Awaiting final document from consultants on IDP Review (viability study is complete).	
R1	Failure to safeguard children and vulnerable adults	3	5	15	Risk Rating Unchanged	Q3 - An action plan has been formed and will be delivered during 2021. Interim updates will be taken to the PGA committee for oversight.	
R3	Failure to target services/influence partners effectively to support identified housing needs of increasing aging population	3	4	12	Risk Rating Unchanged	Q3 - Discussions on the purchase of development land is progressing well and appears to be on target. Housing have identified another property which could be repurposed with partners to provide supported accommodation for vulnerable people . Housing are seeking to partner with Eastern Community Homes which provides assistance with Rural Housing Schemes. This will help deliver local housing schemes fit for the local population	
R4	Failure to influence Community Safety partners to address the key areas of public concern (including rural crime) and the negative perception of crime	3	4	12	Risk Rating Unchanged	Q3 - The Council continues to work in partnership to address the main areas of public concern relating to crime and the fear of crime. No change.	

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Title	Risk Description	Likelihood	Impact	Overall Risk Rating	Rating direction	Commentary
R10	Failure to develop jobs to support the growing population	3	3	9	Risk Rating Unchanged	Q3 – Covid-19 still remains the dominant force on the economic landscape and the full impact and implications of pandemic and related restrictions continue to be unknown. With significant risks to existing businesses and jobs Impact has been increased. Data is starting to show the recent and current impact as very significant for the Maldon District businesses and future growth. The Covid-19 Economic Response and Recovery Plan remains in pace and actions are being progressed. Engagement with business groups continue to be a significant focus of work to support recovery. Work is progress on the Sense of Place Plan including engagement with strategic partners to develop initiatives and actions to ensure we support the creation of jobs for our growing population through investment and business growth.
R14	Unable to recruit and retain staff with specific skills sets in specialist areas to meet the demands of the service(i.e.) Planners	3	3	9	Risk Rating Unchanged	Q3 - Recruitment remains challenging especially in area of specialists and this has led to use of interim staff which are expensive compared to salaried staff due to Agency costs. The use of Market Supplements is being reviewed to see if this will attract candidates. The situation is kept under review by CLT and ELT
R11	Failure to protect personal or commercially sensitive data	2	4	8	Risk Rating Unchanged	Q3 - Recent audit of paper records contained two recommendations in relation to polices and awareness with managers. One has already been actioned the second is due for completion by May. This will improve managers awareness of their data protection roles and increase knowledge and reduce risk

Title	Risk Description	Likelihood	Impact	Overall Risk Rating	Rating direction	Commentary
R2	Failure to target services and influence partners with the aim of having an effective outcome on the identified (health and wellbeing) needs of the vulnerable population	2	4	8	Risk Rating Unchanged	Q3 - We are still at risk of not being able to target services where our most vulnerable residents are and what a priority is for them now until we receive post-COVID-19 data from PH and ECC bodies. It is difficult to draw conclusions on the full impact of what COVID-19 has had on our most vulnerable residents due to currently being in the 'third wave'. However, interpreting the data provided by Public Health Intelligence of Essex County Council it does suggest that our main focuses going forward will be on obesity, mental health and depression; areas that are already incorporated into the corporate plan. The Council continues to work in partnership with Maldon District CVS and partners to provide Clinically Extremely Vulnerable residents with the support they need to shield.
R23	Financial resource and process issues	2	4	8	Risk Rating Decreased	Q3 - All positions within finance have been filled with permanent staff. The 2019/20 accounts were successfully closed and audited. Internal audit recommendations have been/ are being implemented and no further audit reports have identified significant issues within finance. Challenges remain, but the risks are considered no more significant than other services and it is recommended this risk is now closed.
R29	Failure to deliver services as a result of COVID- 19	2	4	8	Risk Rating Unchanged	Q3 - The Council continues to adapt to the Covid -19 pandemic with greater emphasis in assisting the NHS and the residents of the district since the last update. Most services continue but restrictions on leisure activities for example have seen the re closure of the Leisure Centres following a partial lifting of restrictions late last year. A review of customer engagement is underway to ensure customers without ICT access are supported through telephone or personal contact. Staff continue to work remotely and the Offices in line with Government Guidance remain open only for essential activities.
R13	Failure to manage impact of organisational change	2	3	6	Risk Rating Unchanged	Q3 - No Change
R16	Corporate policies not managed and reviewed	2	2	4	Risk Rating Unchanged	Q3 - No Change



**REPORT of  
DIRECTOR OF STRATEGY, PERFORMANCE AND GOVERNANCE**

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**to  
PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE  
25 FEBRUARY 2021**

**REVIEW OF CORPORATE PERFORMANCE – QUARTER 3**

**1. PURPOSE OF THE REPORT**

- 1.1 The Corporate Performance framework requires this Committee to undertake a quarterly review of the Thematic Strategies performance, as assurance that performance is being managed effectively to achieve the corporate outcomes as set out in the Council's Corporate Plan 2019 - 2023, and for recommended changes and improvements to be reported to the Strategy and Resources Committee in February 2021. **APPENDIX 1** of this report provides an overview of performance as of the end of Quarter 3 (Q3) (October - December 2020).
- 1.2 Online versions are available to view on the Members' SharePoint site.

**2. RECOMMENDATIONS**

- (i) That Members review the information as set out in this report and **APPENDIX 1** with priority focus given to the Strategic Outcome level performance.
- (ii) That Members confirm they are assured through this review that corporate performance is being managed effectively.

**3. SUMMARY OF KEY ISSUES**

- 3.1 Following the agreement of the Corporate Plan and Thematic Strategies in 2019, key outcomes, activities and priority measures have been identified for monitoring at a corporate level. All measures and associated targets are therefore subject to change. This is to ensure the Council is monitoring and progressing the correct activity for the associated outcome.
- 3.2 Since the strategies were adopted however, the Council has had to respond to the local impacts of the Covid-19 pandemic. At all levels in the organisation, this resulted in redeployment and reprioritisation of resources to respond to the community's needs; many of which were not forecast to be priorities in 2019. This has already started to impact on some strategy short-term performance, however it is too early to identify medium-longer term impacts.

3.3 Any concerns affecting the corporate outcomes are set out in **APPENDIX 1** for the three Thematic Strategies. To summarise:

- **Community:** Overall the performance delivery is broadly on track, there are a few outcomes and activities which have been impacted by Covid-19 and a post vacancy due to be filled, however no actionable concerns are reportable for Q3.
- **Place:** Overall the performance delivery is mainly on-track, there are a few outcomes and activities that have been impacted by Covid-19, however no actionable concerns are reportable for Q3.
- **Prosperity:** Overall the performance delivery is broadly on track, however there are some outcomes and activities which have been impacted by Covid-19. The Outcome which shows initial concern in delivery is (A) Delivery of strategic employment sites in accordance with the Local Delivery Plan.

3.4 The following indicators have been annotated as 'At Risk' for Q3:

Community Thematic Strategy	<ul style="list-style-type: none"><li>• The number of intergenerational projects in the district</li><li>• Health drop-ins for older people's groups provided</li></ul>
Place Thematic Strategy	<ul style="list-style-type: none"><li>• Keeping Britain Tidy Green Flag Award (for well managed parks and open spaces).</li><li>• To monitor delivery of the agreed 2019 Maldon District Strategic Flood Projects and Maintenance Plan and maximise grant opportunities towards local coastal defences.</li></ul>
Prosperity Thematic Strategy	<ul style="list-style-type: none"><li>• None annotated 'At Risk'</li></ul>

## 4. CONCLUSION

4.1 Most of the reported performance measures at Q3 were illustrating a positive direction of travel despite resource re-direction due to Covid-19. Where hindrances and data gaps are being experienced, solutions will be explored by officers to enable work to progress towards achieving the Corporate Plan outcomes.

## 5. IMPACT ON STRATEGIC THEMES

5.1 It is important that performance is monitored and managed effectively, to ensure that Maldon District Council progresses towards and/ or achieves its stated outcomes.

## 6. IMPLICATIONS

- (i) **Impact on Customers** – Performance management covers the monitoring of corporate outcomes. The Corporate Plan includes delivery for our customers.
- (ii) **Impact on Equalities** – None.
- (iii) **Impact on Risk** – If performance is not managed effectively by the Council, it puts the Council's corporate outcomes' delivery at risk and increases unnecessary exposure to potential, operational, reputational or regulatory consequences.
- (iv) **Impact on Resources (financial)** – All performance management is undertaken within existing planned budgets.
- (v) **Impact on Resources (human)** – All performance management is undertaken within existing planned budgets.
- (vi) **Impact on the Environment** – None.
- (vii) **Impact on Strengthening Communities** – None.

Background Papers: None.

Enquiries to: Paul Dodson, Director of Strategy, Performance and Governance.

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# Corporate Performance Report Q3 – Appendix 1

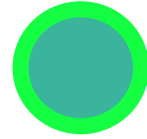
25<sup>th</sup> February 2021



# Appendix Context

- The following slides detail the performance of each corporate outcome, supported by the individual measures agreed in the Thematic Strategies
- An overhaul of the performance measures reported has taken place, to ensure that we are only reporting performance related to the corporate plan
- Focus should begin at the outcome level summary, which leads to individual indicator level detail if required.
- The narrative against each outcome indicates if the measures are illustrating the correct direction of travel.
- Where challenges or concerns have impacted the outcomes performance, this will be highlighted in the outcome summary, along with any supporting action if required.

# Visual Key

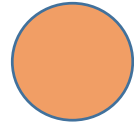


On Track or On Track – All Elements

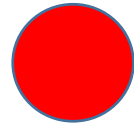


On Track – Conditional Elements

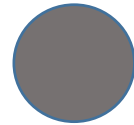
\*Note: Conditional elements of `On Track` meaning: not all data received due to frequency, or progress happening but awaiting data conformation\*



Under Review









At Risk



Not Started

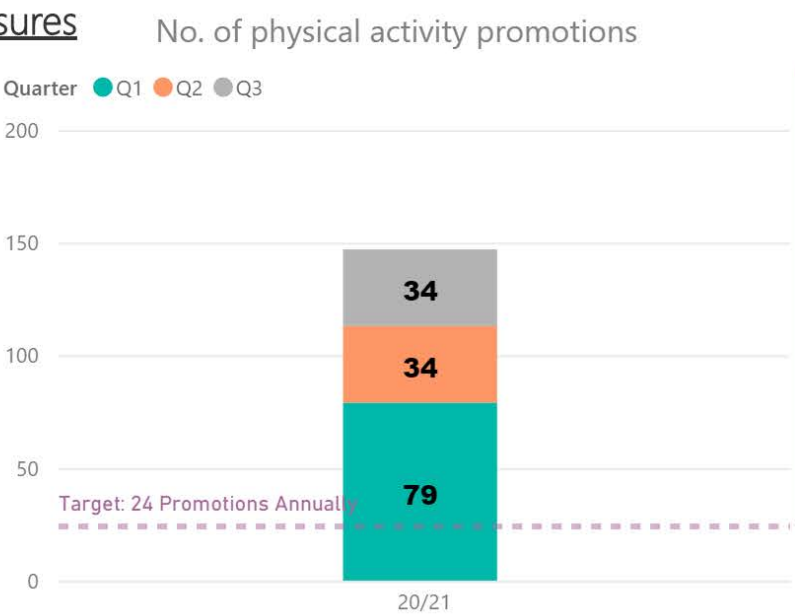
# Community Strategic Performance

## Community Outcomes

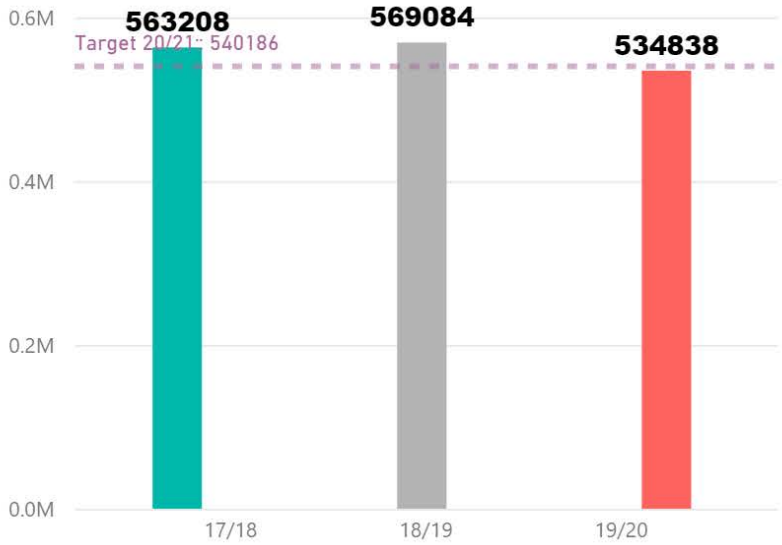
Reference	Title	Status	Commentary
A 	Working with communities and partners to support our health and wellbeing priorities: Obesity	Ontrack - Conditional Elements	Q3 - The target to increase weight management provision in the District will need to be reviewed. There is still no ambition from the commissioner at ECC to increase the number of sessions in the District. We have continued to surpass our annual target of 24 physical activity promotions. We have worked with our partners throughout the pandemic to interact and engage with our residents virtually, and promote physical activity and wellbeing through local, regional and national campaigns.
B 	Working with communities and partners to support our health and wellbeing priorities: Mental Health	Ontrack - Conditional Elements	Q3 - Due to COVID-19 work has been put on hold which would ensure progression towards the outcome. Throughout the pandemic there has been a huge amount of collaboration with partners to insure we have supported our residents mental health.
C 	Working with communities and partners to support our health and wellbeing priorities: Social Isolation & Loneliness	Ontrack - Conditional Elements	Q3- We have continued to exceed our target for promoting social isolation initiatives. Partnership working with the CVS has been sustained during this time to tackle social isolation and loneliness. Shielding measures have been implement and we have continued to work with our local partners to support our residents.
D 	Working with communities and partners to support our health and wellbeing priorities: Older peoples health	Under Review	Q3- Maldon District Dementia Alliance is currently working to populate an action plan to take forward, MDC continues to be an active member of the group. 6 Members and 1 Director received Dementia Friends Training by the Alzheimer's Society.
E 	Partnership working to safeguard vulnerable adults, children & families	Ontrack - Conditional Elements	Q3- Work towards this corporate outcome continues to perform and progress
F 	Effective engagement to support strong and resilient communities	Ontrack - Conditional Elements	Q3- Some of the work to support this outcome has been put on hold through COVID-19. ABCF has not been operating throughout this time. However, we have surpassed our targets for the number of engagements with Parish and Town Councils. A large majority of the COVID work which has been carried out will have supported the corporate outcome.

Community Performance Measures

A) Obesity

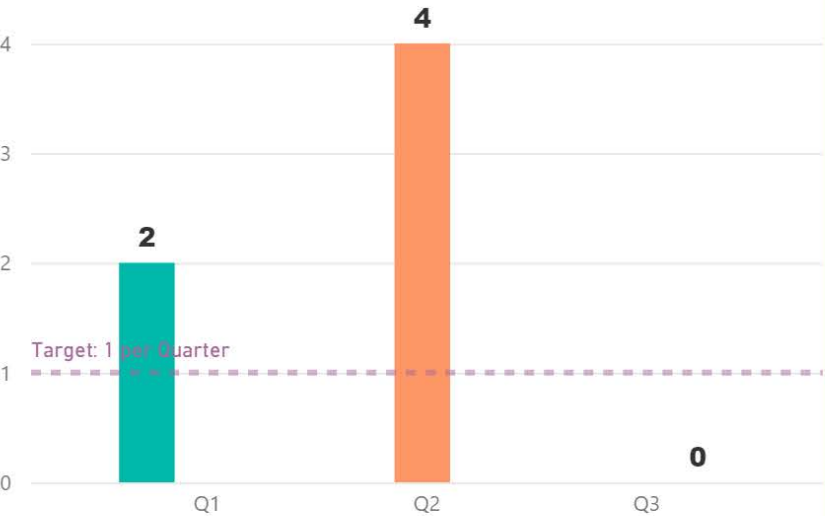


Participation at Maldon leisure centres



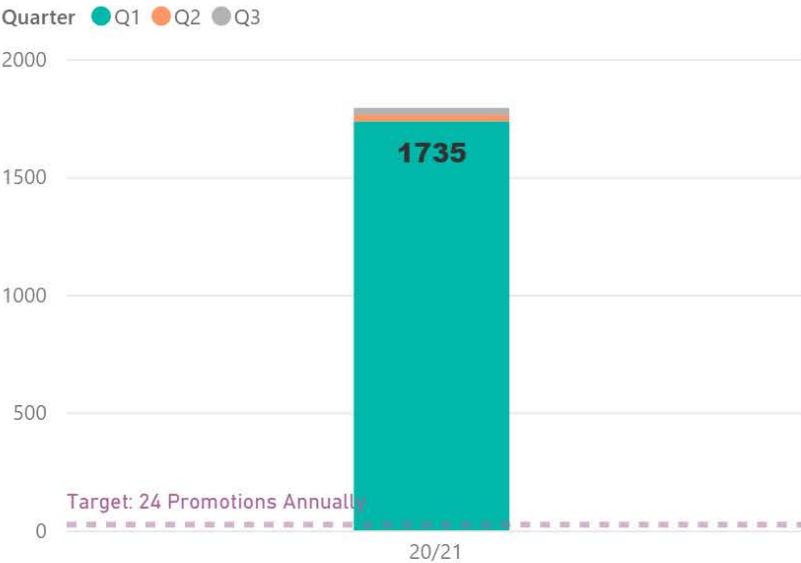
Page 49  
B) Mental Health

Targeted MAC\* (Multi Agency Centres) supporting vulnerable residents



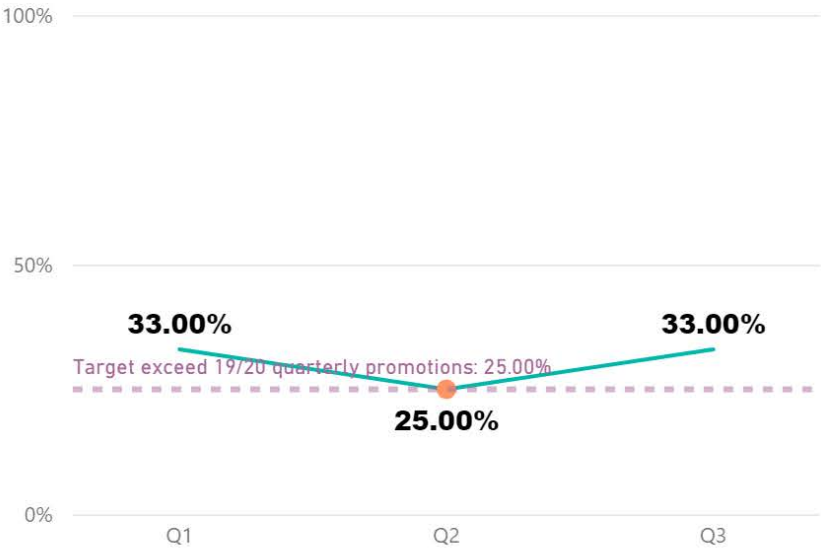
C) Social Isolation/Loneliness

Promotion of social isolation initiatives



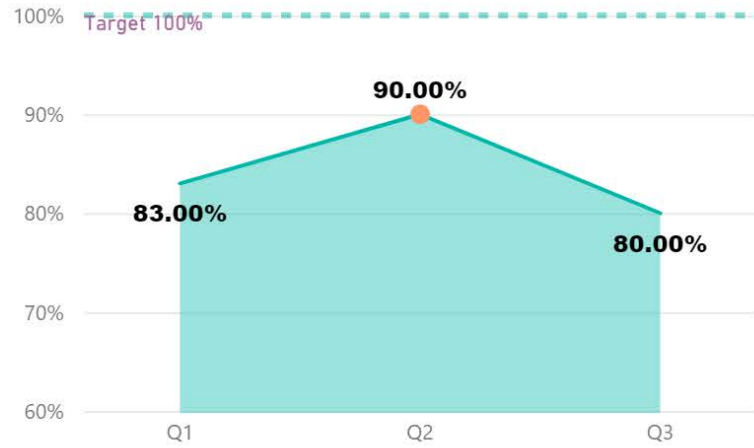
D) Older Health

% of known Maldon District dementia friendly groups/ services promoted

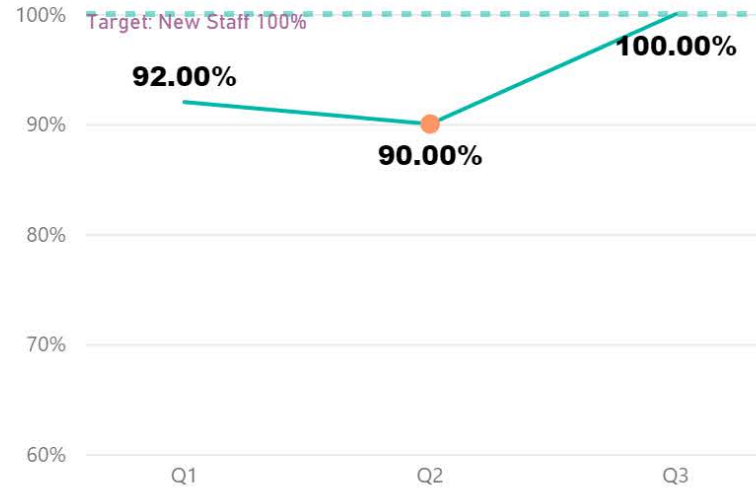


## E) Partnership working to safeguard

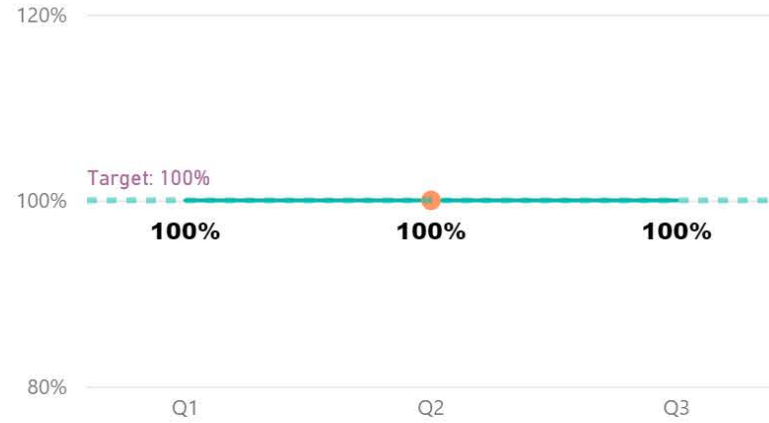
% of customer facing staff who have received MECC\* training



Staff completion of e-learning modules on Safeguarding and GDPR



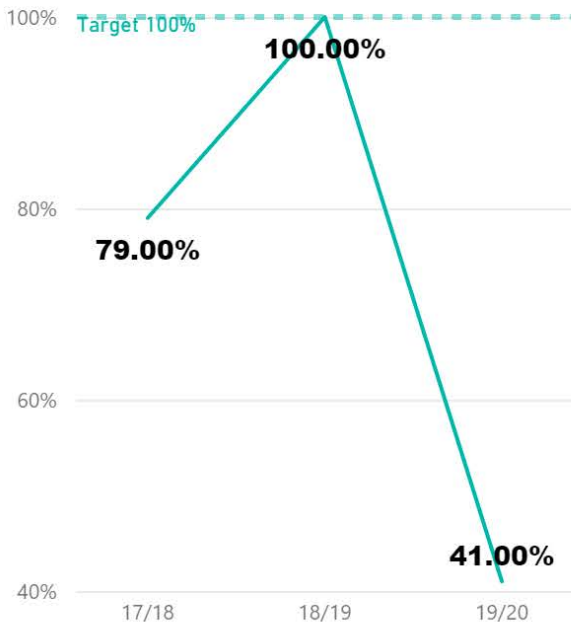
% of safeguarding cases are dealt with in accordance of Southend, Essex and Thurrock (SET) guidelines for adults and children



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## F) Community Engagement

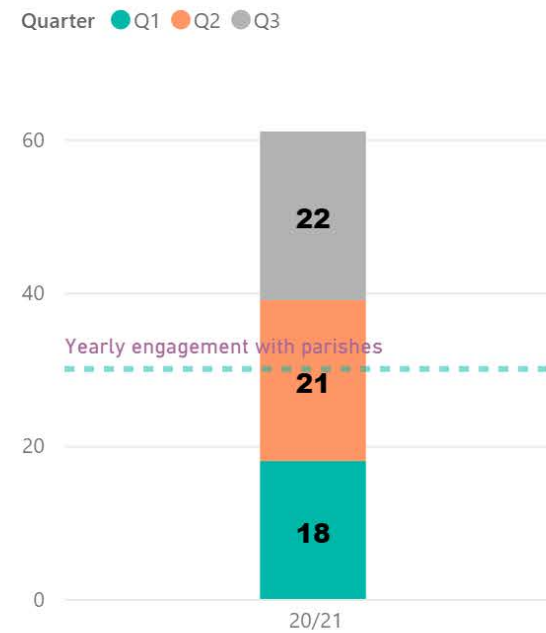
Annual Better Care Fund spend



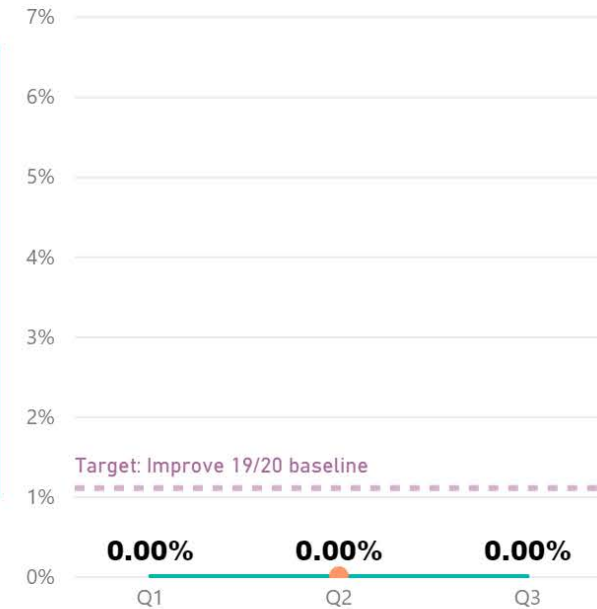
Customer evaluation survey (MDC) – private sector housing grants/ loans









No. of Parish and Town Council engagements by Community team



MDC assistance to use digital service/ payment at Council Offices













## Community Supporting Plans

Supportive Outcome	Community Actions Plans	Status	Highlights/Low Lights	Target
A) Support health and wellbeing priority: Obesity	Campaign delivery for physical activity	Target Met 	Q3 - We have continued to surpass our annual targets of 24 physical activity promotions. Throughout the pandemic, we have worked with our partners to interact and engage with our residents online through promotions of local, regional and national campaigns. We have also shared links with our residents via our COVID-19 Community Pack to promote physical activity and wellbeing.	2 Campaigns per year
A) Support health and wellbeing priority: Obesity	Parishes covered by community weight management sessions	Under Review 	Q3 - The target to increase weight management provision in the District will need to be reviewed. There is still no ambition from the commissioner at ECC to increase the number of sessions in the District.	Support existing weight management sessions
B) Support health and wellbeing priority: Mental Health	Primary Schools supported by MDC Y6 transition template	On Track 	Q3 - There was a children's board meeting with Essex County Council in November, where MDC and partners delivered a presentation on the use and findings of the transition template. We are still awaiting to see if the transition template will be adopted across Mid-Essex.	To onboard 2 new schools per year
C) Support health and wellbeing priority: Social isolation/loneliness	Campaign delivery for social isolation	Target Met 	Q3 - We have continued to exceed our target for promoting social isolation initiatives. We have been working in partnership with our partners to tackle social isolation and loneliness. Since the shielding measures have been implemented we have offered support and guidance through our COVID-19 Community Pack and via our social media channels.	1 Campaign per year
C) Support health and wellbeing priority: Social isolation/loneliness	The number of intergenerational projects in the District	At Risk 	Q3 - The data is unavailable due to the post not being filled. Casting an eye towards the future we could potentially look to take intergenerational projects virtually.	1 new school participating in intergenerational projects per year
D) Support health and wellbeing priority: Older people's health	Health drop-ins for older people's groups provided	At Risk 	Q3 - Due to COVID-19 measures this has been put on hold.	To increase older health drop in sessions, 1 per quarter



# Place Strategic Performance

## Place Outcomes

Reference	Title	Status	Commentary
A 	A clean and tidy District	Ontrack - Conditional Elements	Q3 - Decrease in flytipping probably due to Tier restrictions and lockdown on travel. Clean up on target. No concerns for Q4.
B 	Reduced Household waste	Ontrack - Conditional Elements	Q3 - Increase in recycling to exceed target and decrease in residual waste to exceed target substantially for Q3. On track for Q4.
C 	Our open spaces maintained for the enjoyment of all	On hold	Q3 - Volunteering activity recommenced in Q3 but affected again by Tier and Lockdown restrictions implemented. End of year target will be affected. Management Plans on hold.
D 	Improved air quality	Ontrack - Conditional Elements	Q3 - Action Plan completed. AQMA Action Plan measures progressing and continue to be aligned with High St recovery, CAMP High St improvements and sustainable modes of transport considerations.
E 	Partnership working to protect our countryside and coastline	Ontrack - Conditional Elements	Q3 - Progress continues despite difficult times. On track.
F 	Sound and tested environmentally friendly initiatives delivered	Ontrack - Conditional Elements	Q3 - Environmental campaigns continue to be Covid-19 focussed. Climate Change Statement prepared.
G 	A five -year housing land supply maintained	Under review	Q3 - HDT passed at 121% for 2020. 5YHLS not maintained (4.9 years).
H 	Strategic sites delivered in accordance with the Local Development Plan bought forward	Under review	Q3 - Strategic site delivery behind in relation to LDP housing trajectory. LDP Review a probability.
I 	Affordable housing targets in the Local Development Plan achieved	Ontrack - Conditional Elements	Q3 - On track to meet 20/21 target.
J 	Section 106 planning agreements are effectively discharged	Ontrack - Conditional Elements	Q3 - s106 monitoring and reconciliation progressing.

# Place Strategic Performance

## Place Outcomes

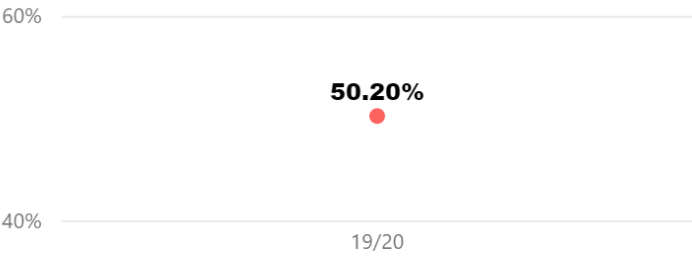
Reference	Title	Status	Commentary
K	 Partnerships are developed to maintain coastal defences	Ontrack - Conditional Elements	Q3 - Dialogue continues with flood risk partners. Flood projects continue or are under review.
L	 Improved access to Superfast Broadband across the District	Ontrack - Conditional Elements	Q3 - On track and progressing.

Place Performance Measures

A) Clean and Tidy District

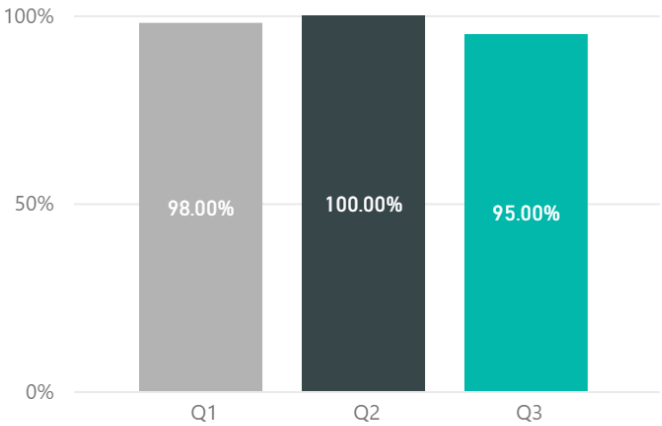
Public satisfaction to cleanliness & tidiness of the District

Target: Improve baseline



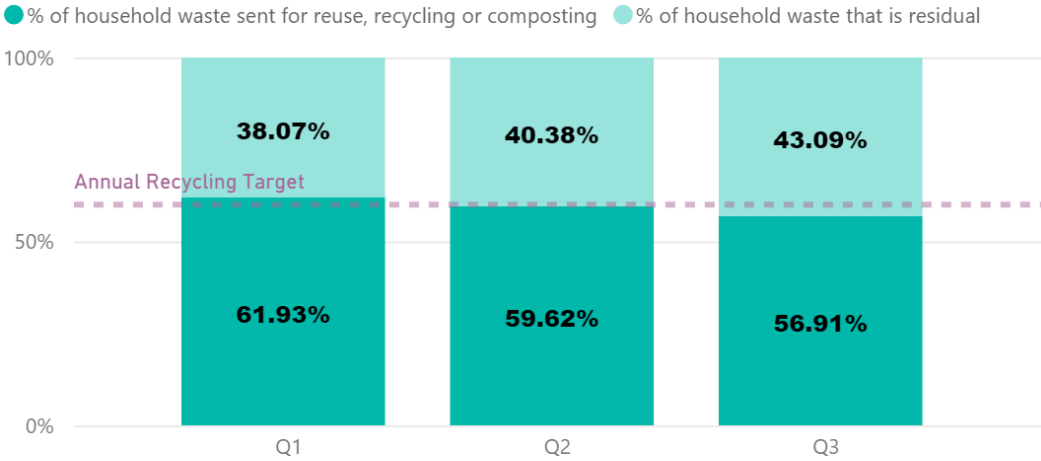
% Fly Tips Removed within 24hrs & No of fly tipping incidents

No of incid... 92 116 204 Target: 95%



B) Household Waste Reduction

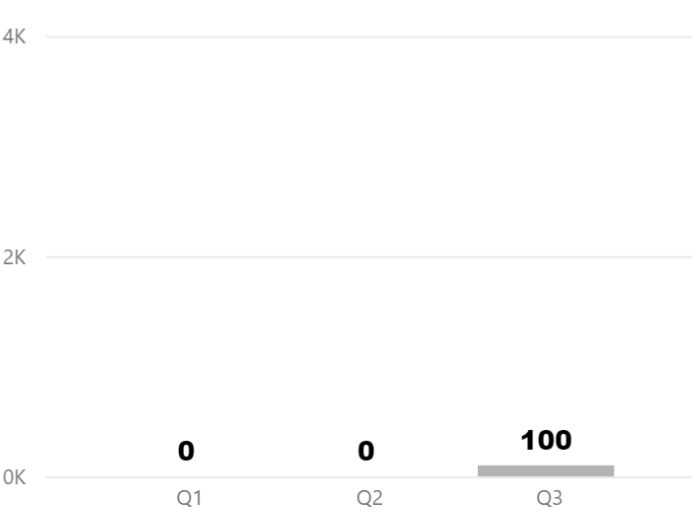
Residual Waste V Recycled Waste



C) Open Spaces

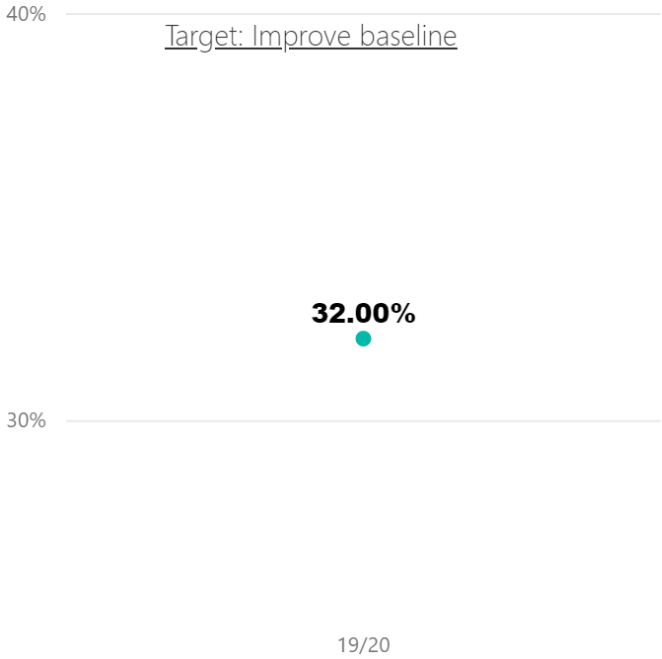
Local volunteering activity facilitated/organised by MDC(Hrs)

Annual Target: 5000



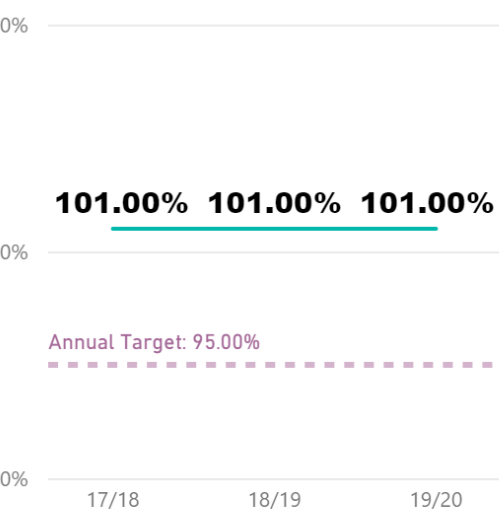
Public satisfaction to Flagship open spaces

Target: Improve baseline



G) Housing Land Supply

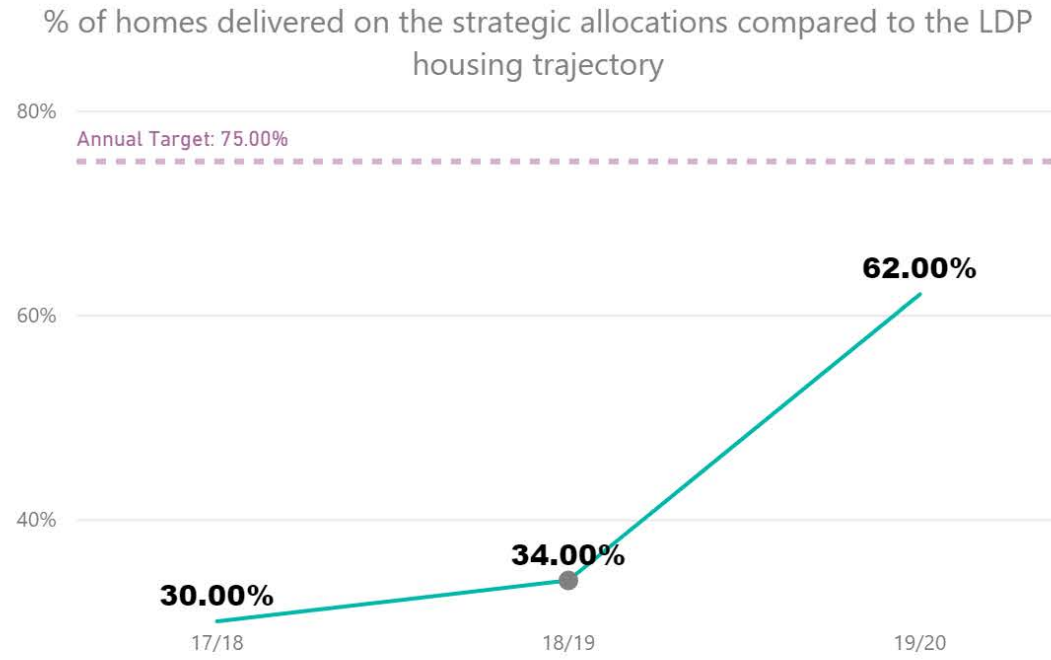
Housing Delivery Test (HDT\*) result



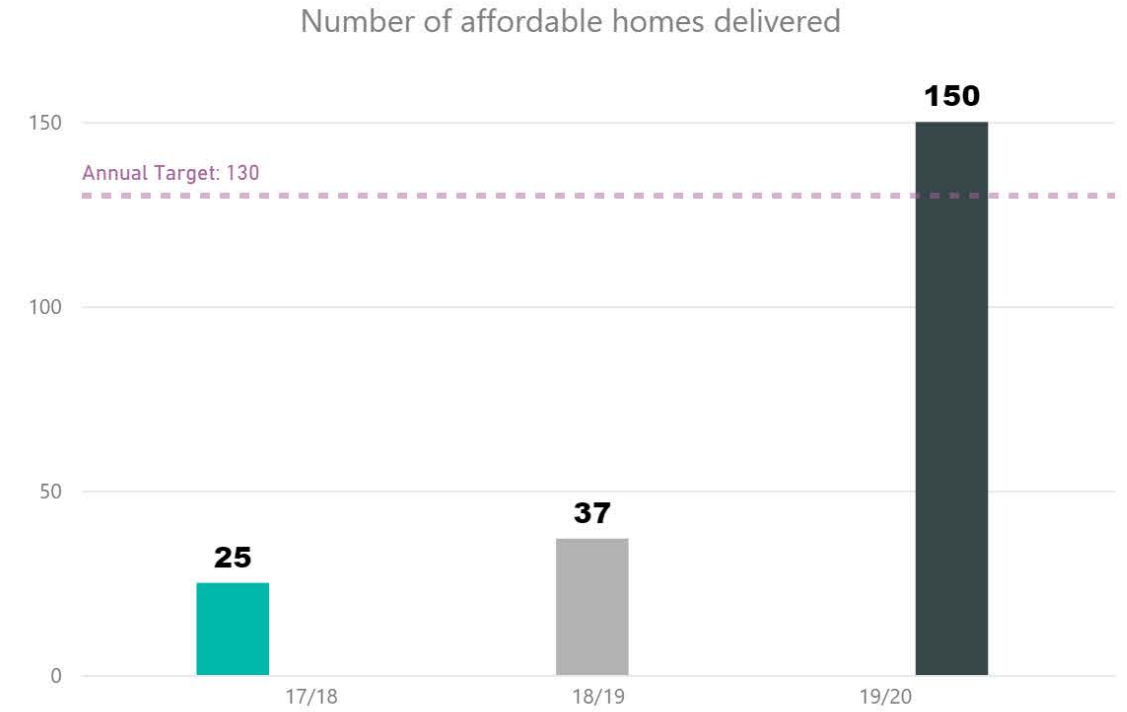
5Yr housing land supply








## H) Strategic Site Developement








## I) Affordable Homes



## Place supporting plans





Supportive Outcome	Place Actions Plans	Status	Highlights/Low Lights	Target
C) Maintaining open spaces	Keep Britain Tidy 'Green Flag' award (well managed parks and open spaces)	At Risk 	Q3 - Service priority on Covid-19 and BAU. Green Flag requires Management Plans for sites to be submitted to award scheme, no candidate sites have up to date Plans that can be submitted for the 21/22 'round' of awards.	Two applications submitted
C) Maintaining open spaces	Progress implementation of the Green Infrastructure Strategy [GINS] findings / projects - adopted by Council May 2019	On Track 	Q3 - As per Q2 linking GI Projects with other strategic plans (e.g CAMP, BrB etc.) Q2 - GI projects being linked to CAMP, BrB and Health & Wellbeing projects. Proposed meeting with National Trust has not taken place due to ongoing Covid-19 (and particularly wide-ranging impacts on BAU and NT/Charity sector as a whole) Greenways/ex-railway related projects slowly developing, particularly around "re-use your railway" funding bid in relation to the Blackwater Rail Trail (ex- Maldon to Witham LNER line)	Progress priority approach to Green Infrastructure project delivery, with the support of Infrastructure Delivery Plan(IDP review/CIL funding)
C) Improved air quality	Development of AQMA Action Plan	Target Met 	Q3 - The Air Quality Action Plan public consultation has been completed. Work has now moved to delivery of the various schemes. The main scheme which has progressed slowly is the intention to create a one way system for Market Hill. Work on this is dependant on a traffic flow assessment which ECC need to carry out. However, this can only be done when traffic levels are typical and thus work is in abeyance. Public communications regarding the project has been sent to Market Hill as per Councillors request	Council adoption in 2020
D) Improved air quality	Implementation of AQMA Action Plan measures	On Track 	Q3 - There are various schemes within the AQMA. these are all at various stages of completion. Therefore this is called as AQMA work as being on track.	Implemented in accordance with agreed action plan time table.
E) Protect our countryside and coastline	Development of a Blackwater Nature Conservation Strategy	On Track 	Q3 - As per Q2; November partnership meeting took place. Natural England have brought forward an 'Opportunity Mapping' project to take place around the Blackwater, in conjunction with key partners, to be discussed January 2021. general impacts of Covid on partner organisations & staff (i.e. furloughing) has meant BAU has been a priority, however has also highlighted the benefit of this overarching Partnership development in achieving progress in difficult times.	TBC

## Place supporting plans

Supportive Outcome	Place Actions Plans	Status	Highlights/Low Lights	Target
F) Environmental Initiatives	Successfully deliver promotional campaigns to support a sustainable Place	On Track 	Q3 - Covid-19 has continued to dominate our Communications activity. we have managed to deliver and support a wide range of National and Local campaigns using our social media channels and website, some of which are Covid-19 ongoing activity. However, we have continued to support neighbourhood plans, waste promotions, community safety comms and general digital comms	Deliver three campaigns annually
H) Strategic sites development	Infrastructure delivered in relation to the strategic allocations in accordance with Policy S3 and S4 and the negotiated and signed S.106 agreements	Under Review 	Q3 - Despite curtailed site visiting arrangements and the furlough of key contact staff on the developers side, there is continuing evidence of the completion of infrastructure being delivered by the key strategic sites as part of development. Returns from Essex County Council and our own visits indicate that the major sites have delivered their on site provision in accordance with approved plans and their s106 agreements. Other more major packages of infrastructure such as the South Maldon Relief Road which require the pooling of funds from several sites have been disrupted as the ""trigger"" points for some developer payments have not been achieved - this being dependent on build out rates that have been slowed by the pandemic working arrangements. As the period for the collection of funding is being extended by agreement (and the funding is not ""lost"" to the system - i.e. it has not being collected yet) delivery is not considered to be at risk at this stage. For this reason progress is categorised as under review.	Delivery in accordance with the Infrastructure Delivery Plan
J) Section 106 planning agreements effectively discharged	All s106's are monitored in accordance with the signed legal agreement	On Track 	Q3 - A reconciliation project has been completed to update the s106 record for end of Q3 - all clauses are under review and the monitoring officer is working with developers to ensure no delays in draw down of funds or delivery of expected facilities.	100% implementation
K) Maintaining coastal defences	To monitor delivery of the agreed 2019 Maldon District Strategic Flood Projects and Maintenance Partnership Plan and maximise grant opportunities towards local coastal defences.	Under Review 	Q3 - Flood projects continue to be monitored by MDC. An officer has re-joined on a p/t temporary basis and is able to assist in the monitoring of the delivery of the various projects. Resource issues have contributed to the downturn in monitoring. We are due to engage with ECC to check progress on The Causeway projects and look at what works remain outstanding.	80% of works/maintenance projects put forward annually are completed in accordance with the project timescales
L) Improved access to Superfast Broadband	To work with Partners to accelerate and maximise the rollout of Superfast Broadband across premises in the District.	On Track 	Q3 - Delivery progressing within the District. As at 3 December 2020 the Superfast Essex Broadband Steering Group reported 98.7% premises reached as planned in the District.	99% superfast broadband coverage by December 2021.


# Prosperity Strategic Performance

## Prosperity Outcomes

Reference	Title	Status	Commentary
A	 Delivery of strategic employment sites in accordance with the Local Development Plan	At Risk	Q3 - Delivery has been delayed as resources have been diverted to the Covid response. The future of inward investment work by ECC remains unclear but enquires have been dealt with on a case by case basis. However, work has now been scoped for the development of a Maldon District Investment Prospectus encouraging new investment in the Maldon District, aligned with local strategic plans and the District's approved Local Development Plan for employment land sites. Supporting commercial opportunities that enrich the economic landscape and 'Place'. This is aligned with additional Place Strategy Outcomes and the Sense of Place Plan. The outcome remains 'At Risk' owing to existing delays, covid and limited plans from ECC.
B	 Partnership working to provide an Enterprise Centre	Under Review	Q3 - Outcome remains under review in line with Corporate Plan review and covid recovery planning.
C	 Rural business and diversification supported	On Track - Conditional Elements	Q3 - Activity remains on hold as resources have been diverted to the Covid response. However, work has now been scoped for the development of a Maldon District Business Network. Establishment of a business network and partnership with rural businesses which will develop and deliver a strategy to support rural business growth, diversification and enabling local businesses to benefit from future opportunities and trends. This includes supporting local business to access the Bradwell B supply chain to support the construction of the new power station at Bradwell. This is aligned with the Sense of Place Plan.
D	 Tourism supported and encouraged	On Track - Conditional Elements	Q3 - While 'normal' promotional activity is again on hold owing to response to COVID19, The tourism team have established the Maldon District Tourism Group on social media and progressed targeted campaigns intended to inform and enable residents to enjoy local open spaces. Funding has been secured from DCMS/Lottery for the employment of a Heritage and Culture recovery Coordinator to specifically support this sector.

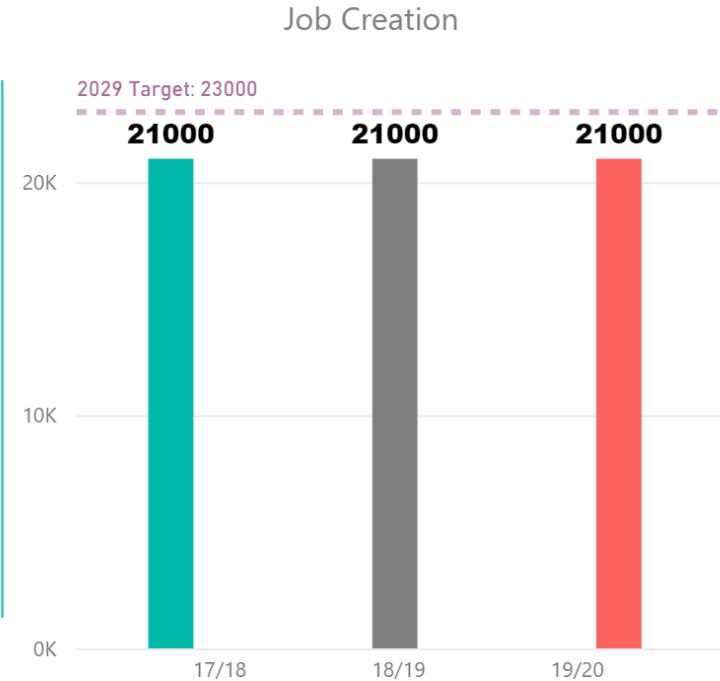
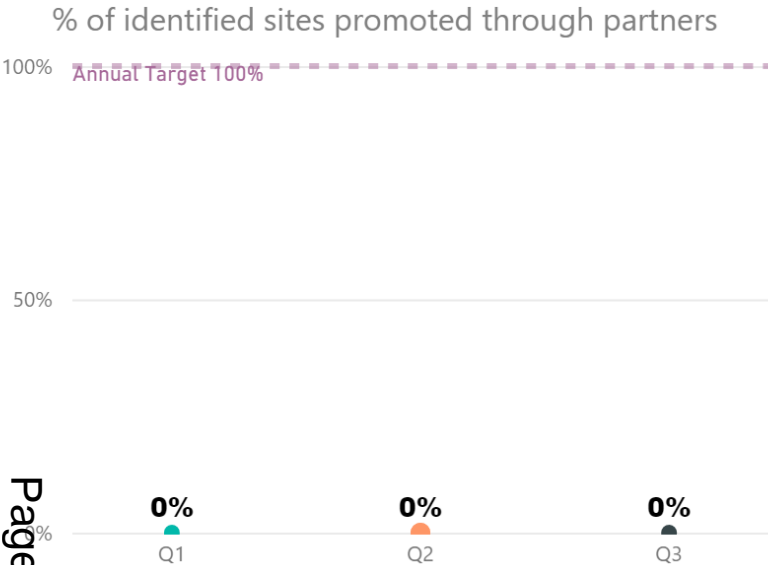
# Prosperity Strategic Performance

## Prosperity Outcomes

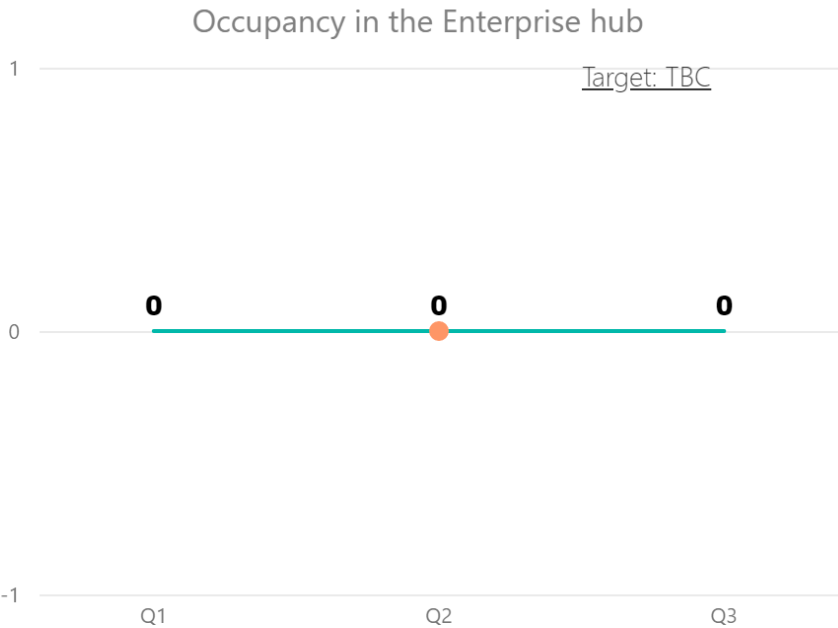
Reference	Title	Status	Commentary
E	 Efficient and effective engagement with businesses	On Track - Conditional Elements	Q3 - The Maldon Business Board and Sense of Place have been critical in steering and supporting the Covid recovery. Work is once again underway to develop the Maldon District Business Network via linked groups and social media. Progress has been slowed by Covid but will continue and will support economic recovery and transformation. Work is progressing with strategic and key partners, and business groups.

Prosperity performance measures

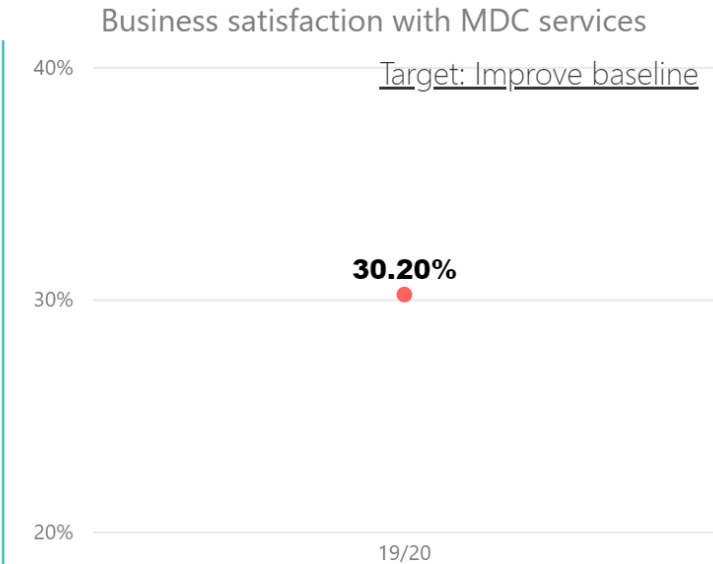
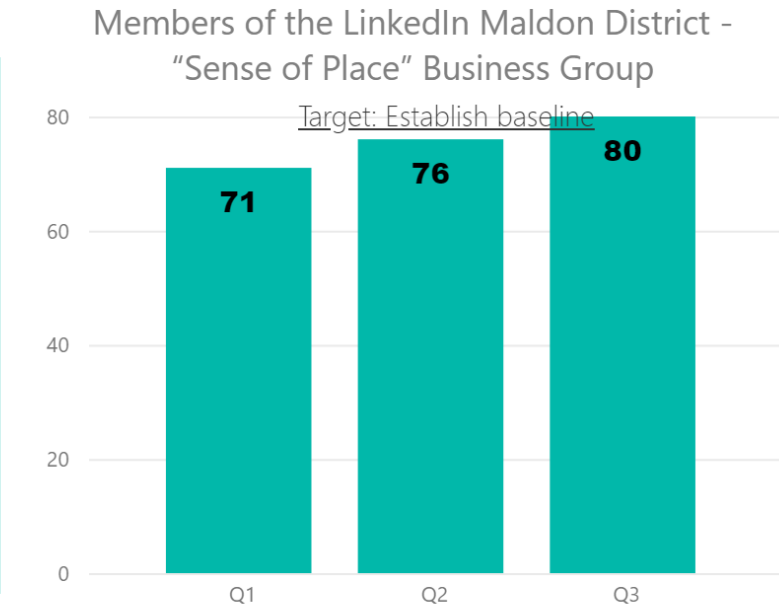
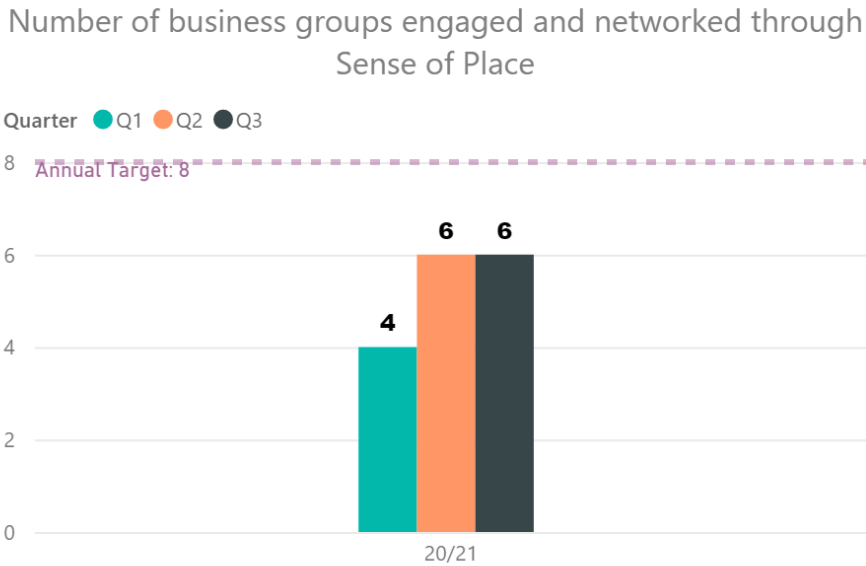
A) Delivery of strategic employments sites



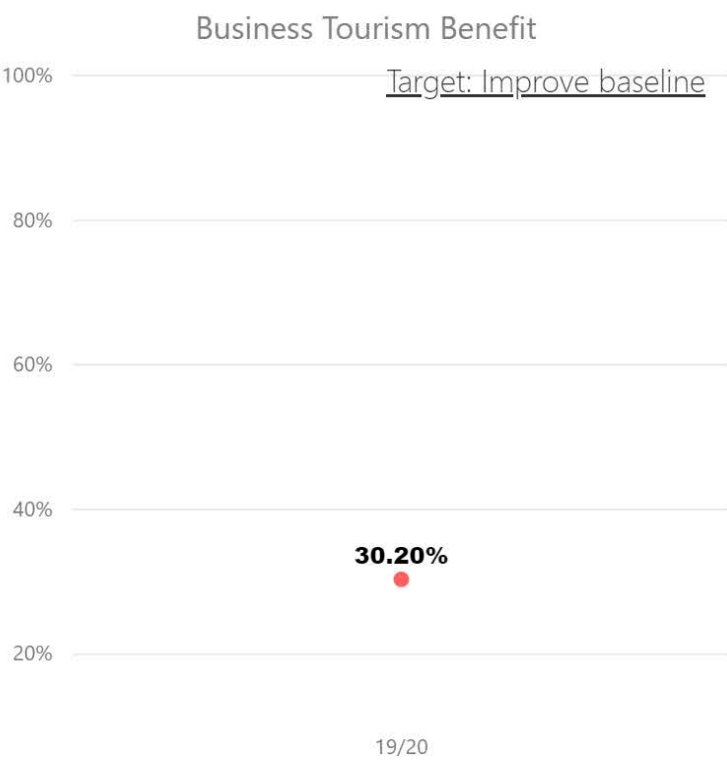
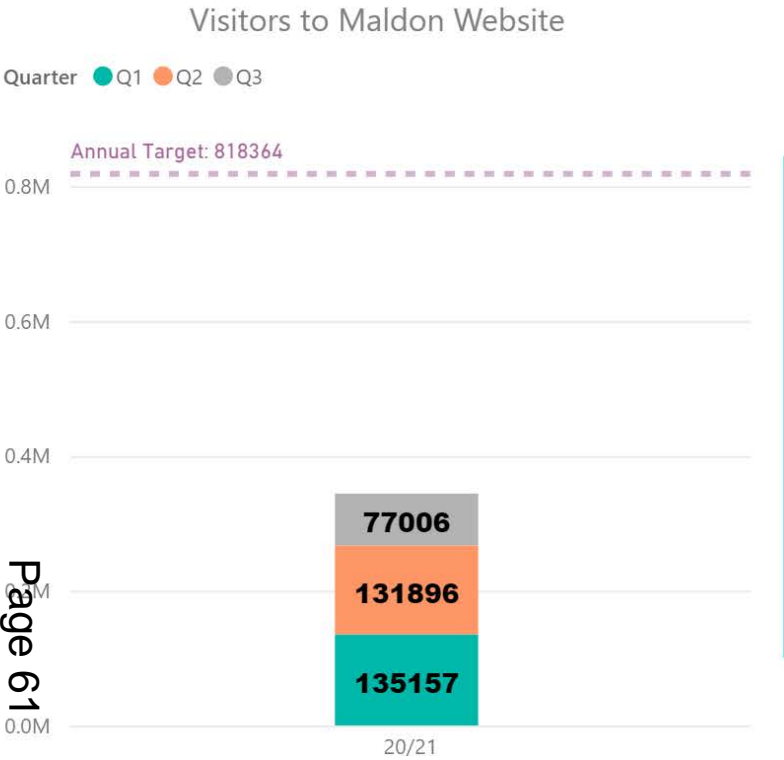
B) Partnership working to provide an Enterprise Centre








E) Efficient & Effective engagement with Businesses

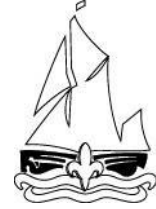


D) Tourism supported and encouraged



## Prosperity supporting plans

Supportive Outcome	Prosperity Actions Plans	Status	Highlights/Low Lights	Targets
B) Partnership working to provide an Enterprise Centre	Deliver Enterprise Centre	Not Started 	Q3 - Currently there are no resources allocated to the delivery of this project	Enterprise Centre delivered by 2025
B) Partnership working to provide an Enterprise Centre	Deliver Enterprise Hub based in Maldon District Council's building	Not Started 	Q3 - Due to COVID all planning for this is currently on hold	Enterprise Hub delivered by 2020
C) Rural and coastal business supported	Bradwell B project	On Track 	Q3 - Socio Economic work streams remain underway with BRB/Quod with Baselining coming to a conclusion. MDC has commissioned a District Economic Study and Housing Needs Study. Other areas have been identified for additional study including Tourism Accommodation and the District "Sense of Place".	Engagement with BRB through the Bradwell B Development Consent Order process
C) Rural and coastal business supported	Establish Maldon Rural Business Growth Strategy	On Track 	Q3 - Activity remains on hold as resources have been diverted to the Covid response. However, work has now been scoped for the development of a Maldon District Business Network Establishment of a business network and partnership with rural businesses which will develop and deliver a strategy to support rural business growth, diversification and enabling local businesses to benefit from future opportunities and trends. This includes supporting local business to access the Bradwell B supply chain to support the construction of the new power station at Bradwell. This is aligned with the Sense of Place Plan	Contractual SoP Objectives met
D) Tourism supported & encouraged	Digital Tourism campaigns delivered	Under Review 	Q3 - The team have developed or participated in a number of Tourism campaigns over the last quarter despite the ongoing restrictions of Covid and these have included supporting the stay local and emerging staycation. Since the lockdown our campaigns have paused and we are reviewing content for when the lockdown is eased.	5 Campaigns annually



## REPORT of DIRECTOR OF SERVICE DELIVERY

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to  
PERFORMANCE, GOVERNANCE AND AUDIT COMMITTEE  
25 FEBRUARY 2021

### HEALTH AND SAFETY UPDATE - QUARTER 3

#### 1. PURPOSE OF THE REPORT

- 1.1 To provide an update on health and safety statistics and activity during quarter 3 (October 2020 to 31 December 2020).

#### 2. RECOMMENDATIONS

- (i) To note the accident and incident statistics;
- (ii) To note the health and safety activity for quarter 3.

#### 3. SUMMARY OF KEY ISSUES

- 3.1 There were two accidents during this quarter: one involving a member of staff within the Parks team slipping on an access ramp - remedial work done to prevent further slips; and one involving staff whilst setting off the maroon firing to mark the start of the 2-minute silence on 5 November 2020 – an accident investigation was undertaken to find out what went wrong.
- 3.2 There were two incidents of unacceptable behaviour: these were in waste and both were followed up in line with the Council's procedures.
- 3.3 In October 2020, an Inspector from the Health and Safety Executive (HSE) raised his concerns about the management of hand arm vibration (HAVS) risks for the Parks Team. The Inspector required the following actions to be taken within the specified timescales – the action taken by the Council to date is highlighted in **bold type**.

##### Action Required & Timescales:

- 1. Confirmation that health surveillance for HAVS is (or will be) completed annually – by 21 October 2020. **Health surveillance is now being undertaken annually for staff who are exposed to this risk (this was being undertaken but only biennially).**
- 2. Complete exposure calculations for individual employees or job roles (if exposure will be identical), taking into account multiple tools, representative vibration magnitude data and accurate estimations of trigger times (the HSE Vibration Calculator and 'Sources of Vibration Magnitude Data' document will assist with

this) – by 28 October 2020. **Specific measurements of equipment that may expose employees to risk was undertaken by an external company in December 2020 – awaiting results.**

3. Write a suitable and sufficient risk assessment in line with the guidance in L140 (Guidance on Vibration Regulations) – by 28 October 2020. **A risk assessment was drafted and submitted to the HSE inspector.**
  4. Undertake suitable training for operatives, supervisors, managers and others involved in the management of HAVS – by 5 November 2020. **This training was undertaken by staff in December 2020.**
  5. Draft a comprehensive and encompassing HAVS policy including details of how HAVS will be controlled, monitored, supervised, managed and reviewed – to be confirmed following action taken above. **A draft policy has been drafted, but awaiting stakeholder feedback, including the results from the external company relating to machine measurements.** Once the draft policy has been finalised, it will be brought before Members for approval.
- 3.4 Progress with the Health and Safety Action Plan for 2020-21 has been identified in **APPENDIX 1**. Although there has been limited progress on the original action plan, other health and safety work has been undertaken where a need has been identified, e.g.: -
- evolving COVID risk assessments based on updated government guidance;
  - work on HAVS as outlined in section 3.3 above; and
  - additional Institute of Operational Safety and Health (IOSH) Working Safely training.

## **4. CONCLUSION**

- 4.1 There were very few accidents or incidents during quarter 3.
- 4.2 As a result of Covid demands there has been little proactive work on the health and safety action plan, however, first aid training has been progressed.
- 4.3 Other areas that were not identified on the health and safety action plan have received attention, e.g. Covid 19, HAVS and additional safety training.

## **5. IMPACT ON STRATEGIC THEMES**

- 5.1 Managing health and safety well helps protect the workforce and wider community who may be affected by the Council's activities ensuring that communities stay safe and healthy.

## **6. IMPLICATIONS**

- (i) **Impact on Customers** – Good health and safety management reduces the number of accidents and injuries to both customers and employees alike.

Reduced staff absence resulting from work related injuries or ill health ensures a better service is provided to customers.

- (ii) **Impact on Equalities** – None
- (iii) **Impact on Risk** – Poor management of health and safety can lead to accidents, injuries, occupational ill health or dangerous occurrences. This may result in avoidable sickness absence and these incidents may be investigated by the Health and Safety Executive (HSE). This could result in prosecution with fines or custodial sentences and an award of costs if found guilty by the courts. In addition, the HSE has adopted a “Fee for Fault” policy in which it recharges the cost of investigations if liability is identified. Civil claims by individuals could lead to significant pay outs which in turn could lead to increased insurance premiums. It can also lead to poor publicity, reputational damage and impacts on staff morale.
- (iv) **Impact on Resources (financial)** – No additional resources required, however, by managing health and safety, there should be less impact on financial resources as identified in (iii) above.
- (v) **Impact of Resources (human)** – No additional resources are required, however, by preventing accidents and ill health, there should be less impact on human resources.
- (vi) **Impact on the Environment** – Good health and safety management of the workplace, for example, management of asbestos and legionella, helps provide a safer and healthier environment in which to live and work.
- (vii) **Impact on Strengthening Communities** - None

Background Papers: accident and incident reports (data protected)

Enquiries to: Gill Gibson, [gill.gibson@maldon.gov.uk](mailto:gill.gibson@maldon.gov.uk)

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## HEALTH AND SAFETY ACTION PLAN 2020-21

Subject	Action Required	Timescale
Health and Safety Arrangements	<p>To review all the corporate health and safety procedures falling due during 2020-21, ensuring they are relevant to the structure following transition, and to update the health and safety policy</p> <p><b>Hand arm vibration policy drafted / awaiting stakeholder input.</b></p>	<p>March 2021</p> <p><b>Drafted December 2020 / January 2021</b></p>
Risk Assessments	<p>To update and amend risk assessments for service delivery, ensuring they reflect the new organisational structure: -</p> <ul style="list-style-type: none"> <li>• Priority to be given to the Parks Team due to the high level of risk and outdated procedures, if necessary, contracting external assistance to complete the task - initial assessment - completion</li> </ul> <p><b>Risk assessments have been undertaken for hand arm vibration and Covid 19.</b></p>	<p>June 2020 March 2021</p> <p><b>Completed Oct 2020 and ongoing</b></p>
Training	<p>To deliver health and safety training where required, to include: -</p> <ul style="list-style-type: none"> <li>• refresher first aid training and training for new first aiders <b>Community Protection, Parks and Countryside Officers have attended training</b></li> <li>• training for new workstation assessors</li> </ul> <p><b>Parks and maintenance staff attended IOSH Working Safely training</b></p> <p><b>Hand arm vibration training has been undertaken by all employees who may be exposed to this risk and managers</b></p>	<p>When required <b>Completed quarter 3</b></p> <p>October 2020</p> <p><b>Completed Oct 2020</b></p> <p><b>Completed Dec 2020</b></p>

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