

This information is available free of charge in electronic, audio, Braille and large print versions on request.

For assistance in understanding or reading this document or specific information about this Agenda or on the "Public Participation" initiative please call the Committee Team on 01629 761133 or e-mail: [committee@derbyshiredales.gov.uk](mailto:committee@derbyshiredales.gov.uk)

22 September 2021

To: All Councillors

As a Member or Substitute of the **Governance & Resources Committee**, please treat this as your summons to attend a meeting on **Thursday 30 September 2021 at 6.00pm** in the **Council Chamber, Town Hall, Matlock DE4 3AG**.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'James McLaughlin', written over a light blue horizontal line.

James McLaughlin  
Director of Corporate and Customer Services

## AGENDA

### 1. APOLOGIES/SUBSTITUTES

Please advise the Committee Team on 01629 761133 or e-mail [committee@derbyshiredales.gov.uk](mailto:committee@derbyshiredales.gov.uk) of any apologies for absence and substitute arrangements.

### 2. APPROVAL OF MINUTES OF PREVIOUS MEETING

01 July 2021

### 3. PUBLIC PARTICIPATION

To enable members of the public to ask questions, express views or present petitions, **IF NOTICE HAS BEEN GIVEN**, (by telephone, in writing or by email) **BY NO LATER THAN 12 NOON OF THE WORKING DAY PRECEDING THE MEETING**. As per Procedural Rule 14.4 at any one meeting no person may submit more than 3 questions and no more than 1 such question may be asked on behalf of one organisation.

### 4. INTERESTS

Members are required to declare the existence and nature of any interests they may have in subsequent agenda items in accordance with the District Council's Code of Conduct. Those interests are matters that relate to money or that which can be valued in money, affecting the Member her/his partner, extended family and close friends.

Interests that become apparent at a later stage in the proceedings may be declared at that time.

**5. QUESTIONS PURSUANT TO RULE OF PROCEDURE NUMBER 15.**

To answer questions from Members who have given the appropriate notice.

	<b>Page No.</b>
<b>6 STATEMENT OF ACCOUNTS 2020/21 PROGRESS REPORT</b>	<b>04 - 06</b>
To note an update report on the progress of the audit of the Statement of Accounts for 2020/21.	
<b>7. REVIEW OF INTERNAL AUDIT CHARTER</b>	<b>07 - 16</b>
To note the outcome of the review of the Internal Audit Charter and to consider agreement, subject to Member comments received, of the Internal Audit Charter. Also that the agreed Internal Audit Charter be reviewed in a year's time, or sooner, in the event of any significant changes being made to the Public Sector Internal Audit Standards.	
<b>8. RESULTS OF THE EXTERNAL REVIEW OF INTERNAL AUDIT</b>	<b>17 - 46</b>
To note the results of the external review of Internal Audit and that an action plan, to address recommendations made, be reported to a future meeting of this committee.	
<b>9. PROGRESS UPDATE ON THE 2021/22 INTERNAL AUDIT PLAN</b>	<b>47 - 50</b>
To note a report on the progress made in respect of the 2021/22 Internal Audit Plan; which includes a summary of Internal Audit reports issued since the last meeting of this committee.	
<b>10. ARREARS FOR WRITE OFF</b>	<b>51 - 56</b>
To receive a report seeking approval for the write off of individual debts, where the amount requested for write off in each case exceeds £10,000, in accordance with the Council's Financial Regulations	
<b>11. PAVEMENT LICENCES – SETTING OF FEES</b>	<b>57 - 58</b>
To consider a recommendation from the Licensing & Appeals Committee held on 30 <sup>th</sup> June 2021, to set a fee of £80 for applications for Pavement Licences, given that the regime has now been extended for a further 12 months to the 30 <sup>th</sup> September 2022.	

- 12. ASSET MANAGEMENT PLAN - LAND HOLDINGS REVIEW PHASE 2** 59 - 69
- To consider a report seeking approval for the lease of Site 1 and transfer of Site 2, on the terms outlined in Appendix 1. Should the terms of the lease of Site 1, or the terms of the transfer of Site 2 detailed in Appendix 1 require variation, then approval is sought that delegated authority be granted to the Estates and Facilities Manager to negotiate and agree varied terms in order for the lease and the transfer to progress.
- 13. STARKHOLMES ALLOTMENTS** 70 - 72
- To consider a report seeking approval to decline a request, from Starkholmes Allotment Association, to compulsorily purchase the current site of Starkholmes Allotments.
- 14. REVISED EQUALITY, DIVERSITY AND INCLUSION POLICY** 73 - 100
- To consider adoption of the revised Equality, Diversity and Inclusion Policy.
- 15. DIGITAL TRANSFORMATION - PHASE 2 PRIORITIES AND ONGOING APPROACH TO CHANGE AND INNOVATION** 101 - 113
- To note a report on the Digital Transformation planned objectives for the next 12 months and consider endorsement, in principle, of Phase 2 of the Digital Transformation Programme; a further report will be submitted, to a future meeting of this committee, setting out plans for the ongoing delivery of Transformation priorities for the 2022/23 financial year and beyond.
- 16. MEMBER LEARNING AND DEVELOPMENT** 114 - 124
- To receive an update on the 2020/21 Member Training & Development Plan and consider approval for a work plan for the Member Development Working Group and the Members' Training & Development Plan for the 2021/22 Civic Year.
- 17. JOINT CONSULTATIVE GROUP: MINUTES** To Follow
- To receive the Minutes of the Joint Consultative Group meeting held on 15<sup>th</sup> September 2021.

Members of the Committee – Councillors: Jacqueline Allison, Robert Archer, Sue Bull, David Chapman (Vice Chairman), Paul Cruise, Tom Donnelly (Chairman), Steve Flitter, Helen Froggatt, Dawn Greatorex, Alyson Hill, Susan Hobson, Michele Morley, Dermot Murphy, Garry Purdy, Mike Ratcliffe, Claire Raw, and Alasdair Sutton

Substitutes – Councillors: Jason Atkin, Mathew Buckler, Richard FitzHerbert, Chris Furness, David Hughes, Stuart Lees, Peter Slack and Steve Wain.

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Resources

## **STATEMENT OF ACCOUNTS 2020/21 PROGRESS REPORT**

### **PURPOSE OF REPORT**

This report updates members on the progress of the audit of the Statement of Accounts for 2020/21.

### **RECOMMENDATION**

That members note the current position.

### **WARDS AFFECTED**

None

### **STRATEGIC LINK**

The Council's financial position is taken into account in determining all the priorities in the Corporate Plan.

## **1 BACKGROUND**

- 1.1 For 2019/20 only 45% of local authorities published audited accounts on time despite the deadline being extended to 30 November 2020 due to the impact of Covid-19. Our Statement of Accounts was approved by Governance & Resources on the 19<sup>th</sup> November 2020. For 2018/19 only 57% of Local Authorities published their Audited Accounts on time.
- 1.2 The deadline for the publishing of audited accounts for 2020/21 was amended to 30 September 2021.
- 1.3 Under the Accounts and Audit Regulations 2015 the District Council must:
  - consider either by way of a Committee or by the Members meeting as a whole the Statement of Accounts;
  - following that consideration, approve the Statement of Accounts by a resolution of that Committee or meeting;
  - following approval, ensure that the Statement of Accounts is signed and dated by the person presiding at the Committee or meeting at which that approval was given; and
  - publish (which must include publication on the Council's website), the Statement of Accounts together with any certificate, opinion, or report issued, given or made by the auditor.

## **2 REPORT**

- 2.1 The draft Statement of Accounts 2020/21 was published on the Council's website by the statutory deadline of the 31<sup>st</sup> July 2021. The period of public inspection has passed without issue.
- 2.2 The external audit of the Statement of Accounts by Mazars LLP is ongoing but, due to resource constraints on both sides, is not expected to be completed by the 30<sup>th</sup> September 2021.
- 2.3 The audit of the accounts began on Monday 6<sup>th</sup> September with optimism that all testing could be completed and documented ready for the issue of an audit opinion by the 30<sup>th</sup> September. This was an aspirational target, given the audit start date, and unfortunately it has not been possible to achieve it. There are no direct financial consequences for not meeting the deadline. However, the Council will be named in a PSAA report that identifies councils that did not meet the deadline, so there is a reputational risk (although it is expected that the Council will not be alone in missing the deadline).
- 2.4 The audit is ongoing and, once it has been completed, the relevant reports will be distributed to either full Council or the Governance and Resources Committee for approval.
- 2.5 The Council's website has been updated to publicise the "Delay in publishing audited Statement of Accounts: Year ended 31 March 2021". This situation is allowed for by Regulation 10, paragraph (2) of the Accounts and Audit Regulations 2015 (SI 2015/234) <https://www.legislation.gov.uk/uksi/2015/234/regulation/10> , as amended by the Accounts and Audit (Amendment) Regulations 2021 (SI 2021/263) <https://www.legislation.gov.uk/uksi/2021/263/regulation/2/made>.
- 2.6 The Council is continuing to work closely with the external auditor to ensure the required work is completed as soon as possible.

## **3 RISK ASSESSMENT**

### **3.1 Legal**

This report has been compiled in compliance with the Account and Audit Regulations 2015. The Council has failed to meet the deadline, however there is little legal risk that could result in a legal challenge, more reputational. I therefore consider the risk to be low to medium to take into account the reputational damage that the Council could face.

### **3.2 Financial**

There are no additional costs relating to this report, therefore the financial risk is low.

## **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

## **5 CONTACT INFORMATION**

5.1 Karen Henriksen - Director of Resources  
Telephone: 01629 761284  
Email: [karen.henriksen@derbyshiredales.gov.uk](mailto:karen.henriksen@derbyshiredales.gov.uk)

5.2 Paul Frith - Financial Services Manager  
Telephone: 01629 761214  
Email: [paul.frith@derbyshiredales.gov.uk](mailto:paul.frith@derbyshiredales.gov.uk)

## **6 BACKGROUND PAPERS**

6.1 None

## **7 ATTACHMENTS**

7.1 None.

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Resources

## **REVIEW OF INTERNAL AUDIT CHARTER**

### **PURPOSE OF REPORT**

To report to Members for information and approval the results of a review of the Internal Audit Charter. The Public Sector Internal Audit Standards (PSIAS) state that the Head of Internal Audit must periodically review the Internal Audit Charter and present it to the relevant Committee for approval.

### **RECOMMENDATIONS**

1. That Members note the outcome of the review of the Internal Audit Charter.
2. That, subject to any comments Members may wish to make, the Internal Audit Charter be agreed.
3. That the agreed Internal Audit Charter be reviewed in a year's time or sooner in the event of any significant changes being made to the Public Sector Internal Audit Standards.

### **WARDS AFFECTED**

None

### **STRATEGIC LINK**

The Internal Audit Charter sets out the purpose, authority and principal responsibilities of Internal Audit. This contributes to the Council's core values of being open and transparent when making decisions and using public resources ethically and responsibly.

## **1 BACKGROUND**

- 1.1 The Public Sector Internal Audit Standards (PSIAS), which took effect from the 1 April 2013, require that the purpose, authority and responsibility of internal audit must be formally defined in an Internal Audit Charter (Appendix 1).

## **2 REPORT**

- 2.1 The Internal Audit Charter was last formally approved by this Committee in September 2020. It was agreed that the Charter would be reviewed every year to ensure that it is kept up to date.
- 2.2 There have been no updates to the PSIAS since the last review of the charter.

2.3 The current Internal Audit Charter has been reviewed and it is felt that it is still fit for purpose. In places the previous Charter referred to “internal control” or the “control environment”: these references have been replaced by the current best practice terminology which is “risk management, governance and internal control processes”.

### **3 RISK ASSESSMENT**

#### 3.1 Legal

There are no legal considerations arising from this report.

#### 3.2 Financial

There are no financial considerations arising from the report.

#### 3.3 Corporate

This report ensures that Members are aware of the purpose, authority and principal responsibilities of the Internal Audit Consortium.

### **4 OTHER CONSIDERATIONS**

4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

### **5 CONTACT INFORMATION**

5.1 Karen Henriksen - Director of Resources  
Telephone: 01629 761284  
Email: [karen.henriksen@derbyshiredales.gov.uk](mailto:karen.henriksen@derbyshiredales.gov.uk)

5.2 Jenny Williams - Internal Audit Consortium Manager  
Telephone: 01246 959770  
Email: [jenny.williams@chesterfield.gov.uk](mailto:jenny.williams@chesterfield.gov.uk)

### **6 BACKGROUND PAPERS**

6.1 None

### **7 ATTACHMENTS**

7.1 Appendix 1 – Internal Audit Charter



## DERBYSHIRE DALES DISTRICT COUNCIL

### INTERNAL AUDIT CHARTER

#### INTRODUCTION

1. The Public Sector Internal Audit Standards (PSIAS) which took effect from 1 April 2013 require the adoption of an Internal Audit Charter. This Charter describes the purpose, authority and principal responsibilities of the Internal Audit Section that have been established to provide the internal audit service to Derbyshire Dales District Council.

#### PSIAS/REGULATORY BASIS OF OPERATION

2. The adoption of the PSIAS is mandatory and includes a:
  - Definition of Internal Auditing
  - Code of ethics
  - International Standards for the Professional Practice of Internal Auditing

3. The Mission of Internal Audit is:-

***To enhance and protect organisational value by providing risk-based and objective assurance, advice and insight.***

4. The Internal Audit Section adopts the PSIAS and the purpose and definition of Internal Audit as specified by the PSIAS:-

*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*

5. The Internal Audit Section also adopts the Core Principles for the Professional Practice of Internal Auditing. These are that the Section:-

- Demonstrates integrity.
- Demonstrates competence and due professional care
- Is objective and free from undue influence (independent)
- Aligns with the strategies, objectives, and risks of the organisation,
- Is appropriately positioned and adequately resourced
- Demonstrates quality and continuous improvement
- Communicates effectively
- Provides risk-based assurance.
- Is insightful, proactive, and future-focused.
- Promotes organisational improvement.

## Appendix 1

6. The requirement for an internal audit function in local government is specified within the Accounts and Audit (England) Regulations 2015, which state:

*A relevant body must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking in to account public sector internal auditing standards or guidance.*

7. Internal Audit is governed by policies, procedures, rules and regulations established by the Council. These include Financial Regulations, Conditions of Service, Codes of Conduct and Anti-Fraud, Bribery and Corruption strategies.
8. Where key services are to be provided to the Council by other contractors or through a partnership, in order for internal audit to form an opinion on the risk management, governance and internal controls operating, a right of access to relevant information and documents should be included in contracts or agreements concerned.

### **DEFINITIONS**

9. The PSIAS require that the Charter must define the terms “Board” and “Senior Management” for the purposes of internal audit activity.

10. The PSIAS glossary defines the board as:

*The highest level of governing body charged with the responsibility to direct and/or oversee the activities and management of the organisation. Typically this includes an independent group of directors (e.g. a board of directors, a supervisory board or a board of governors or trustees). If such a group does not exist, the “board” may refer to the head of the organisation, “Board” may refer to an audit committee to which the governing body has delegated certain functions.*

11. At Derbyshire Dales District Council the “Board” will be the Governance and Resources Committee.
12. “Senior Management” – those responsible for the leadership and direction of the Council. This will be the Council’s Corporate Leadership Team.
13. The PSIAS adopt the term “Chief Audit Executive”, this role is met by the Internal Audit Consortium Manager for Chesterfield Borough, North East Derbyshire and Bolsover District Councils. Derbyshire Dales District Council employs the services of this Officer to ensure that the requirements of the PSIAS are met.

### **SCOPE AND OBJECTIVES OF INTERNAL AUDIT**

14. The scope of the Internal Audit Section encompasses the examination and evaluation of the adequacy and effectiveness of the organisation’s

## **Appendix 1**

governance, risk management and internal control processes in relation to the Council's defined goals and objectives.

15. The Audit Section's remit covers all functions and services for which the Council is responsible and this extends to the entire risk management, governance and internal control processes of the organisation and not just financial controls.
16. The Internal Audit Section will objectively examine, evaluate and report on the adequacy of the risk management, governance and internal control processes as a contribution to the proper, economic, efficient and effective use of resources.
17. The internal audit service will be delivered on the basis of a risk assessment of auditable areas. A predominantly systems based approach to most audits will be adopted.
18. The system of risk management, governance and internal control comprises the whole network of systems to provide reasonable assurance that corporate objectives will be achieved, with particular reference to:
  - Consistency of operations with established objectives and goals,
  - The reliability and integrity of financial and operational information;
  - The effectiveness and efficiency of operations and programmes,
  - Safeguarding of assets and interests from losses of all kinds, including those arising from fraud, irregularity and corruption;
  - Compliance with laws, regulations, policies, procedures and contracts;
  - The economic and efficient use of resources (value for money), effective monitoring systems and optimum use of performance management information.
19. With the introduction of the PSIAS, internal audit may also provide "consultancy" services. This work could take any form, provided that the independence of the service is not compromised, but will typically include special reviews or assignments where requested by management, which fall outside the approved plan and for which a contingency is included in the audit plan. There will be no significant consultancy work undertaken without the approval of the Governance and Resources Committee.

### **RESPONSIBILITIES AND REPORTING**

20. The PSIAS requires that the Internal Audit Charter should establish the responsibilities and reporting arrangements of internal audit.
21. The Internal Audit Consortium Manager reports directly to the Council's Governance and Resources Committee and to the Director of Resources. The Internal Audit Consortium Manager also has direct access to the Council's Chief Executive, Monitoring Officer and where necessary elected Members

22. The Internal Audit Consortium Manager will manage the provision of the Internal Audit service by: -
- Preparing each year in advance a risk based audit plan for discussion and agreement by the council's Client Officer and approval by the Governance and Resources Committee. Any in-year significant changes to the audit plan shall be agreed by the Client Officer and the Governance and Resources Committee.
  - Presenting an annual report to the Governance and Resources Committee that meets the requirements of the PSIAS and includes:-
    - An overall opinion on the adequacy and effectiveness of the Council's risk management, governance and internal control processes (including any qualifications to that opinion),
    - Presents a summary of the audit work from which the opinion is derived, including reliance placed on the work by other assurance bodies,
    - Draws attention to any issues the Internal Audit Consortium Manager judges particularly relevant to the preparation of the Annual Governance Statement,
    - Compares work actually undertaken with work that was planned and to report relevant performance measures and targets.
  - Presenting periodic reports to the Governance and Resources Committee summarising all internal audit reports issued and if considered necessary providing copies of the reports,
  - Formally report the findings and recommendations of audit work to senior management and the Governance and Resources Committee throughout the year. Audit reports will:-
    - Include an audit opinion on the reliability of the risk management, governance and internal control arrangements in the system or area audited,
    - Identify inadequately addressed risks and non-effective control processes,
    - Detail management's response and timescale for corrective action,
    - Identify issues of good practice.
  - Ensuring audit work is supervised, reviewed, recorded and reported,
  - Implementing a follow up process for ensuring the effective implementation of audit recommendations or ensuring senior management are aware of the consequences of not implementing a recommendation and are prepared to accept the risk,
  - Liaising as needed with the External Auditor and with other regulators,
  - Maintaining and managing a risk assessment in relation to the functions of the Council,
  - Ensuring that there is an up to date Audit Manual in place setting out expected standards for the service, and monitoring compliance with these standards, including in relation to the planning, conduct, quality assurance and reporting of audit assignments.

23. Senior managers should assist audit to discharge their duties by:
- The prompt provision of information and explanations,
  - Providing input to the audit plan to ensure attention is focused on areas of greatest risk,
  - Informing the Audit Section of any plans for change, including new systems,
  - Responding to the draft internal audit report, including provision of management responses to recommendations, within the timescale requested by the audit section,
  - Implementing agreed management actions in accordance with agreed timescales,
24. The Governance and Resources Committee must:
- Approve the Internal Audit Charter,
  - Approve the risk based internal audit plan,
  - Receive progress reports and an annual report from the Internal Audit Consortium Manager in respect of the audit plan,
  - Approve any large variances or consulting services not already included in the audit plan.

### **AUDIT RESOURCES**

25. The Director of Resources will ensure that the Audit Section has the necessary resource to enable the Internal Audit Consortium Manager to be able to give an annual evidence-based opinion.
26. The staffing and budget of the Internal Audit Consortium will be kept under review by the Director of Resources, bearing in mind the resource requirements identified in the audit plan process. Where resources available do not match the resource requirements identified by the annual audit plans, the Director of Resources will report to the Governance and Resources Committee.
27. The Internal Audit Consortium Manager providing a management service to the Council will be professionally qualified (CMIIA, CCAB or equivalent) and have wide internal audit and management experience. The Internal Audit Consortium Manager/Director of Resources will ensure that the internal audit service is appropriately skilled in terms of qualifications, knowledge and experience.

### **QUALITY AND ASSURANCE PROGRAMME**

28. The PSIAS state that a quality assurance and improvement programme must include both internal and external assessments. Internal assessments should be ongoing and periodical and external assessments must be undertaken at least once every 5 years.
29. All internal audits are subject to a management quality review. Policies and procedures to guide staff in performing their duties have been established within the audit manual.

## **Appendix 1**

30. The internal self-assessment of internal audit will be undertaken annually by completing the checklist for assessing conformance with the PSIAS included within the PSIAS Application Note.
31. External assessment can be satisfied by either arranging a full external assessment or by undertaking a self-assessment with independent validation. External assessments must be by a qualified, independent assessor from outside the organisation. The Internal Audit Consortium Manager/Director of Resources must discuss the format of the external assessments and the qualifications and independence of the assessor with the Governance and Resources Committee.
32. An external assessment of the internal audit function will take place at least once every 5 years and the results reported back to the Governance and Resources Committee.
33. The results of the quality and assurance programme and progress against any improvement plans must be reported in the annual report.

### **INDEPENDENCE, AUTHORITY AND ETHICS**

34. In order to achieve its objectives effectively, Internal Audit must be seen to be independent. Internal auditors must maintain an unbiased attitude that allows them to perform their engagements in such a manner that no quality compromises are made.
35. The scope of internal audit allows for unrestricted access to all records, personnel, premises and assets deemed necessary to obtain information and explanations as it considers necessary to fulfil its responsibilities in the course of the audit. Such access shall be granted on demand and not subject to prior notice.
36. This right of access is included in the Council's Financial Regulations. In addition, where necessary, the Internal Audit Consortium Manger and the Senior Auditor will have unrestricted access to:
  - The Chief Executive
  - The Director of Resources
  - Members
  - The Monitoring Officer
  - The Chair and Members of the Governance and Resources Committee
  - Individual Directors / Senior Managers
  - All Other Employees
  - The External Auditor
37. The Internal Audit Consortium Manager will confirm to the Governance and Resources Committees at least annually, the organisational independence of the internal audit activity.
38. Independence is further achieved by:

## Appendix 1

- Reporting to the Governance and Resources Committee and senior management,
  - Not being part of system and procedures being audited,
  - Completing declaration of interest forms on an annual basis,
  - Internal Audit staff not undertaking an audit in an area where they have had operational roles for at least two years.
39. If any member of the Internal Audit Section considers there is or could be a conflict of interest, this must be declared to the Internal Audit Consortium Manager who will direct alternative and independent resources to the audit.
40. Where internal audit staff are required to undertake non-audit duties, the Internal Audit Manager will make it clear that those audit staff are not fulfilling those duties as internal auditors. The Internal Audit Consortium Manager will ensure that within the service there remains sufficient impartiality to enable the actions and activities of those internal audit staff to be subject to audit by those independent from the activity.
41. Internal auditors must conform to the Chartered Institute of Public Finance and Accountancy (CIPFA) Code of Ethics in addition to those of other professional bodies of which they hold membership.
42. The Code of Ethics promotes an ethical, professional culture to ensure fairness, objectivity and freedom from conflicts of interest. The key principles are;
- Integrity – to establish trust thus providing reliance on their judgement;
  - Objectivity – in gathering, evaluating and communicating information about the activity or process being examined in order to make a balanced assessment of all relevant circumstances without influence;
  - Confidentiality – to respect the value and ownership of information received which should not be disclosed without appropriate authority or a legal or professional obligation to do so, nor be used for personal gain; and
  - Competence – to apply knowledge, skills and experience appropriately.

### **FRAUD AND CORRUPTION**

43. Managing the risk of fraud and corruption is the responsibility of management. The Council has an Anti-Fraud and Corruption strategy and a zero tolerance towards fraud.
44. The Internal Audit Consortium Manager/Senior Auditor should be notified of all suspected or detected fraud, corruption or impropriety in accordance with each Council's Financial Regulations and Anti-Fraud and Corruption strategies, in order to inform their opinion of the risk management, governance and internal control arrangements in place.

## **Appendix 1**

45. Subject to availability of resources with the internal audit plan, internal audit may assist management in the investigation of suspected fraud and corruption.
46. The Internal Audit Consortium Manager will report any instances of fraud detected as a result of audits undertaken to the Governance and Resources Committee.

### **REVIEW OF THE INTERNAL AUDIT CHARTER**

47. The Internal Audit Charter will be reviewed every year by the Internal Audit Consortium Manger and will be reported to the Council's Governance and Resources Committee for approval.

September 2021



Governance & Resources Committee  
30<sup>th</sup> September 2021

Report of the Director of Resources

## **EXTERNAL REVIEW OF INTERNAL AUDIT**

### **PURPOSE OF REPORT**

The purpose of this report is to inform members of the results of the external review of internal audit that took place in May 2021.

### **RECOMMENDATION**

1. That the results of the external review of internal audit be noted.
2. That an action plan to address the recommendations made be reported to a future meeting of this committee.

### **WARDS AFFECTED**

None

### **STRATEGIC LINK**

Internal Audit's service aims and objectives are the provision of an independent service, which objectively examines, evaluates and reports to the Council and its management on the adequacy of the control environment. This contributes to the Council's core values of being open and transparent when making decisions and using public resources ethically and responsibly. The external review confirms that internal audit are providing a service in compliance with the Public Sector Internal Audit Standards which will aid the Council in achieving its objectives.

### **1 BACKGROUND**

- 1.1 The Public Sector Internal Audit Standards (PSIAS) were introduced from the 1<sup>st</sup> April 2013 and Internal Audit has been working to those standards since that date. The PSIAS require that internal and external assessments of internal audit must take place.
- 1.2 An internal self-assessment against the PSIAS utilising the recommended CIPFA checklist has been undertaken on an annual basis by the Internal Audit Consortium Manager and these have concluded compliance with the Standards.

- 1.3 The PSIAS require that an external assessment of internal audit should be carried out at least once every 5 years by a qualified, independent assessor or team. The previous external review took place in 2016.
- 1.4 The selected assessor (Robin Pritchard from Business Risk Solutions) is CIPFA qualified and has over 40 years internal audit experience including being Chief Internal Auditor at Staffordshire County Council and a national partner responsible for internal audit at a number of professional service firms. Robin also spent 6 years as a professor of internal audit and risk management at Birmingham City University. Robin is an experienced External Quality Assessor and has undertaken over 50 reviews of this nature.

## **2 REPORT**

### FORMAT OF THE ASSESSMENT

- 2.1 The assessment took place throughout May 2021 and was conducted remotely due to COVID-19. The assessment involved a review of internal audit documentation, working practices, committee reports and working paper files. The audit committee chair and senior managers were also invited to complete a questionnaire.
- 2.2 This approach enabled Robin Pritchard to assess Internal Audit conformance with the PSIAS against the recommended checklist and associated standards.

### RESULTS OF THE REVIEW – HEADLINES

- 2.3 The report concludes that Internal Audit are delivering internal audit services to a standard that generally conforms with the PSIAS. There are no areas where the service does not comply with the standards. This means that Members can have confidence in the service provided by internal audit. It is acknowledged that internal audit has significant experience and appropriate qualifications allowing a robust internal audit standard to be maintained and delivered.
- 2.4 The external review report includes benchmarking against other provision in both the sector and the wider industry and this shows that internal audit compares favorably in comparison with its peers and other sectors (Appendix 1 pages 18 - 20).
- 2.5 As would be expected, the report has made a number of recommendations that are aimed at highlighting where further development can be made to enhance the value of the service being provided.
- 2.6 The assessor's full report can be seen at Appendix 1.

### KEY POINTS ARISING OUT OF THE REVIEW

- 2.7 The key theme throughout the report and associated recommendations is in relation to enhancing and developing the use of risk- based auditing and linking more to the

council's own risk management definitions and appetite.

- 2.8 The recommendations in the report are graded red, amber and green to reflect their relative importance. There are no red recommendations.
- 2.9 Feedback from the client questionnaires was extremely positive.
- 2.10 The next step is to produce an action plan to address the recommendations arising. Progress against the action plan will then be included as part of the internal audit 2021/22 annual report.

### **3 RISK ASSESSMENT**

#### 3.1 Legal

The PSIAS require that an external review of internal audit takes place every 5 years and this review meets that requirement.

#### 3.2 Financial

The confirmation that internal audit complies with the PSIAS ensures that a quality value for money service is being provided. The financial risk of this report is assessed as low.

#### 3.3 Corporate Risk

The external review confirms that the internal audit service meets the requirements of the PSIAS and therefore risk is reduced as internal audit is effectively reviewing the council's risk, governance and control processes.

### **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

### **5 CONTACT INFORMATION**

- 5.1 Karen Henriksen - Director of Resources  
Telephone: 01629 761284  
Email: [karen.henriksen@derbyshiredales.gov.uk](mailto:karen.henriksen@derbyshiredales.gov.uk)
- 5.2 Jenny Williams - Internal Audit Consortium Manager  
Telephone: 01246 959770  
Email: [jenny.williams@chesterfield.gov.uk](mailto:jenny.williams@chesterfield.gov.uk)

## **6 BACKGROUND PAPERS**

6.1 None

## **7 ATTACHMENTS**

7.1 Appendix 1 – External Review of Internal Audit

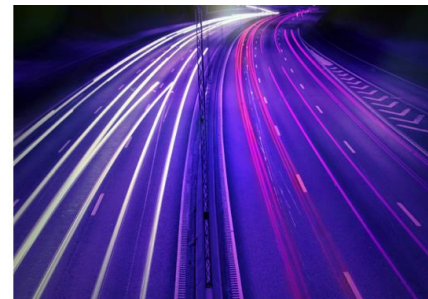
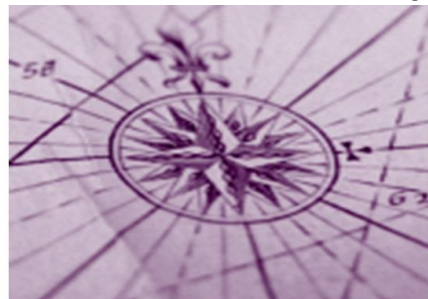


# Internal Audit Consortium and Derbyshire Dales District Council

## External Quality Assessment

Internal Audit Services

Executive report – June 2021



# Contents

---

Opinion	3
Executive summary	4
Summary of good practice	6
Part one	
• Findings and recommendations	7
Part two	
• Suggestions for enhancement of internal audit service	14
Part three	
• Benchmarking	18
Appendices	21

# External Quality Assessment

Internal Audit Consortium and Derbyshire Dales District Council

BUSINESS  
RISK  
SOLUTIONS

## Opinion

Overall assessment: The Internal Audit Consortium and Derbyshire Dales District Council are delivering internal audit services to a standard that **generally conforms** with the Public Sector Internal Audit Standards.

### Key matters arising from the review:

- The service would benefit by further integration of the use of risk-based internal audit techniques with the risk appetite of its clients regarding planning and the scoping of engagements,
- Developing a clear alignment through working papers for each assignment to focus on the achievement of agreed Management (Business) objectives through consideration of agreed significant risks and relevant key controls. This would likely enhance efficiency of the methodology as well as the benefit of and value gained from audit reports.
- Consideration should be given to the revision of the basis for expressing internal audit recommendations and opinions in line with risk impact definitions recognised by each client in Risk Management Policies.
- The Head of Internal Audit Annual Report should be enhanced through further development of the inclusion of a summary of the significant residual risks being faced and those other assurances both internal and external available to the Head of Internal Audit in reaching an annual opinion.

### Good Practice identified during the review

- The team demonstrates effective communication with Officers and members at all clients,
- Appropriate attention is given to gaining feedback and demonstration of the quality of services through review of performance which is routinely presented to Audit Committees,
- The Internal Audit team has a strong commitment to training,
- The team has constructed an analysis of Assurances available at each of its clients
- A Fraud Risk Assessment has been completed and is integrated with the internal audit methodology
- Audit planning is supported by appropriately detailed notes of discussions with management.

# Executive summary

---

The Internal Audit Consortium has developed a standard approach to the delivery of services to three local authorities of Chesterfield, Bolsover and NE Derbyshire and in addition to this core service, provides management of the internal audit service at Derbyshire Dales District Council and an outsourced service to Rykneld Homes; this has enabled the team to develop an appropriate depth and breadth of skills to successfully meet the needs of clients.

Services are provided by a dedicated team of in-house staff, which is headed by Jenny Williams as Internal Audit Consortium Manager, who assumes the role of Chief Audit Executive (HoIA) for the purposes of this review and regarding all internal audit appointments.

In 2020/21 services have been impacted by the effects of the pandemic which has led to 'remote auditing' being required; this appears not to have adversely impacted on the methodology but has been reflected in the availability of client staff to engage whilst dealing with other front-line priorities. A number of vacancies have also been experienced during the year.

The service has continued to respond to the changes of focus in professional standards by developing an increasingly risk based approach with regard to planning and the completion of assignment work; the Internal Audit Manual has been updated to reflect this in May 2020.




From an internal audit perspective, considerable further advantage may be gained through increasing recognition of management objectives and inherent risk, as this will enable internal audit plans and assignments to focus on the value of 'Control Risk' and therefore attention on significant key controls and the assurances that have been identified as available. This represents recognition of those key controls which management feel reduce risk to an acceptable level (risk appetite) and aligns with other current initiatives within internal audit.

Nevertheless, with a constantly changing risk environment, particularly as the service responds to the changing needs of clients post COVID-19; there is a need and opportunity for the internal audit service to continue to enhance its delivery through acting as a catalyst to ensure that robust risk management systems are operational, thereby increasing its awareness of the assessment of risk at each client and as a consequence informing its own approach.

Current services are assessed to '**generally conform**' with the PSIAS and compare favourably with peers, there are no areas where the service does not comply with the standards. A series of specific recommendations are made in the report that follows to reflect building on the existing considerable strengths in relation to resources, competency and delivery in order to enhance future service delivery.



# Overall assessment

1	<b>RESOURCES</b>		<b>Excelling</b> – Processes in this area are fully embedded within every-day practices and reflect best practice that is at least consistent with PSIAS expectations.
2	<b>COMPETENCY</b>		<b>Established</b> – Processes in this area are generally compliant with the PSIAS and embedded within every-day practices; the EQA has identified a number of areas where further development would be beneficial.
3	<b>DELIVERY</b>		<b>Established</b> – Processes in this area are generally compliant with the PSIAS and embedded within every-day practices; the EQA has identified a number of areas where further development would be beneficial.

# Summary of good practice identified within EQA

PSIAS	Good practice identified	Observation
1000	An Internal Audit Charter has been established and agreed with client Audit Committees (AC).	The combination of the Charter is comprehensive and establishes an appropriate framework against which internal audit services can be delivered in accordance with the PSIAS.
1100	Independence and objectivity	A team wide process is in place regarding the identification and management of potential conflicts and/or declarations of interest.
1311	The service has conducted internal assessment exercises of its performance.	Performance review is embedded within procedures and supported by a staff Performance and Development Reviews process which identifies and supports performance development needs.
2020	Active engagement at Board and management level	Represents the establishment of a good understanding of issues through interaction with Executive Management and Members.
2030	The need for appropriate internal audit resources is recognised within internal audit planning processes.	This represents a firm basis for the consideration of the successful delivery of the internal audit plan and the use of support from other parties, if required.
2040	A detailed Internal Audit Manual is in place which aligns with the PSIAS.	Provides the basis for a consistent approach to delivery of internal audit services delivered through a series of templates.
2060	Reports are produced using a standard template which is consistently applied. Customer feedback is routinely obtained at the conclusion of each engagement and at year end.	Demonstration of a consistent approach for communication which is generally well received by management and the AC's – effective follow-up ensures issues are not lost.
2120	Evaluate the potential for the occurrence of fraud and how the organisation manages fraud risk	Fraud Risk registers have been established at each client and integrated with the internal audit methodology.
2400	Reports are clear and express opinions in a manner that is understood by stakeholders.	Reports are produced on a timely basis, with comprehensive detail of internal audit activity being produced for AC attention including performance information.
2500	Establish and maintain a system to monitor the disposition of results communicated to management.	A formal process for follow-up and reporting on actions taken regarding recommendations has been established.

# Part one

---



## Compliance with the Public Sector Internal Audit Standards (PSIAS)

Business Vision and Mission, Governance arrangements, Recognition of standards, Charter, Guidance, Procedures and Supervision, Terms of Engagement, Ethics and business conduct.

	Issue identified	Recommended action
1	<p><b>Internal Audit Charter</b></p> <p>Whilst the Charter requires that the HoIA's Annual Opinion is correctly expressed in relation to Risk Management, Governance and Internal Control – there are references in the Charter and other documentation which simply relate to 'internal control' or the 'control environment'.</p>	<p>When the Internal Audit Charter and other documentation is next revised update the requirement for the HoIA to provide an Annual Opinion in the consistent form of Risk Management, Governance and Internal Control.</p> <p style="text-align: right;"><b>PSIAS 1010</b></p>
2	<p><b>2020/21 engagement completion</b></p> <p>Current year provision has been impacted by Covid and the team holding a number of vacancies.</p> <p>At the time of the review, internal audit plan outcomes for 2020/21 were not available other than in the case of Derbyshire Dales DC, where reference has been made to the internal auditor being required to undertake other duties in relation to COVID-19 business grants processes, queries and government returns. ,</p>	<p>Where these events impact upon completion of the internal audit plan and therefore the content of the Head of Internal Audit Annual opinion, a reflection on the advice provided by CIPFA could be beneficially referred to explain the context and advice provided by the professional body.</p> <p style="text-align: right;"><b>PSIAS 2450</b></p>

	Issue identified	Recommended action	
1	<p><b>Audit Planning</b></p> <p>The HoIA maintains a spreadsheet-based approach to the conduct of an audit needs assessment which supports the development of the annual plan.</p> <p>This recognises the teams' judgement of factors relating to Materiality, Control Environment, Sensitivity, Management Concern and time since last audit. None of these factors relates directly to the organisations risk appetite as expressed in each clients' risk management system.</p>	<p>Whilst it is recognised that client risk registers contain varying levels of detail regarding controls and assurances and certainly may not be comprehensive in terms of covering all risks. Conformance with the PSIAS would be enhanced by formally recognising the risk appetite of each client in internal audit planning, particularly where the concept of 'Control Risk' ( the assessed difference between Inherent and Residual risk) is identified.</p> <p style="text-align: right;"><b>PSIAS 2010</b></p>	
2	<p><b>Management Objectives</b></p> <p>The Internal Audit service currently specifies the Audit Objective as part of the Scoping Document for engagements although there is inconsistency. PSIAS 2201 provides advice regarding planning considerations for engagements and states that: "In planning the engagement, internal auditors must consider - The objectives of the activity being reviewed and the means by which the activity controls its performance and the significant risks to the activity, its objectives, resources and operations and the means by which the potential impact of risk is kept to an acceptable level".</p>	<p>The Internal Audit Service should consider focusing each audit on agreed Management Objectives for the area for review as this would help structure the engagement on significant risks and align the review with the associated controls that are designed to mitigate this risk.</p> <p>In this respect, this may allow greater focus to be provided on 'what matters most' and attention being given to selected controls testing currently contained within established 'controls check-lists'.</p> <p style="text-align: right;"><b>PSIAS 2200/1</b></p>	

# Competency continued

Issue identified	Recommended action												
<p><b>3 Grading of recommendations</b>            Issues on which the audit opinion is based currently reflect High, Medium or Low ratings for which internal audit has defined what it considers as events which merit concern at these levels. The definitions are not currently contained within the internal audit manual or are included in internal audit reports to support gradings.</p> <p>This is inconsistent with terminology used by each Council in their Risk Management Policies where definitions of impact are contained to varying levels of detail.</p> <p>The PSIAS uses consistent terminology relating to the identification and reporting on 'significant' risk. And it may therefore be beneficial for internal audit to align its understanding of significance with that of each client.</p>	<p>a) It would be beneficial to align future grading of recommendations with those impact definitions used within the risk management process relating to each clients' risk appetite.</p> <p>Existing clients appear to use either a 4x4 or 5x5 risk matrix and therefore inclusion within internal audit reports as to how consistent alignment is achieved would assist in both agreeing the specific risk focus of each engagement as well in assessing the relative importance of findings at the exit meeting and in determining an opinion within assurance reports through use of a consistent understanding and application of risk.</p> <p>A simple matrix may be:</p> <table border="1" data-bbox="1085 879 1754 1102"> <thead> <tr> <th>IA grade</th> <th>4x4 matrix</th> <th>5x5 matrix</th> </tr> </thead> <tbody> <tr> <td>High</td> <td>Catastrophic/Severe</td> <td>Critical/Major</td> </tr> <tr> <td>Medium</td> <td>Moderate</td> <td>Moderate</td> </tr> <tr> <td>Low</td> <td>Minor</td> <td>Unlikely/Rare</td> </tr> </tbody> </table> <p>b) Include appropriate explanation of alignment of gradings within the internal audit manual and provide appropriate training to staff regarding how this should be implemented.</p>	IA grade	4x4 matrix	5x5 matrix	High	Catastrophic/Severe	Critical/Major	Medium	Moderate	Moderate	Low	Minor	Unlikely/Rare
IA grade	4x4 matrix	5x5 matrix											
High	Catastrophic/Severe	Critical/Major											
Medium	Moderate	Moderate											
Low	Minor	Unlikely/Rare											

# Competency continued

	Issue identified	Recommended action
4	<p><b>Quality Assurance Improvement Programme (QAIP)</b> The HoIA currently undertakes an annual self-assessment process and reports a summary of matters arising to Audit Committees in the Annual Report.</p> <p>The current process considers matters such as issues arising from PDR's, client surveys, ideas from team members and training requirements in addition to matters arising from external quality assessments.</p> <p>At present, each element is maintained separately.</p>	<p>It would be beneficial to consider drawing together the various elements of review in a formal QAIP policy and presenting this to Audit Committees, as such in the Annual Report as required in the PSIAS.</p> <p>An example policy has been provided.</p> <p style="text-align: right;"><b>PSIAS 1300</b></p>

Client engagement and relationship, Directed led service, Terms of Engagement (Audit/Assignment Brief), Discussion of assurance and advisory opinions, Reporting at assignment and strategic levels

Issue identified	Recommended action
<p><b>1 Risk-based internal audit</b></p> <p>The emphasis of the PSIAS concerns significance. Earlier observations referred to the benefit which may be obtained by increasing alignment with each Councils risk management processes.</p> <p>In this respect current practice:</p> <ul style="list-style-type: none"> <li>a) Includes low risk audits in annual audit plans</li> <li>b) Utilises 'Control Checklists' as the basis for audits, and</li> <li>c) Has a tendency to produce reports that are 'controls based' rather than focusing on risks to achievement of identified management objectives.</li> </ul>	<p>Ensure that in all aspects of the internal audit methodology there is transparent consideration of the significant risks that may impact upon successful delivery of management objectives.</p> <p>At an Engagement level this should include identification and focus on particular risks, to the exclusion of others, where risk management policies or discussions identify issues of a potentially catastrophic nature such as safeguarding, health and safety, legislative compliance, failure to deliver statutory services or reputational damage.</p> <p style="text-align: right;"><b>PSIAS 2010/2300/2060</b></p>
<p><b>2 Code of Ethics</b></p> <p>Internal Audit reports currently state that the audit has been conducted in accordance with the Public Sector Internal Audit Standards.</p>	<p>Increasingly best practice also states that the audit has been conducted in accordance with the Institute of Internal Auditors Code of Ethics.</p> <p style="text-align: right;"><b>PSIAS Code of Ethics</b></p>
<p><b>3 Working papers</b></p> <p>The file review exercise identified different practices in relation to how the audit working papers were constructed with some focusing on risks and other more reflective of controls.</p>	<p>Establishing the 'Golden Thread' between Management Objectives, significant risks and key controls should be the basis of each audit as this would allow the development of a consistent approach to the conduct of audit engagements and ensure a focus on significance.</p> <p style="text-align: right;"><b>PSIAS 2200/2300</b></p>



# Delivery continued

Issue identified	Recommended action
<p><b>4 IA Opinions</b></p> <p>Internal Audit currently uses four levels of opinion – Substantial, Reasonable, Limited and Inadequate – definitions of expectations is provided clarifying the differences between the levels, although this uses general terminology regarding risk rather than relating specifically to the risk appetite of each client.</p> <p>The PSIAS as stated previously emphasises the requirement to focus on what is 'significant' to the achievement of Management Objectives.</p>	<p>The HoIA should consider rewording basis of overall opinions to provide increasing clarity regarding how internal auditors should assess the assurance level provided based on the significance of the risks identified and the recommendations made.</p> <p>Where a risk/recommendation of a 'Critical, Catastrophic or Severe' nature is identified this would indicate that at best a 'Limited Assurance' opinion should be used.</p> <p style="text-align: right;"><b>PSIAS 2410 A1/2060</b></p>

# Delivery continued

Issue identified	Recommended action
<p><b>5 Head of Internal Audit Annual Report</b></p> <p>The Annual Report provides an evidenced approach regarding the basis upon which the opinion regarding risk management, governance and control has been reached and compares favourably with other practice in the sector.</p> <p>This includes increasing recognition of significant risk and those wider sources of assurance that are available to the HoIA in reaching this opinion.</p> <p>Whilst risk management systems do not consistently include a comprehensive analysis of the sources of assurance as a second line of defence, the internal audit team has made good progress in identifying routine sources of assurance that are available as well as compiling a Fraud Risk Assessments for each client.</p>	<p>The Head of Internal Audit should continue to develop the formality of the Annual Report process building the links between this report and the Annual Governance Statement.</p> <p>Inclusion of references to significant risks currently faced by each client will be of benefit to all stakeholders.</p> <p>Further consideration should be given to inclusion other sources of assurances that are available such as that relating to independent assurance regarding PSN, where these are relevant to providing evidence regarding the significant risks faced by each client.</p> <p style="text-align: right;"><b>PSIAS 2060/2450</b></p>

# Part two

---



Suggested enhancements for consideration

# Suggested Enhancements for consideration

	Issue identified	Recommended action
1.	<p><b>Exit meeting template</b> Discussions with management regarding the findings identified within engagements are discussed with management and based upon a first draft of the report.</p> <p>A summary of the discussion is then recorded in a narrative note, which is then used to produce the final report.</p> <p>Draft reports can contain misunderstandings or factual inaccuracies which may detract from the value of a report and which may be better clarified before time is incurred constructing a report and recommendations.</p>	<p>It is recognised that the HoIA prefers to use the draft report as the basis for conducting the exit meeting however it may be beneficial to introduce a standard template on which to record findings/recommendations along with draft management reactions as the audit progresses, as this will both formalise the approach to arriving at the draft report stage, as well as support timely feedback and verify any misunderstandings or factual inaccuracies.</p> <p>This may represent a more efficient and effective use of time by all parties rather than wait for production of a draft report to correct misunderstandings.</p>
2.	<p><b>Client surveys</b> Progress has been made in obtaining feedback from auditees following each audit.</p>	<p>The level of response is similar to that seen in other organisations and therefore Internal Audit may find it useful to utilise an application such as Microsoft Forms or Survey Monkey for collecting feedback, as this can prove to be an efficient means which helps achieve an early response.</p>
3.	<p><b>Working Paper review record</b> Current practice is to evidence supervision of an engagement using a working paper review template which reflects good practice.</p> <p>Other evidence of review is contained on pre-engagement documentation and at report stage.</p>	<p>It may be beneficial to extend the use of the existing template to include evidence of the review of pre-audit involvement of the nominated supervisor as well as approval of the review and release of draft and final reports.</p>

# Suggested Enhancements for consideration

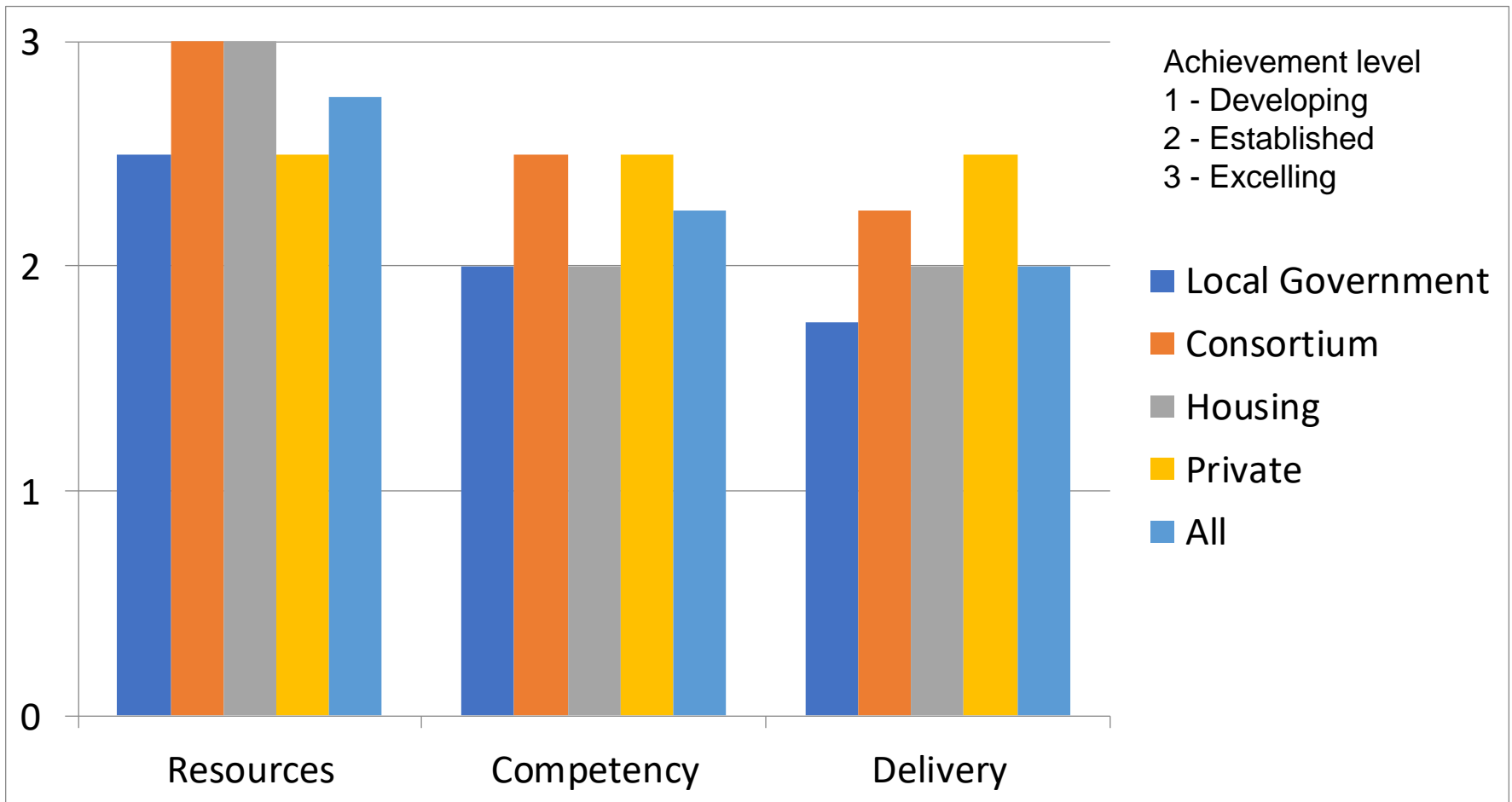
	Issue identified	Recommended action
4.	<p><b>HoIA Performance Development Review</b></p> <p>The current process is managed as required by the policy at Chesterfield Borough Council with the review being completed by the Service Director Finance; the Chief Executive reviews and comments as the managers manager.</p> <p>The standards suggest that it is good practice for feedback to also be received from the Chair of the Audit Committee.</p>	<p>As the IA Consortium provides a service to four other organisations it would be constructive to also invite feedback on an annual basis from the Chief Executive and Chairs of Audit Committee from these clients.</p> <p style="text-align: right;"><b>PSIAS 1110</b></p>

# Part three

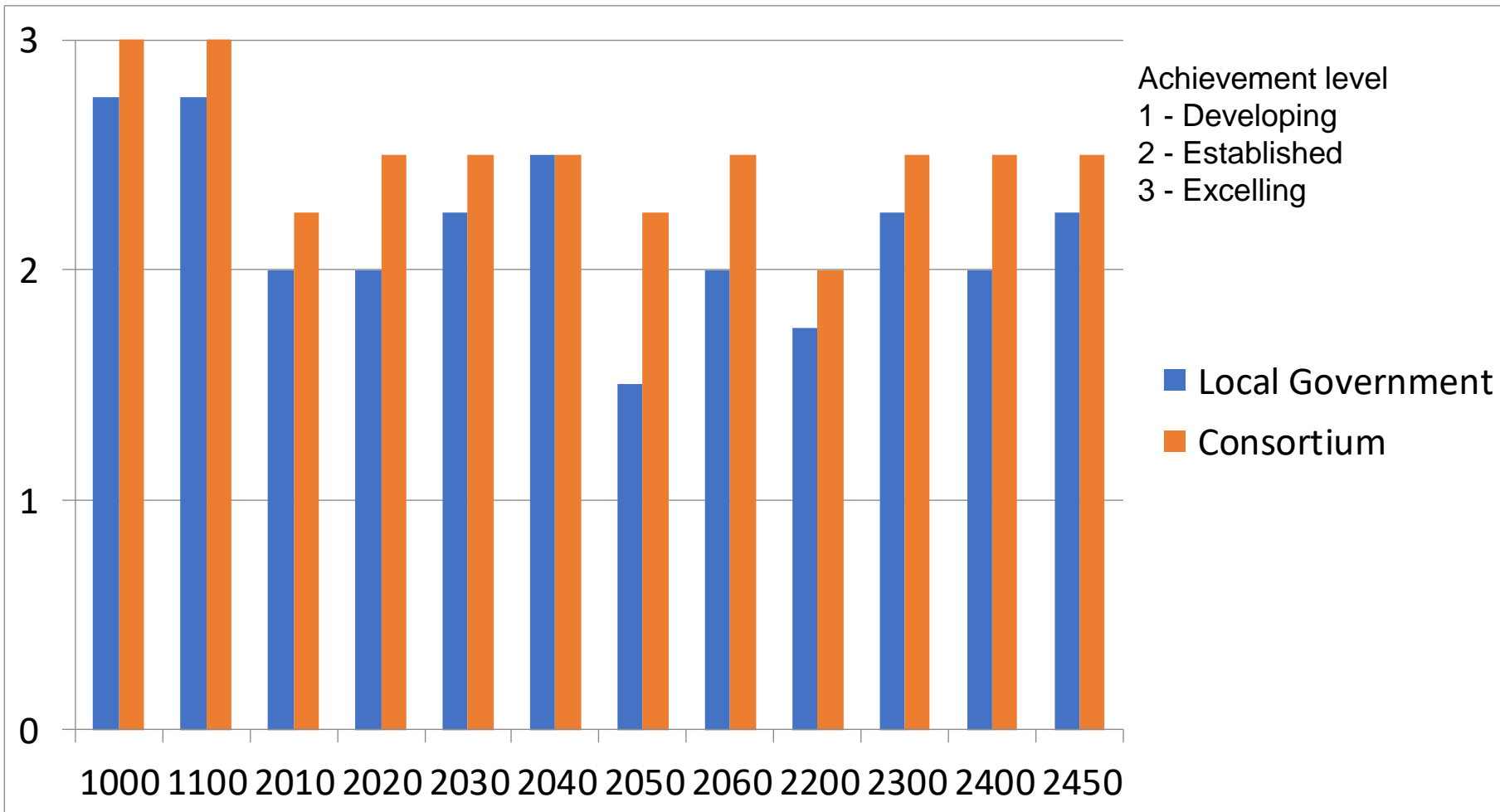
---



## Benchmarking



# Benchmarking - Industry analysis





# Appendix

---

1. Summary of client feedback
2. Key IPPF/PSIAS standards assessed
3. Basis for EQA
4. Grading of recommendations

# Summary stakeholder feedback

Question	Positive (%)	Negative (%)
I understand Internal Audit's role in the organisation and its purpose.	100	
Internal Audit is customer focused and understands what the organisation is trying to achieve. Internal Audit considers the viewpoints of the organisation when planning and undertaking reviews and aims to provide a good balance between assurance and good practice with opportunities for improvement.	100	
Internal audit has a presence in the organisation which is visible and approachable.	100	
The Internal Audit team provides a flexible and reliable service which adds value through the assurance audits and additional work it undertakes.	100	
Internal Audit makes you aware of any significant issues that occur during an audit on a timely basis and you have the opportunity to respond or provide additional information.	93	7
Internal audit has the skills to provide appropriate assurance and advice to meet our needs?	100	
Good practice and ideas from other organisations are shared through audits, day to day contact, meetings or other engagement methods.	93	7
<b>Average</b>	<b>98%</b>	<b>2%</b>

**Conclusion:**

Feedback from stakeholders confirms that the Consortium is considered to provide a high-quality internal audit service whose brief is clearly understood and the assurance and advice that is provided is well regarded.

Those responses where negative feedback has been received may reflect other findings of the review in so far as they reflect the potential to increase recognition of management objectives and inherent risk through continuing to develop client relationships to mutual benefit.

# Key PSIAS Standards assessed

(for benchmarking purposes)

Standard		Focus
1000	Purpose, Authority and Responsibility	The purpose, authority, and responsibility of the internal audit activity must be formally defined in an internal audit charter, consistent with the Definition of Internal Auditing, the Code of Ethics, and the <i>Standards</i> . The chief audit executive must periodically review the internal audit charter and present it to senior management and the board for approval.
1100	Independence and Objectivity	The internal audit activity must be independent, and internal auditors must be objective in performing their work.
2010	Planning	The chief audit executive must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation's goals.
2020	Communication and approval	The chief audit executive must communicate the internal audit activity's plans and resource requirements, including significant interim changes, to senior management and the board for review and approval. The chief audit executive must also communicate the impact of resource limitations.
2030	Resource Management	The chief audit executive must ensure that internal audit resources are appropriate, sufficient, and effectively deployed to achieve the approved plan.
2040	Policies	The chief audit executive must establish policies and procedures to guide the internal audit activity.
2050	Co-ordination	The chief audit executive should share information and coordinate activities with other internal and external providers of assurance and consulting services to ensure proper coverage and minimize duplication of efforts.
2060	Reporting	The chief audit executive must report periodically to senior management and the board on the internal audit activity's purpose, authority, responsibility, and performance relative to its plan. Reporting must also include significant risk exposures and control issues, including fraud risks, governance issues, and other matters needed or requested by senior management and the board.
2200	Engagement planning	Internal auditors must develop and document a plan for each engagement, including the engagement's objectives, scope, timing, and resource allocations.
2300	Work programme	Internal auditors must identify, analyse, evaluate, and document sufficient information to achieve the engagement's objectives.
2400	Communicating results	Internal auditors must communicate the results of engagements
2450	Overall opinions	When an overall opinion is issued, it must take into account the expectations of senior management, the board, and other stakeholders and must be supported by sufficient, reliable, relevant, and useful information.

# Basis for EQA

---

## Compliance with IPPF/PSIAS

- **Resources**

Business Vision and Mission, Governance arrangements, Recognition of standards, Guidance, Procedures and Supervision, Terms of Engagement, Ethics and business conduct.

- **Competency**

Charter, Internal Audit Manual, Planning and Allocation of staffing, Recruitment (Numbers and skills), Training (Professional and Technical), Appraisal and Development

- **Delivery**

Client engagement and relationship, Directed led service, Terms of Engagement (Audit/Assignment Brief), Discussion of assurance and advisory opinions, Reporting at assignment and strategic levels

# Basis for overall opinion

**Generally Conforms** means the evaluator has concluded that the relevant structures, policies, and procedures of the activity, as well as the processes by which they are applied, comply with the requirements of the individual *Standard* or element of the Code of Ethics in all material respects. For the sections and major categories, this means that there is general conformance to a majority of the individual *Standards* or elements of the Code of Ethics, and at least partial conformance to the others, within the section/category. There may be significant opportunities for improvement, but these must not represent situations where the activity has not implemented the *Standards* or the Code of Ethics, has not applied them effectively, or has not achieved their stated objectives. As indicated above, general conformance does not require complete/perfect conformance, the ideal situation, successful practice, etc.

**Partially Conforms** means the evaluator has concluded that the activity is making good-faith efforts to comply with the requirements of the individual *Standard* or element of the Code of Ethics, section, or major category, but falls short of achieving some major objectives. These will usually represent significant opportunities for improvement in effectively applying the *Standards* or Code of Ethics and/or achieving their objectives. Some deficiencies may be beyond the control of the activity and may result in recommendations to senior management or the board of the organisation.

**Does Not Conform** means the evaluator has concluded that the activity is not aware of, is not making good-faith efforts to comply with, or is failing to achieve many/all of the objectives of the individual *Standard* or element of the Code of Ethics, section, or major category. These deficiencies will usually have a significant negative impact on the activity's effectiveness and its potential to add value to the organisation. These may also represent significant opportunities for improvement, including actions by senior management or the board. Often, the most difficult evaluation is the distinction between general and partial. It is a judgment call keeping in mind the definition of general conformance above. Carefully read the *Standard* to determine if basic conformance exists. The existence of opportunities for improvement, better alternatives, or other successful practices do not reduce a generally conforms rating.

# Grading of recommendations

- The grading of recommendations is intended to reflect the relative importance to the relevant standard within the Public Sector Internal Audit Standards (PSIAS).

Recommendation grading	Explanation
<b>Enhance</b>	The internal audit service must enhance its practice in order to demonstrate transparent alignment with the relevant PSIAS standards in order to demonstrate a contribution to the achievement of the organisations' objectives in relation to risk management, governance and control.
<b>Review</b>	The Internal audit service should review its approach in this area to better reflect the application of the PSIAS.
<b>Consider</b>	The internal audit service should consider whether revision of its approach merits attention in order to improve the efficiency and effectiveness of the delivery of services

- In grading our recommendations, we have considered the wider environment in terms of both the degree of transformation that is currently taking place as well as our assessment of the level of risk maturity that currently exists, as these will have a consequence for the conduct of internal audit planning as well as subsequent communication.

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Resources

## **PROGRESS UPDATE ON THE 2021/2022 INTERNAL AUDIT PLAN**

### **PURPOSE OF REPORT**

To present for members' information a progress update in respect of the 2021/22 Internal Audit Plan. The report includes a summary of internal audit reports issued since the last meeting of this committee.

### **RECOMMENDATION**

That the report be noted.

### **WARDS AFFECTED**

None

### **STRATEGIC LINK**

Internal Audit's service aims and objectives are the provision of an independent service, which objectively examines, evaluates and reports to the Council and its management on the adequacy of the control environment. This contributes to the Council's core values of being open and transparent when making decisions and using public resources ethically and responsibly.

## **1 BACKGROUND**

- 1.1 The 2021/22 Operational Audit Plan was approved by the Governance and Resources Committee on the 11<sup>th</sup> March 2021. The plan provides a framework by which service functions are reviewed to test and report on the adequacy and effectiveness of risk management systems and the internal control environment within the Council.
- 1.2 This report details the results of the internal audit reviews undertaken since the last meeting.

## **2 REPORT**

- 2.1 In respect of the 2021/22 financial year the Senior Auditor has still spent the bulk of her time working on business support grants and associated government returns etc, although this has reduced in recent weeks. In addition to this, it has not proven possible to recruit a Senior Auditor despite two attempts. However, we have now successfully appointed an internal auditor (training required) who will be starting on the 1st November 2021.
- 2.2 Consequently progress on the 2021/22 plan to date has been fairly slow with only 2 reports being issued to date (see Appendix 1).

- 2.3 A further update in terms of a revised internal audit plan will be presented to the November 2021 Committee meeting.
- 2.4 Reports are issued as Drafts with five working days being allowed for the submission of any factual changes, after which time the report is designated as a Final Report. Fifteen working days are allowed for the return of the Implementation Plan.
- 2.5 The Appendix shows a summary of the level of assurance that can be given in respect of the audit area examined and the number of recommendations made / agreed where a full response has been received.
- 2.6 The assurance provided column in Appendix 1 gives an overall assessment of the assurance that can be given in terms of the controls in place and the system's ability to meet its objectives and manage risk in accordance with the following classifications.

<b>Assurance Level</b>	<b>Definition</b>
<b>Substantial Assurance</b>	There is a sound system of controls in place, designed to achieve the system objectives. Controls are being consistently applied and risks well managed.
<b>Reasonable Assurance</b>	The majority of controls are in place and operating effectively, although some control improvements are required. The system should achieve its objectives. Risks are generally well managed.
<b>Limited Assurance</b>	Certain important controls are either not in place or not operating effectively. There is a risk that the system may not achieve its objectives. Some key risks were not well managed.
<b>Inadequate Assurance</b>	There are fundamental control weaknesses, leaving the system/service open to material errors or abuse and exposes the Council to significant risk. There is little assurance of achieving the desired objectives.

- 2.7 Two reports have been issued with a conclusion of "Substantial" Assurance. Two recommendations have been made.
- 2.8 In respect of the audits being reported, no fraud was identified.

### **3 RISK ASSESSMENT**

#### 3.1 Legal

There are no legal considerations arising from the report.

#### 3.2 Financial

There are no financial considerations arising from the report.

#### 3.3 Corporate Risk

There is a risk that a lack of independent assurance means that weaknesses in governance, risk and control may go undetected. Action is being taken to increase the resource levels within internal audit.



## **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

## **5 CONTACT INFORMATION**

- 5.1 Karen Henriksen - Director of Resources  
Telephone: 01629 761284  
Email: [karen.henriksen@derbyshiredales.gov.uk](mailto:karen.henriksen@derbyshiredales.gov.uk)
- 5.2 Jenny Williams - Internal Audit Consortium Manager  
Telephone: 01246 959770  
Email: [jenny.williams@chesterfield.gov.uk](mailto:jenny.williams@chesterfield.gov.uk)

## **6 BACKGROUND PAPERS**

- 6.1 None

## **7 ATTACHMENTS**

- 7.1 Appendix 1 – Summary of Internal Audit Reports Issued current year to date.

## DERBYSHIRE DALES DISTRICT COUNCIL

### Internal Audit Consortium - Report to Governance and Resources Committee

#### Summary of Internal Audit Reports Issued current year to date

Report Ref	Report Title	Scope and Objectives	Overall Opinion	Date		Number of Recommendations	
				Report Issued	Response Due	Made	Accepted
D001	Sundry Debtors	To ensure that invoices are raised in a timely manner and that there are adequate debt collection procedures in place.	Substantial	6/8/21	27/8/21	0	0
D002	Creditors	To ensure that orders are raised appropriately and that invoices are paid in an accurate and timely manner	Substantial	13/9/21	4/10/21	2 (1M 1L)	Note 1

Note 1 – Response not received at time of writing report

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Resources

## ARREARS FOR WRITE OFF

### PURPOSE OF REPORT

This report provides information about debtor write offs authorised by the Director of Resources under delegated authority in accordance with the Council's Financial Regulations and seeks approval for the write off of individual debts exceeding £10,000 in accordance with the Council's Financial Regulations.

### RECOMMENDATION

That the Committee approves the write off of the individual amounts exceeding £10,000 as listed in Appendix 1, which total £31,026.65.

### WARDS AFFECTED

None

### STRATEGIC LINK

Writing off irrecoverable debts in a timely fashion contributes towards good financial management.

## 1 BACKGROUND

- 1.1 Under regulation B7(a) of the Council's Financial Regulations, authority is delegated to the Director of Resources to write-off individual arrears up to £10,000. Under the scheme of officer delegation the Director of Resources also has authority to write off any arrears that have been caused by an officer error. This report details those debts exceeding £10,000 for which authorisation to write-off is required from this Committee under regulation B7(b) of the Financial Regulations.
- 1.2 This report covers arrears relating to council tax, non-domestic rates, housing benefit overpayments and sundry debts, as well as including council tax backdating cases approved by the Committee in July 2021 (for completeness).
- 1.3 The debts detailed in this report have been pursued through all appropriate methods of recovery open to the Council. The [Revenues Debt Recovery Policy](#) shows the approach taken to recovery for each type of debt. It is considered that any further action attempted at recovering the debts proposed for write off would be likely to incur additional expenses to the Council without the prospect of payment. As such, where these individual debts exceed £10,000 they are referred to this Committee for approval to write them off.

1.4 It should be noted that any debt will be reinstated where further information subsequently comes to light that allows further recovery action to be pursued.

1.5 Accounts submitted for write-off fall into one of the following categories:

- Amounts remitted by the Magistrates Court (or where the Court has refused to grant a Liability Order)
- Amounts for which the debtor has served a prison sentence
- Amounts where the debtor is bankrupt or insolvent
- Amounts where the debtor has died and there are insufficient funds in their estate
- Amounts where the debtor has absconded or gone abroad and cannot be traced
- Amounts where it has become uneconomic to pursue the debt
- (Very rarely) Amounts where there has been an officer error.

1.6 The Chartered Institute of Public Finance & Accountancy (CIPFA) recommends that it is good practice to identify debts that are unlikely to be paid and to account for them in the accounts as soon as possible.

## 2 REPORT

2.1 The amounts recommended for write-off are given in Appendix 1 and are summarised below:

**Table 1: Write offs summary 2021/22 to September**

	Council Tax Arrears	NNDR Arrears	Housing Benefit Overpayment Arrears	Sundry Debtors Arrears	Total
	£	£	£	£	£
Amounts approved by Governance & Resources Committee 1 July 2021 (backdating cases)	77,904.74	0.00	0.00	0.00	77,904.74
Amounts over £10,000 to be considered by Governance & Resources Committee 30 September 2021 (see Appendix 1)	0.00	31,026.65	0.00	0.00	31,026.65
Amounts of £10,000 and under written-off under delegated authority to 30 September 2021	54,827.10	26,996.02	7,675.29	701.20	90,199.61
Amounts over £10,000 relating to officer error and written-off under delegated authority	0.00	0.00	0.00	0.00	0.00
<b>Total</b>	<b>132,731.84</b>	<b>58,022.67</b>	<b>7,675.29</b>	<b>701.20</b>	<b>199,131.00</b>

Provision for Doubtful Debts 01/04/21	457,292.80	361,313.00	67,740.15	29,903.35	916,249.30
Total written-off in 2018/19	67,368.90	70,867.00	28,506.67	79,227.41	245,969.98
Total written-off in 2019/20	67,881.04	158,714.00	44,363.24	10,799.92	281,758.20
Total written-off in 2020/21	106,558.55	21,576.00	4,512.15	1,900.12	134,546.82

## 2.2 Officer comment

Most write offs in 2021/22 relate to cases involving bankruptcy, insolvency, debt relief orders, where payers are deceased or have left with no trace or where debts are uneconomic to pursue. Due to the light touch approach taken to recovery in 2020/21 and the start of 2021/22 (as a result of the coronavirus pandemic), cases have only recently been referred to enforcement agents, final notices have only been issued from September 2021 and, at the time of writing this report, there have been no court cases, though courts are booked on 28 September (Chesterfield) and 4 October (Derby) for cases involving council tax and business rates liabilities. When the impact of the full resumption of debt recovery actions is felt later in this financial year, there is likely to be an increase in requests for write off.

### Council Tax

2.3 The 2021/22 Council Tax net collectable debit is currently in the order of £60m. The amount of £132,731.84 shown in table 1 above for write offs represents 0.2% of this amount. The write offs in this report cover several financial years.

2.4 Irrecoverable council tax is shared between the district council and major preceptors. For 2021/22 Derbyshire Dales District Council meets 14.1% of the amounts written off.

2.5 When the Council Tax is set each year it is assumed that 99.2% of the debit will eventually be collected. The overall collection rates for the current and last 5 years' Council Tax and Non-Domestic Rates charges are set out in the table below. Council tax collections for 2019/20 to 2021/22 are under target as payments have been impacted by the coronavirus pandemic and the decision to take a "light touch approach" to debt recovery, which applied until August 2021. It is hoped that collection rates will improve as full debt recovery recommences.

**Table 2: Percentage of council tax and non-domestic rates debt collected to 31 August 2021 (Target for full year is 99.2% for council tax and 98.2% for non-domestic rates)**

Year	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22 To 31 <sup>st</sup> August	
						Target	Actual
Council Tax	99.71%	99.68%	99.56%	99.18%	98.23%	51.85%	51.83%
Non-Domestic Rates	99.19%	98.63%	98.34%	98.19%	96.98%	47.43%	39.24%

## Non-domestic rates

- 2.6 The 2021/22 Non-Domestic Rates net collectable debit is currently in the order of £15m (net of the extra reliefs for coronavirus that total around £5m). The amount of £58,022.67 shown in table 1 for write offs represents 0.4% of this amount. The write offs in this report cover several financial years.
- 2.7 Non-domestic rates collections for 2019/20 to 2021/22 are below target as payments have been impacted by the coronavirus pandemic and the decision to take a “light touch approach” to debt recovery, which applied until August 2021. In addition, we expected this dip in NNDR collection rates for 2021/22 because 892 properties were affected by changes to the Retail Discount with effect from 01.07.2021 so bills for these properties were not issued until after that date. So, ratepayers who were entitled to this discount (and had a zero bill for 2020/21 and the first three months of 2021/22) now only have 66% expanded retail discount for the rest of the financial year. The rates arising from these bills (£1.7m for 9 months of 2021/22) now has to be collected in 9 instalments, rather than the usual 12. As a result, it is expected that collection rates will improve later in the financial year as these instalments are paid and as full debt recovery recommences.
- 2.8 Irrecoverable Non-Domestic Rates are shared between central government and local government under the Business Rates Retention Scheme. For 2021/22 Derbyshire Dales District Council meets 40% of the amounts written off.

## Housing benefit overpayments

- 2.9 For housing benefit overpayments, no write offs for debts over £10,000 are proposed in this report. Write offs authorised under delegated authority from 33 cases for 2021/22 to date total £7,675.29, which is well within the provision of £67,740. The most common reason for write offs in 2021/22 (14 of the 33 cases) is “Debtor deceased with no estate”. Going against the trend that we have seen in earlier years, only one of the 33 cases involves insolvency or debt relief orders.
- 2.10 The arrears outstanding at 1 April 2021 was £790,048.46. The sum of £7,675.29 for write offs so far in 2021/22 relates to debts spanning several financial years and represents 1% of arrears outstanding at the start of the year (write offs in 2020/21 totalled £4,512.15, which represented 0.5% of arrears outstanding at the start of that year; for 2019/20 the figure was 4.2%). Members should be aware that recovering housing benefit overpayments from people on low incomes is very difficult; payment arrangements need to be reasonable and affordable and it can several years to fully recover a debt in some cases as repayments have to be reasonable and affordable. During 2020/21 and 2021/22 the impact of the coronavirus pandemic and furlough schemes have hit hard on ability to pay. This means that, like other Councils, we have to consider write offs in some cases.
- 2.11 As at 31st July 2021 7.3% of gross collectable debt had been recovered with a balance of £713,999 carried forward (£790,048 was carried forward at 31 March 2021). This current balance is the lowest level of arrears since the Benefits Overpayments Officer was appointed and demonstrates that recovery action continues to be effective. Arrears outstanding at 31 March 2017 (when the appointment was approved) amounted to £1,132,755.

## Sundry debts

- 2.12 No write offs are proposed in this report for sundry debts over £10,000. The net collectable debt for sundry debts in 2020/21 was £4.5m, which is not expected to change significantly in 2021/22. The 2021/22 write offs to date total £701.20, which represents 0.02% of expected net collectable debt (0.04% in 2020/21). The value of write offs for 2021/22 is well within the amount in the provision £29,903.

### **3 RISK ASSESSMENT**

#### 3.1 Legal

The Director of Resources is acting in accordance with powers delegated to her under Section 101 of the Local Government Act 1972. The Council has a duty to pursue all monies owed to it and the write offs are to enable the District Council to finalise its accounts for the year. It will use the appropriate legal powers available to it to recover the sums due. The legal risk is therefore low.

#### 3.2 Financial

The Council has established provisions for doubtful debts, as set out in table 1 in paragraph 2.1. The amounts written off or proposed so far in 2021/22 total £199,131 and are well within the overall budgetary provision of £916,249. The financial risk is assessed as “medium”.

### **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

### **5 CONTACT INFORMATION**

- 5.1 Karen Henriksen, Director of Resources  
Telephone 01629 761284  
Email: [karen.henriksen@derbyshiredales.gov.uk](mailto:karen.henriksen@derbyshiredales.gov.uk)

### **6 BACKGROUND PAPERS**

- 6.1 None

### **7 ATTACHMENTS**

- 7.1 Appendix 1 – Schedule of write offs

## Appendix 1: Schedule of Write Offs over £10,000 (which require committee approval)

### Non-Domestic Rates Write Offs

Reference	Reason for Write off	Amount	Period of charge
70179615	Limited Company Dissolved	£20,064.05	2017-2018
70169106	No Trace	£10,962.60	2018-2020
	Total	£31,026.65	



Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Regulatory Services

## **PAVEMENT LICENCES – SETTING OF FEES**

### **PURPOSE OF REPORT**

This report refers a recommendation of the Licensing and Appeals Committee to set a fee for applications for Pavement Licences, given that the regime has now been extended for a further 12 months, to 30 September 2022.

### **RECOMMENDATION**

That an application fee of £80 be set for any application for a Pavement Licence that extends beyond 30 September 2021.

### **WARDS AFFECTED**

All

### **STRATEGIC LINK**

An effective licensing regime contributes towards the District Council's Place objective, in terms of keeping the Derbyshire Dales clean, green and safe.

## **1 BACKGROUND**

- 1.1 At its meeting on 30 June 2021 the Licensing and Appeals Committee considered a report outlining the Government's proposals to extend the temporary Pavement Licensing regime by a further year, to expire on 30 September 2022. This light-touch regime was introduced in response to the Covid-19 pandemic and was intended to assist hospitality businesses with reopening after the first lockdown, by permitting the use of 'pavements' (i.e. part of the highway) for the consumption of food and drink, subject to compliance with a system of conditions.
- 1.2 This system was introduced in July 2020 with the intention that it should expire at the end of September 2021. However, as everyone knows, the effects of the pandemic have continued and Government wishes to continue to support business in this way.
- 1.3 When this Council adopted the Pavement Licensing provisions it resolved to allow applications to be made free of charge, although the legislation allowed for a maximum fee of £100.

## **2 REPORT**

- 2.1 In considering the extension of the Pavement Licensing regime, the Licensing and Appeals Committee considered that it would now be appropriate to introduce an application fee to avoid the system being subsidised by the local council tax payer.

Although the maximum fee allowed by the legislation is £100, the Committee recommended that a fee of £80 be applied to all applications seeking to extend Pavement Licences beyond 30 September 2021. Officers consider that this amount would cover the basic costs of receiving and processing applications and then issuing decisions, given the relatively low level of complaints that the current system has generated.

- 2.2 The Licensing and Appeals Committee has no powers to set licence fees and therefore this matter has to be referred to this Committee for ratification.

### **3 RISK ASSESSMENT**

#### **3.1 Legal**

The Council is required to set and publish all the fees and charges. Therefore this complies with its obligation and thus the legal risk is low.

#### **3.2 Financial**

The proposed licence fee is intended to offset costs incurred. The financial risk is therefore assessed as low.

### **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

### **5 CONTACT INFORMATION**

Tim Braund, Director of Regulatory Services  
Tel: 01629 761118  
Email: [tim.braund@derbyshiredales.gov.uk](mailto:tim.braund@derbyshiredales.gov.uk)

Eileen Tierney, Licensing Manager,  
Tel: 01629 761374  
Email: [eileen.tierney@derbyshiredales.gov.uk](mailto:eileen.tierney@derbyshiredales.gov.uk)

### **6 BACKGROUND PAPERS**

None

### **7 ATTACHMENTS**

None

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Regulatory Services

## **ASSET MANAGEMENT PLAN – LAND HOLDINGS REVIEW PHASE 2**

### **PURPOSE OF REPORT**

This report represents the second phase of an ongoing review of the Council's land and property assets in accordance with the Asset Management Plan. Phase 2 of the Land Holdings Review covers 2 sites in Matlock in which queries or expressions of interest have been received.

### **RECOMMENDATION**

1. That a Community Asset Transfer by a lease of Site 1 to the Starkholmes Village Hall Trustees be approved on the terms outlined in Appendix 1 of this report.
2. That a Community Asset Transfer of the freehold of Site 2 to Matlock Town Council be approved on the terms outlined in Appendix 1 of this report.
3. Should the terms of the lease of Site 1 to the Starkholmes Village Hall Trustees or the terms of the transfer of Site 2 to Matlock Town Council both detailed in Appendix 1, require variation then delegated authority is granted to the Estates and Facilities Manager to negotiate and agree varied terms in order for the lease and the transfer to progress.
4. That it is noted that the disposals in 1 and 2. above comprise undervalue transactions permitted under the General Disposal Consent 2003.
5. That each party will bear their own legal costs.

### **WARDS AFFECTED**

Matlock St Giles

### **STRATEGIC LINK**

Every plan, strategy policy, and action of the District Councils flows from the Corporate Plan. The Corporate Plan is put into effect by service plans, policies and strategies including the Asset Management Plan which ensures that the District Council's land and property assets are managed in support of corporate priorities.

## **1 BACKGROUND**

- 1.1 The Asset Management Plan (AMP) 2019 -2023 is intended to set out the Council's strategic approach to the management of its land and property and to provide a

framework within which property asset decisions can be made in support of the Council's corporate aims and objectives.

- 1.2 The Asset Management Plan recommends to support and enable Community Asset Transfers of land and buildings.
- 1.3 This the second first of a number of phases of reports to consider the future arrangements for surplus land and buildings across the District.

## **2 REPORT**

- 2.1 Phase 2 of the Land Holdings Review covers 2 sites in which queries or expressions of interest have been received. Following consideration of planning, legal and estate management factors, together with operational requirements, recommendations are made regarding whether the sites should be retained, allocated for a particular use, leased, transferred freehold or sold and the terms which would apply.
- 2.2 An appraisal of each site has taken place comprising advice on any planning constraints, legal restrictions and maintenance liabilities/costs.
- 2.3 Site 1 is a Community Asset Transfer (CAT) by way of a lease renewal to Starkholmes Village Hall Trustees with the new terms reflecting an extended term and accurately recording the land occupied.
- 2.4 Site 2 is a Community Asset Transfer (CAT) of the freehold the Starkholmes Recreation Ground to Matlock Town Council. This transfer will be subject to existing agreements (including the lease recommended in Site 1).
- 2.5 The results and recommendations for 2 sites are summarised in Appendix 1 together with plans of each site.
- 2.6 In respect of site nos. 1 and 2 Ward Members and the relevant Town Councils have been consulted on the proposed transactions and any comments received will be reported to the meeting.

## **3 RISK ASSESSMENT**

### **3.1 Legal**

The title to the property will need to be checked to ensure that there are no matters preventing the disposal. All appropriate steps will need to be completed to ensure compliance with all required procedures on this disposal.

Subject to the above, the legal risk is assessed as low.

### **3.2 Financial**

The CAT for site 2 will remove a liability for future maintenance.

The financial risk is assessed as low.

## **4 OTHER CONSIDERATIONS**

4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

## **5 CONTACT INFORMATION**

5.1 Mike Galsworthy - Estates and Facilities Manager  
Telephone: 01629 761207  
Email: [mike.galsworthy@derbyshiredales.gov.uk](mailto:mike.galsworthy@derbyshiredales.gov.uk)

## **6 BACKGROUND PAPERS**

6.1 None

## **7 ATTACHMENTS**

7.1 None

## CLT REPORT DRAFT - AMP- LAND HOLDINGS REVIEW - PHASE 2

### APPENDIX 1

### SITE INDEX

1.	Land at Village Hall, Starkholmes Recreation Ground, Matlock	CAT (Lease)
2.	Land Starkholmes Recreation Ground, Matlock	CAT (Freehold)

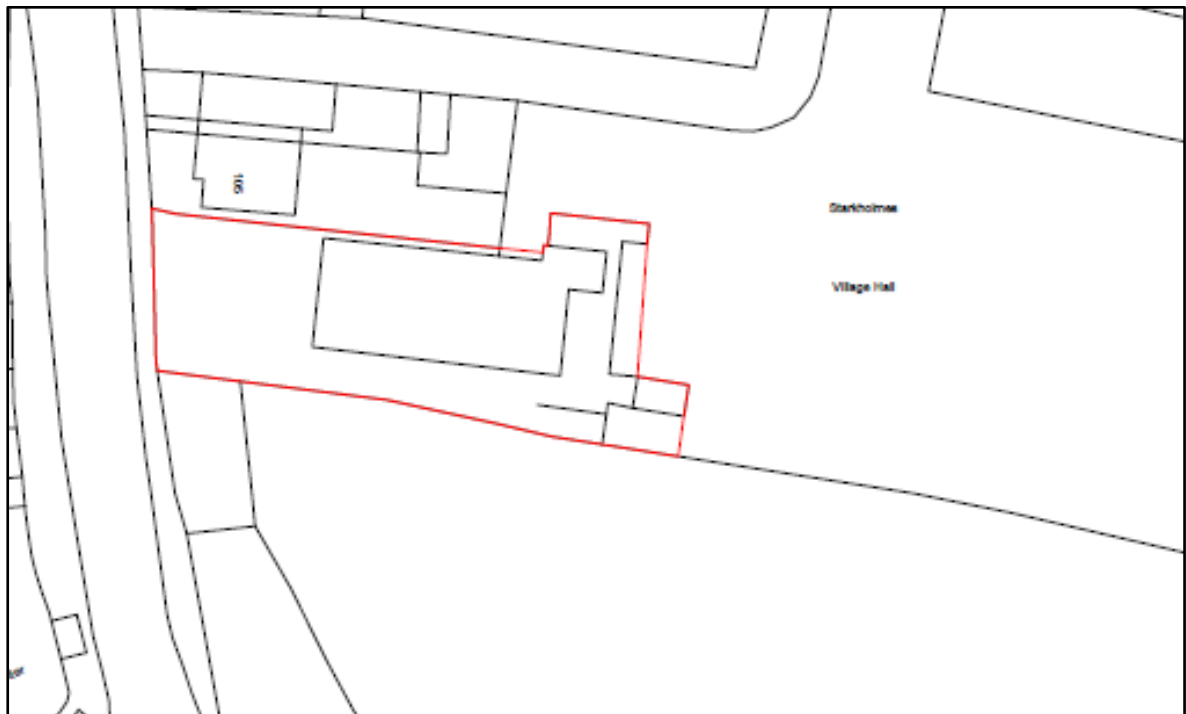


Land outlined in red is DDDC ownership, Land outlined in blue is leased to Starkholmes Village Hall Trustees

**Site 1 – Land at Starkholmes Village Hall, Starkholmes Recreation Ground, Matlock**



**Plan 1 - Title Plan – DY414146 (area outlined in blue is current lease to Village Hall)**



**Plan 2 - Lease plan for new lease to Starkholmes Village Hall – area outlined in red**

## LAND HOLDINGS REVIEW

### SITE NO. 1

ADDRESS	Land at Starkholmes Recreation Ground, Matlock  Reference A/00319 05/0213 & 07/0379
REQUEST RECEIVED	Starkholmes Village Hall have requested a CAT by long lease of their existing interest and some additional land to cover their encroachment
DESCRIPTION/LOCATION	The site of Starkholmes Village Hall is directly accessed from Starkholmes Road.  There is parking at the front and the building is to the rear of the site with an extension and accessible ramps and a shed to the rear.  The extension, ramp and shed are outside their existing leased area.  The Starkholmes Village Hall Trustees own all the buildings and occupy under via a ground lease.
OWNERSHIP	Freehold owned by Derbyshire Dales District Council under title DY414146.
LEGAL COVENANTS RESTRICTIONS	Public Open Space consultation closed on 16 January 2020 and no objections were received.
PLANNING	N/A
MAINTENANCE	The buildings are the responsibility of Starkholmes Village Hall Trustees.
HEALTH & SAFETY/RISKS	None noted.
OFFICER COMMENT	To regularise the occupation and provide a longer lease it is proposed to accept the surrender of the existing lease which has 30 years to run and enter into a new lease.  The new lease of the land would be on the following terms - <ul style="list-style-type: none"><li>○ term 50 years</li><li>○ peppercorn rent</li></ul>



	<ul style="list-style-type: none"> <li>○ to pay all rates, taxes and outgoings</li> <li>○ to keep buildings in repair</li> <li>○ yield up at end of term removing buildings and services to satisfaction of the landlord</li> <li>○ not to assign, charge or underlet</li> <li>○ comply with statutory obligations</li> <li>○ ensure compliance with DDDC policies including protecting children &amp; vulnerable adults and equality</li> <li>○ Maintain public liability insurance to £10million</li> <li>○ each party pays their own costs.</li> </ul>
RECOMMENDATION	To grant a new lease 50 year ground lease to Starkholmes Village Hall Trustees on the above terms

## Site 2 – Land at Starkholmes Recreation Ground, Matlock



**Plan 1 - Title Plan – DY414146** (area outlined in blue is current lease to Village Hall)

## LAND HOLDINGS REVIEW

### SITE NO. 2

ADDRESS	Land at Starkholmes Recreation Ground, Matlock  Reference A/00319 05/0213 & 07/0379
REQUEST RECEIVED	Matlock Town Council (MTC) have requested the Community Asset Transfer (CAT) of the recreation ground at Starkholmes
DESCRIPTION/LOCATION	The site is approx. 2.45 acres and slopes gradually and then more steeply to the east. It is accessed on the west elevation from Starkholmes Road via a narrow access between Nos. 101 and 103 Starkholmes Rd. On the east it is accessed from an unadopted and unregistered track that leads off Riber Road.  From west to east the site consists of - <ul style="list-style-type: none"> <li>- an access lane and the village hall</li> <li>- a grassed area which contains a small play area maintained by DDDC</li> <li>- an overgrown area of grass and brambles with a path</li> <li>- small area for parking of approximately 6 cars</li> </ul>
OWNERSHIP	Freehold owned by Derbyshire Dales District Council under title DY414146.  The access on the east elevation is not recorded.
LEGAL COVENANTS RESTRICTIONS	Public Open Space consultation closed on 16 January 2020 and no objections were received.
PLANNING	N/A
MAINTENANCE	The grassed area and play area is regularly maintained by DDDC. The east end of the site is allowed to become overgrown.
HEALTH & SAFETY/RISKS	None noted.
OFFICER COMMENT	The site requires a number of title entries to ensure that the site reflects its current use and occupation. This was discussed with MTC and

they had a preference for having these items dealt with prior to transfer. The issues are -

1. regularising the right of way to the adjoining private stables. POS has been undertaken without any representations and can proceed on delegated authority.



2. correcting the boundary registration between Falcon Cliff and the south east boundary of the recreation area. This will be done by a transfer by delegated authority. POS is required.



3. surrendering and re-granting the lease to the village hall to regularise the occupancy
4. registering a vehicular right of way at the east of the site for DDDC

The owners of Nos 103 and 105 Starkholmes Rd either have vehicular access by licence or have requested access and land to the rear. This can be arranged under licence by MTC when the land is transferred to MTC.

There have also been various requests for use of recreation ground. Activities including use to compliment the hire of the village hall, tree planting and a community orchard. It is felt these activities can be best arranged and coordinated to satisfy the community need locally by MTC once the land is transferred.

Suitable terms for the CAT of the freehold of Starkholmes Recreation Ground to MTC are as follows –

	<ul style="list-style-type: none"> <li>○ Consideration of £1</li> <li>○ Subject to all licences/leases/wayleaves and covenants</li> <li>○ Protection (such as pre-emption clause or other on legal advice) to ensure that it remains a community asset and public open space</li> <li>○ Area to transfer is title plan DY414146 (approx. area shown in Plan 1)</li> <li>○ Each party pay their own costs</li> </ul> <p>In order to assist MTC take over the responsibility of the recreation ground DDDC will enter into a sub-lease of the play area for up to 5 years to maintain the play area but excluding the obligation or renewing or replace play equipment. This will be approved under delegated authority and will be subject to POS.</p>
RECOMMENDATION	To transfer the title to MTC as a CAT on the terms outlined above

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Regulatory Services

## **STARKHOLMES ALLOTMENTS**

### **PURPOSE OF REPORT**

This report details a request from Starkholmes Allotment Association for Derbyshire Dales District Council to consider the potential to compulsorily purchase the land on which the allotments are currently sited, in order to ensure the long term retention of this land as allotments.

### **RECOMMENDATION**

1. That the District Council considers the request made by Starkholmes Allotment Association;
2. That the request from Starkholmes Allotment Association to compulsorily purchase the current site of Starkholmes allotments be declined.

### **WARDS AFFECTED**

Matlock St Giles

### **STRATEGIC LINK**

The provision of land for allotments links with the District Council's priority of Place: keeping the Derbyshire Dales clean, green and safe.

## **1 BACKGROUND**

- 1.1 Starkholmes allotments are located on a 0.8 hectare parcel of land to the east of Starkholmes Road, neighbouring the village hall. It is understood that this land has been used as allotments for more than 100 years, according to the Allotment Association. The land is in private ownership and it is understood that the land owner now wishes to reclaim the land and has served notice to quit on the Association.
- 1.2 Starkholmes Allotment Association submitted a nomination to list the land as an Asset of Community Value (ACV). This nomination was considered by the Head of Regulatory Services, in accordance with the scheme of delegation. The land owner's legal representatives have put forward reasons why they believe that the land should not be listed as an ACV, the most important of which was that the land owner had no intention of allowing its current use to continue beyond the notice period, which expires on 30 September 2022. However, previous decisions at First and Upper-tier Tribunal level have indicated that an owner's declaration need not be treated as conclusive, as to do so would confer a unilateral power on the land owner to prevent a listing. In any case, there is clearly a future use that furthers the social wellbeing or social interests of the local community until at least 30 September 2022.

Consequently the land has been listed as an ACV, although it should be noted that the owner has the right to request an internal review of that decision and may appeal to the First-tier Tribunal if he disagrees with the findings of that review.

- 1.3 The Allotment Association has now written to the Council's Director of Regulatory Services, requesting that the Council considers the compulsory purchase of this land, in order to protect its long-term future as allotments. It is understood that a similar request has been submitted to Matlock Town Council.

## **2 REPORT**

- 2.1 Section 23 of the Small Holdings and Allotments Act 1908 states that where a council (district, borough or parish) receives written representations from any six electors, or persons liable to pay council tax, who are resident within that council area that there is a demand for allotments, then the council shall take those representations into consideration.
- 2.2 Section 23 of the Act also states that if the council (district, borough or parish) is of the opinion that there is a demand for allotments within its area then the council shall provide a sufficient number of allotments. It should be noted that the wording of this section is such that this is a duty, rather than a discretionary power.
- 2.3 The Allotment Association represents 27 plot holders who are all resident within the district. Collectively they have asked the District Council to consider the compulsory purchase of the land. As more than six people have made representation, the section 23 duty is triggered and the District Council must consider the request.
- 2.4 Section 25 of the 1908 Act contains a power (not a duty) whereby a district, borough or parish council may purchase land either by agreement or compulsorily, for the purpose of providing allotments. The process for compulsory purchase is set out in section 39 of the 1908 Act and in the Acquisition of Land Act 1981.
- 2.5 The Council has not delegated decision making in relation to this issue to officers and therefore the decision as to how the District Council should proceed must be made by Members. However, officers believe that there are a number of factors that should be taken into account:
- The Asset Management Plan makes no reference to the acquisition of land for allotments;
  - There is no provision within the Capital Programme for such an acquisition;
  - The potential cost of acquisition is not known;
  - Officers do not believe that there is a shortage of allotments across the District as a whole and as such this request could be more suited to the Town Council.
- 2.6 Taking all these factors into account, officers are of the view that whilst the request made by the Allotment Association must be considered, that are not sufficient grounds for the District Council to take compulsory purchase action in respect of the current site of Starkholmes Allotments.

### **3 RISK ASSESSMENT**

#### **3.1 Legal**

The Council has the power to compulsory purchase land for a number of reasons including for the provision of Allotments. To Compulsory Purchase land needs Secretary of State approval and a number of steps are required before that stage. Even if approved for purchase the decision can be legally challenged which increases the time and cost of purchasing the land. This can result in costs over £10,000 to purchase the land if contested.

Further one of the requirements is to show that attempts to purchase the land by agreement has failed. If the purchase of the land is approved in principle by this committee, further reports will be required in order to obtain the finance to purchase the land and also final approval is required before submitting a request to the Secretary of State for approval confirming that all negotiations have failed and that the Council believe there are insufficient allotments and that there is no other land that could be used to provide allotment space available.

#### **3.2 Financial**

As stated in this report, there is no provision within the Capital Programme for such an acquisition and the potential cost of acquisition is not known. To proceed with a compulsory purchase would, therefore, be assessed as a high financial risk; the approval of the report recommendations is assessed as a low financial risk.

### **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

### **5 CONTACT INFORMATION**

- 5.1 Tim Braund, Director of Regulatory Services  
Tel: 01629 761118  
Email: [tim.braund@derbyshiredales.gov.uk](mailto:tim.braund@derbyshiredales.gov.uk)

### **6 BACKGROUND PAPERS**

- 6.1 Letter from Starkholmes Allotment Association dated 11 July 2021

### **7 ATTACHMENTS**

None



Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Regeneration and Policy

---

## **REVISED EQUALITY, DIVERSITY AND INCLUSION POLICY**

### **PURPOSE OF REPORT**

To seek Members approval for a revised Equality, Diversity and Inclusion Policy.

### **RECOMMENDATION**

That the revised Equality, Diversity and Inclusion Policy as set out in Appendix 1 be adopted.

### **WARDS AFFECTED**

All

### **STRATEGIC LINK**

The District Council has a statutory duty to pay due regard to the need to eliminate discrimination, harassment and victimisation; advance equality of opportunity; and encourage good relations between different groups of people. The Equality, Diversity and Inclusion Policy helps the District Council meet its statutory duties and is linked to the Council's Corporate Plan 2020-2024.

---

## **1 BACKGROUND**

1.1 Derbyshire Dales District Council has a statutory duty to encourage and promote equality as an employer in the provision of its services and in carrying out its public functions. The key piece of legislation relating to this duty is the Equality Act 2010 which applies to all individuals, businesses and organisations. The Act includes the Public Sector Equality Duty which applies to the District Council. The Duty requires the District Council consider how its policies or decisions affect people who are protected under the Equality Act. The District Council has a Duty to produce Equality Objectives and to publish Equality Data.

1.2 In order to assist the District Council in complying with this legislation and in meeting its corporate objectives, the District Council has an Equality and Diversity Policy. This was first adopted by the District Council in 2004, and amended in March 2016. Given the age of the Equality and Diversity Policy and that the Council adopted a new Corporate Plan in March 2020, it was considered appropriate to review the policy.

1.3 Our Equality Objectives for 2020 - 2022 are informed by the current Equality Policy and linked to the priorities within our Corporate Plan. The updated Policy, newly named the Equality, Diversity and Inclusion Policy – retains these objectives, as follows,

- **Objective 1:** Maintain high customer satisfaction about the quality of services we deliver
- **Objective 2:** Implement the Derbyshire Dales Climate Change Strategy and make improvements to the operational aspects of the Clean & Green services
- **Objective 3:** Promote housing development that meets the needs of the present and future population of the District
- **Objective 4:** Seek to attract investment that supports the local economy including the provision of jobs for younger people
- **Objective 5:** One team, working together as one Council with one purpose

1.4 The Council's Equality, Consultation and Engagement Plan 2020 – 2022 supports the delivery of its statutory equality duties. It was approved by the Governance and Resources Committee on 20 August 2020. The Plan sets out how the Council takes account of equalities issues in the decisions it makes, the Council's equality objectives, and the steps it is taking to achieve them. Equality performance indicators are used to monitor progress and plan equality improvement actions for the year ahead. One of the actions in the 2020-22 Plan was to conduct a light touch review of the Equality and Diversity Policy – it is that action that the present report completes.

1.5 Changes to legislation since 2016, when this policy was last reviewed, have been introduced; for example, changes to Section 78: including compulsory reporting on the [gender pay gap](#) for organisations employing 250 or more employees, changes to [age exceptions for occupational pensions schemes](#), a requirement for [licensed taxi drivers](#) to provide services to wheelchair users unless they could prove a need for a medical exemption, and so on. Analysis of all changes since 2016 has been undertaken as part of this review process.

1.6 The revised policy seeks to ensure that equality continues to be enshrined in the District Council's operations and that the Council takes account of equalities issues in the decisions it makes.

1.7 The revised Equality policy as set out in Appendix 1 is a tool not only to ensure compliance with legislation, but to guide decisions and achieve rational outcomes. The policy is a statement of intent; a framework to follow in order to achieve compliance with legislation and the Corporate Plan.

## **2 CONSULTATION**

2.1 As the Equality and Diversity Policy has relevance to employees of the District Council it was presented to the Employee Group on 8<sup>th</sup> July, and feedback invited. Comments received from the Employee Group have been addressed in the accompanying policy. Comments from employees were generally positive about the updated content, structure and style. Some formatting improvements were

identified, along with requests for clarification of some points and examples around civil partnerships, criminal convictions and application of the policy to contractors. These have been addressed.

2.2 Consultation with Elected Members has taken place. Thus far, one comment has been received. It relates to how the District Council assesses policies that may affect people with the protected characteristic race. In response, the purpose of the EIA process is described more clearly in the policy at an early stage.

2.3 The draft Policy has also been subject to consultation with a number of other key stakeholders including the Derbyshire Dales Council for Voluntary Services [CVS], the African and Caribbean Community Association [ACCA], Derbyshire Dales Youth Forum, and Derby and Derbyshire Age UK. The following comments were received;

- CVS – positive feedback and a comment on whether we can add evidence on how we ensure equity of service in our rural areas. Evidence provided by the Housing Director and others has been added to the policy [particularly in paragraph 16.5]
- ACCA – the wording and language is appropriate and the overall impression given is positive

2.4 Consultation took place with the Joint Consultative Group (JCG) at their meeting on 15<sup>th</sup> September 2021. Feedback from the JCG was positive and no substantive issues that necessitated any further amendment of the policy were made.

### **3 KEY ELEMENTS OF THE POLICY**

3.1 The policy covers the Council's relationships with, and responsibilities to, its residents, employees, contractors and visitors.

3.2 The way the information is presented has been reorganised. A brief introduction (developed from the Council's Dignity and Respect Leaflet) provides context to the policy. It describes the culture of dignity and respect for all, how Derbyshire Dales District Council has a responsibility to set a good example to everyone in the Derbyshire Dales, and to encourage people to consider equality, inclusion, dignity and respect for everyone in their everyday lives.

3.3 A more detailed description of how the Council meets varying equality standards and the actions taken to meet the requirements of the Equality Act 2010 follows the introduction. It includes reference to the Council's priority areas and describes how the Council will strive to demonstrate the principles of diversity and inclusion in its everyday activities, roles, policies and functions. It shows how employees, Members and Managers all have a right not to be discriminated against, and that overall responsibility for this policy lies with Elected Members and the Chief Executive.

3.4 The Policy statement follows and includes the purpose of the policy, its scope, the relevant legislation, and briefly how the policy is implemented, communicated, monitored and reviewed. Responsibility for enacting the policy is detailed in the next section of the policy, as well as the processes and procedures the Council

uses to ensure it meets both legislative and its own standards in relation to equality, diversity and inclusion.

3.5 Also described are how the Policy and the principles of equality, diversity and inclusion at the Council are applied during recruitment, with service providers and our partners, and when engaging with the community.

3.6 Two appendices follow. The first is demographic information on Derbyshire Dales' residents. It includes data on gender, age, disability, pregnancy, wages, debt, and so on. Appendix two consists of a number of examples that illustrate some of the ways the Council has applied the policy in its work. Examples include the Hurst Farm Project, an Equality Impact Assessment on the reopening of toilets, equality training, and descriptions of corporate actions and KPIs that particularly apply to equality and diversity.

#### **4 COMMUNICATING THE POLICY**

4.1 The current policy is available on the District Council's [website](#) and any updates and amendments are also published in the same place. A copy is made available to newly elected members and the draft policy is available on the Members Portal. All new employees and elected members receive Equality Training as part of their induction. Refresher training is offered regularly to elected members and employees.

4.2 Contractors and any others working with the District Council will be made aware of their need to adhere with this policy.

#### **5 MONITORING AND REVIEW**

5.1 The District Council has a number of different methods to monitor and review its activities and ensure it meets the requirements of the Equality, Diversity and Inclusion Policy, and the [Equality Act 2010](#).

5.2 Members and the Corporate Leadership Team review and support the Council's progress in maintaining its commitment towards equality in employment and service provision.

5.3 In order to do this and comply with one of the requirements of the [Equality Act 2010](#), the District Council carries out annual equalities monitoring to ensure that everyone is treated fairly. Monitoring data is published annually as part of the Council's [Equality Information](#). The information relates to people who have a relevant protected characteristic, who are employed by the Council, or are other people affected by its policies and practices. The data is used to inform the development of Corporate and Service Plans and during the Equality Impact Assessment process.

5.4 Progress on [Equality Plans](#) are monitored by the Corporate Leadership Team and reported annually to Members. The Plan is available to the public via the Council's web [site here](#).

- 5.5 The [Equality Duty](#) supports good decision making – it encourages the District Council to understand how different people will be affected by their activities, so that policies and services are appropriate, accessible and meet different people’s needs. By understanding the effect of activities on different people, the Council is better placed to deliver policies and services that are efficient and effective.
- 5.6 The Council uses Equality Impact Assessments to meet the requirements of this duty. The potential impact of a change to a policy or service is assessed against each of the protected characteristics. Three things are considered: whether there are any differential or adverse impacts upon people according to their protected characteristic; whether there is evidence of direct or indirect discrimination; and whether the policy, service, project etc could lead to harassment or victimisation.
- 5.7 Part of the process is consultation with representatives of groups with protected characteristics, such as ACCA, the CVS, Derby and Derbyshire Age UK, and Derbyshire Dales Youth Forum. Consultation also takes place with residents, employees and other external stakeholders where considered necessary.
- 5.8 Feedback is incorporated into the Equality Impact Assessment and areas are identified where the policy, service, or project may need amending to meet the needs of the Public Sector Equality Duty. Potential solutions are identified and recorded. The EIA then forms part of the development and approval process for the policy, service or project.

## **6 RISK ASSESSMENT**

### **6.1 Legal**

Under the provisions of the Equality Act 2010, the District Council has specific statutory duties. All decisions taken by the Council, all services provided or enabled by the Council and all personnel functions of the Council are required to take account of this duty. Failure to comply with the equality duty could render the Council open to legal challenge. The areas of activity identified within this report seek to reduce any potential risk. However, this area is still considered to be a medium legal risk in light of the requirement to demonstrate that councils have consciously considered their obligations.

### **6.2 Financial**

The costs of addressing the statutory requirements in relation to equality are contained within existing service budgets. As such the financial risk is low. However failure to comply with the relevant statutory requirements may expose the District Council to legal challenge and therefore the potential for higher financial risks.

### **6.3 Corporate Risk**

Progressing the activity identified within the report will help manage the risks of legal challenge, enforcement action for non-compliance with statutory duties relating to equality and the potential for loss of good reputation.

## **7 OTHER CONSIDERATIONS**

In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

## **8 CONTACT INFORMATION**

Policy Manager - Mike Hase

Tel: 01629 761251

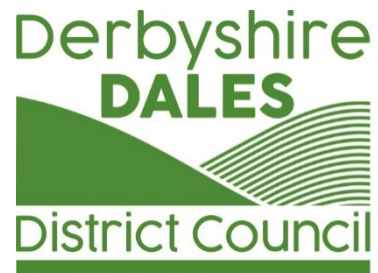
Email: [mike.hase@derbyshiredales.gov.uk](mailto:mike.hase@derbyshiredales.gov.uk)

## **9 BACKGROUND PAPERS**

Governance and Resources Committee 20 August 2020: Equality, Consultation & Engagement Plan 2020-2022

## **10 ATTACHMENTS**

Appendix 1 – Equality, Diversity, and Inclusion Policy



# **Equality, Diversity and Inclusion Policy**

Adopted 2004

Amended March 2016

Amended June 2021

**TABLE OF CONTENTS**

AN INTRODUCTION TO EQUALITY, DIVERSITY AND INCLUSION AT  
DERBYSHIRE DALES DISTRICT COUNCIL ..... 3

EQUALITY: MEETING THE STANDARD at DDDC ..... 4

POLICY STATEMENT ..... 5

EQUALITY POLICY: RESPONSIBILITY and PROCEDURES ..... 10

APPENDIX ONE: THE DERBYSHIRE DALES COMMUNITY ..... 15

APPENDIX TWO: CASE STUDIES; EXAMPLES of EQUALITY, DIVERSITY and  
INCLUSION ..... 17



## **AN INTRODUCTION TO EQUALITY, DIVERSITY AND INCLUSION AT DERBYSHIRE DALES DISTRICT COUNCIL**

Around 70,000 people live and work in the Derbyshire Dales, and thousands of people visit throughout the year. The District Council believes it is important that everyone is treated with dignity and respect.

The District Council has a number of policies and processes that help ensure the people who work for the Council and use their services are treated in a fair and equitable way; that their needs are met in an appropriate way; and that they are not unlawfully discriminated against, victimised or harassed.

We believe that Derbyshire Dales District Council has a responsibility to set a good example to everyone in the Derbyshire Dales, and to encourage people to consider equality, inclusion, dignity and respect for everyone in their everyday lives.

## **EQUALITY: MEETING THE STANDARD at DDDC**

At Derbyshire Dales District Council, we take action to ensure that we meet the requirements of the [Equality Act 2010](#).

We seek to ensure our workforce serves the whole community, that our services are accessible and meet the needs of all our residents. We recognise the diverse nature of the District, particularly the higher than average levels of older and disabled people, and the lower than average wages of people that work in the Derbyshire Dales.

We endeavour to ensure that employees, potential employees, contractors, partners, clients and customers are treated with dignity and respect.

The District Council opposes all forms of discrimination and undertakes not to discriminate unfairly on the grounds of age, race, pregnancy, marriage and civil partnership, gender reassignment, disability, sexual orientation, sex, religion or belief, responsibility for dependents, social or economic status, or criminal conviction [if it is spent, for jobs where the Rehabilitation of Offenders Act 1974 applies]. Certain jobs, [often those involve working with children and vulnerable adults, or finance] do require disclosure of spent convictions, as these jobs are exempt from the ROA.

At every possible step the specific circumstances of individuals will be taken into account to ensure that they are treated fairly. Decisions on service provision and employment are based on an objective assessment of all relevant criteria.

The District Council's priority areas are set out in the [Corporate Plan 2020-24](#) and reflect the importance of individuals in everything we do.

- People; providing a high quality customer experience
- Place; keeping the Derbyshire Dales safe, clean and green
- Prosperity; supporting better homes and jobs

We know that being a diverse and inclusive employer helps us fulfil our responsibility to make a difference for Derbyshire Dales' residents. We work to ensure all employees are treated as individuals, fairly and in a consistent way. We promote a culture of respect and dignity and active challenging of discrimination.

The District Council will strive to demonstrate the principles of diversity and inclusion in its everyday activities, roles, policies and functions. Employees have the responsibility both morally and legally not to discriminate against individuals or groups in the course of their duties and in the course of their employment.

Elected Members and senior managers regularly monitor and review Council actions to ensure equality, diversity and inclusion requirements are met, and to identify areas for improvement for inclusion in Service Plans.

Overall responsibility for this policy lies with Elected Members and the Chief Executive.

## **POLICY STATEMENT**

How Derbyshire Dales District Council works to satisfy the equality, diversity and inclusion needs of residents and employees, whilst meeting its legal responsibilities.

### **1 PURPOSE**

1.1 This policy describes our approach to equality, diversity and inclusion. It describes the way we meet the requirements of equality and diversity legislation and the needs of residents and employees. It influences decision making, actions and activities.

### **2 SCOPE**

2.1 This policy statement confirms the District Council's commitment to ensuring those responsible implement both equality and diversity legislation and the Derbyshire Dales District Council policy. It applies to all elected members, employees, contractors and all others who are involved in the business of the council.

### **3 INTRODUCTION**

3.1 Derbyshire Dales District Council has a statutory duty to encourage and promote equality as an employer, in the provision of its services, and in carrying out its public functions.

3.2 We welcome difference and recognise that it brings valuable insights to the workplace and the services we provide.

3.3 We endeavour to ensure that employees, potential employees, contractors, partners, clients and customers are treated with dignity and respect. We are aware of the higher than average number of disabled and elderly people in our District, which provides a key focus for our activities and services.

3.4 Managing diversity means ensuring that everyone;

- Feels included and respected
- Has access to the same opportunities and services
- Is treated fairly

### **4 LEGISLATION**

4.1 The key piece of legislation relating to this duty is the [Equality Act 2010](#) which applies to all individuals, businesses and organisations. The Act includes the [Public Sector Equality Duty](#) which applies to the public sector, including the District Council. The Duty ensures authorities consider how their policies or decisions affect people who are protected under the Equality Act.

4.2 The [Equality Act 2010](#) protects people on the basis of nine 'protected characteristics' to ensure that everyone really does receive a fair chance of employment and use of services. The protected characteristics are:

4.3 Age - when you are treated differently because of your age, or someone's perception of your age or because of your association with someone of a certain age. The treatment could be a one-off action, or as a result of a rule or policy based on age. It doesn't have to be intentional to be unlawful.

4.4 Religion or belief (including non-belief) - religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief.

4.5 Disability - a person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

4.6 Pregnancy and maternity - pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

4.7 Gender reassignment - the process of transitioning from one gender to another.

4.8 Sex / gender – sex refers to the biological aspects of an individual as determined by their anatomy and assigned at birth, gender is where an individual may see themselves as a man, a woman, as having no gender, or as having a non-binary gender – where people identify as somewhere on a spectrum between man and woman

4.9 Marriage and civil partnership (with regard to discrimination) - Marriage can be defined as a formal union between two people (same-sex or different sex persons) as recognised by law. Same-sex and heterosexual couples can have their relationships legally recognised as 'civil partnerships' in England. Civil partners must be treated the same as married couples on a wide range of legal matters. Civil partners must not be treated less favourably than married couples

4.10 Sexual orientation - whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

4.11 Race - refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

4.12 Information on Derbyshire Dales' residents is drawn from a number of sources and is used to inform the development of Council plans and priorities. A detailed picture of the community is included as Appendix One.

4.13 The [Public Sector Equality Duty](#), which is part of the [Equality Act 2010](#), requires public authorities to have due regard to the need to;

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it

- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

4.14 Authorities must also publish information to demonstrate their compliance. Derbyshire Dales' equality data from 2016 to 2020/21 can be found on our [website here](#).

4.15 The [Public Sector Equality Duty](#) supports good decision making – it encourages councils to understand how different people will be affected by their activities, so that policies and services are appropriate and accessible to all and meet different people's needs.

4.16 The District Council carries out Equality Impact Assessments on proposed changes to our policies, services and actions. The process of carrying out an EIA involves considering how the proposed change, or new policy/service could impact on every group with protected characteristics and residents living in our rural areas. It identifies potential benefits and dis-benefits, identifies areas that need addressing and suggests potential changes. Copies of these assessments can be found on our [website here](#). An example of how EIAs contribute to decision making is included in the case studies in Appendix 2.

4.16 By understanding the effect of its activities on different people, and how inclusive public services can support and open up people's opportunities, the District Council is better placed to deliver policies and services that are both effective and efficient. The Equality Duty therefore helps public bodies to deliver their objectives

## 5 IMPLEMENTATION

5.1 The District Council is committed to the implementation of this policy statement by:-

- Acting in accordance with all relevant legislation and codes of practice
- Making sure that all employees, partners and contractors are aware of this policy statement
- Developing and training our members and employees to help them recognise equality issues and further understand their role and responsibilities in achieving equality
- Including equality at every step of organising and delivering services so that it becomes integral to the workings of the council
- Developing effective auditing and monitoring procedures for services and employment. Reporting at least once a year, to members, employees and the community on how we put this policy statement into practice
- Promoting the principle of equality and diversity in all that we do

5.2 Our Equality Objectives for 2020 - 2022 are informed by the priorities within our Corporate Plan. Priorities within the plan are determined through consultation with local people.

5.3 The Corporate Plan can be found on [our website](#). In addition, our corporate culture is 'One Team, One Council, One Purpose'.

5.4 The Council's equality objectives follow:

- Objective 1: Maintain high customer satisfaction about the quality of services we deliver
- Objective 2: Implement the Derbyshire Dales Climate Change Strategy and make improvements to the operational aspects of the Clean & Green services
- Objective 3: Promote housing development that meets the needs of the present and future population of the District
- Objective 4: Seek to attract investment that supports the local economy including the provision of jobs for younger people
- Objective 5: One team, working together as one Council with one purpose

5.5 Equality targets are set each year and integrated within service plans to help measure progress towards these objectives. Our equality objectives and targets for 2020 - 2022 are set out in the [Equality, Consultation and Engagement](#) action plan

## 6 COMMUNICATING THE POLICY

6.1 This policy is available on the District Council's [web site](#). A copy is made available to newly elected members and all new employees will receive Equality Training as part of their induction. Refresher training will be offered regularly to elected members and employees.

6.2 Contractors and any other agencies working with the District Council will be made aware of their need to adhere with this policy.

## 7 MONITORING AND REVIEW

7.1 The District Council carries out annual equalities monitoring to ensure that everyone is treated fairly.

7.2 [Monitoring data](#) is published annually as part of the Council's Equality Information. The information relates to people who have a relevant protected characteristic, who are employed by the Council, or are other people affected by its policies and practices. The data is used to inform the development of Corporate and Service Plans and during the Equality Impact Assessment process. For example, the [Corporate Plan 2020/24](#) includes actions on improving

housing for people with disabilities, building affordable homes for families and providing advice and support to people with debt problems.

7.3 Members and Senior Managers review and support the District Council's progress in maintaining its commitment towards equality in employment and service provision. Progress on [Equality, Consultation and Engagement Plans](#) are monitored by the Corporate Leadership Team (Directors and the Chief Executive) and reported annually to Members. The Plan is available to the public via the Council's [web site](#).

## **8 COMPLIMENTS AND COMPLAINTS**

8.1 If you have any compliments, complaints or comments about council services or councillors, you can inform the council by the referring to the information on our website.

## **9 ALTERNATIVE FORMATS**

9.1 This information is available in alternative formats and can be obtained by contacting the Communication and Marketing Manager [jim.fearn@derbyshiredales.gov.uk](mailto:jim.fearn@derbyshiredales.gov.uk)

# EQUALITY POLICY: RESPONSIBILITY and PROCEDURES

## 10 INTRODUCTION

10.1 The procedures used by the District Council to ensure compliance with the Equality Policy are described below. They are the methods we use to express our policy from day to day

- In employment - recruitment, training, appraisal, terms and conditions of employment, harassment/bullying, complaints, trade union representation and the employee group, all staff consultation
- In service development – Equality Impact Assessments, and consultation with public
- In customer Service – compliments and complaints processes, and consultation with the public

## 11 RESPONSIBILITIES

11.1 The District Council, as an employer and service provider, has a responsibility to promote equality and diversity. It is responsible for any act of discrimination, harassment or victimisation committed by any employee or Member, or organisation delivering services on its behalf; whether or not it was done with the District Council's knowledge or approval.

11.2 The District Council requires employees and Members, irrespective of their position, to ensure that they understand this Equality Policy and the relevant procedures and/or reporting responsibilities.

11.3 Further obligations are set out in the [Procurement Strategy](#). The Procurement Strategy requires officers of the District Council to:

- Where relevant, undertake a (proportionate) Equality Impact Assessment when planning a procurement and consider equalities issues as well as economic and sustainability issues within the business case for projects;
- Make provision within tender specifications (where appropriate) to include equality related award criteria or specific equalities outcomes to reflect the needs of different service users.

11.4 Equality obligations are included within contracts issued to other organisations and persons commissioned, or contracted, to deliver services on behalf of the District Council. Any contractor/organisation working for and on behalf of the Council, or any organisation receiving grants from the Council, must demonstrate their compliance with the Equality Act 2010.

11.5 The contractor/organisation must ensure that everyone providing, receiving or benefiting from the service is treated fairly and has access to the same opportunities without discrimination. The contractor/organisation shall ensure that no person is treated unfavourably on the grounds of their sex, sexual orientation, marriage or civil partnership, race, colour, nationality, ethnic or



national origin, religion or belief, age, disability, gender re-assignment, pregnancy and maternity or any other grounds which cannot be justified.

## **12 Responsibility of the Chief Executive**

12.1 Whilst managers and supervisors assume responsibility for the day-to-day operation of the policy, the Chief Executive is required:

(a) To assess existing employment practices in relation to this policy and advise upon remedial action where appropriate and,

(b) To co-ordinate the provision of advice and guidance to employees on equality and diversity in employment, the delivery of services and in carrying out public functions.

## **13 Responsibility of Managers and Supervisors**

13.1 Managers and supervisors must adopt employment practices and provide services which are consistent with this policy. They should promote the enactment of the Equality policy amongst their colleagues.

## **14 Employees**

14.1 Employees should co-operate with any measures to develop equality and diversity and refrain from any discriminatory actions or decisions. They should not harass, victimise, abuse or intimidate other employees or place pressure on them to act in a discriminatory manner. Employees should inform managers if they suspect that discrimination is taking place and resist any pressure to discriminate which is placed upon them by fellow employees or third parties.

## **15 Elected Members**

15.1 In line with the Code of Conduct, Members are required to take decisions which are consistent with this policy and statutory requirements. Members will also be required to take part in equality and diversity training organised by the District Council to ensure they are aware of the latest legislative requirements

## **16 ENACTING THE EQUALITY POLICY**

16.1 Examples that illustrate how we enact the policy are included in the appendices.

16.2 The District Council uses a number of ways to ensure its ongoing compliance with equality legislation and to identify areas where improvements can be made e.g. training members and officers, completing [Equality Impact Assessments](#) and consultation with the public. Details of our live and past [consultations](#) can be found on our website.

16.3 These inform internal and external service performance indicators to ensure as a minimum we comply with legislative requirements. Our aim is to exceed legislative requirements in our service delivery.

16.4 We have mechanisms in place to monitor employment practices, service provision and functions e.g. the employee group, trade union representatives, the Joint Consultative Group, regular reviews of employment practices, data collection and analysis to inform action plans, Performance Development and Review meetings. We offer individual meetings with any employee perceiving themselves to be disabled, to ensure reasonable adjustments are made for employees with a disability. We report on these as required.

16.5 The Council is keen to ensure all services are available equitably to residents wherever they live in the Derbyshire Dales. Some of the things we do to achieve this include;

- The employment of a Rural Housing Enabler whose role is to enable developments of affordable housing in villages
- Our allocation policy for all affordable homes has to meet two priorities, one to ensure we meet our statutory duty to house homeless families but also to provide some priority for rural residents
- Some of our affordable housing schemes have local connection criteria so that only people from the parish or adjoining parish will be eligible for housing
- Neighbourhood plans set out a vision for the future of Parishes and the planning policies to be used to help determine planning applications in the area/s. Consultation with residents informs the development of the plans, which are also voted on by residents
- Free [Business Advice Services](#) to small, rural businesses; helping them to thrive and grow

16.6 Our Corporate [Equality, Consultation and Engagement Action Plan](#) sets out the actions required to deliver our equality objectives and provide equalities information.

## 17 **Monitoring and Reporting**

17.1 As part of the [Public Sector Equality Duty](#) we have a statutory duty to publish a report each January, giving details of equalities data on a number of areas. Some of which are, recruitment, employees, area demographics, access to housing services, take up of leisure centre and health related activities and the Disabled Facilities Grant, community safety, hate crime levels, and the membership of our consultative online panel. Equality data reports can be found on our website for the years 2016 to 2021.

## 18 **Managing and Adapting**

18.1 The main tool used by the District Council to ensure policies and therefore services meet legislative and requirements is an Equality Impact Assessment. These are used when services, policy or procedures are subject to review of revision. They identify any potential [or existing] adverse effects on anyone with a protected characteristic, that is or could be caused by the proposed changes. Any identified adverse effects will then be reduced or eliminated by making

further revisions to the policy or procedures. Copies of completed Equality Impact Assessments are available on the [DDDC web page](#).

## **19 Recruitment**

19.1 Care is taken when advertising jobs, writing job descriptions and person specifications, shortlisting and interviewing, to ensure unlawful discrimination does not occur and that processes do not exclude members of groups that may face barriers in gaining employment.

19.2 Recruitment training is offered to staff who carry out this role.

19.3 We welcome applications from people from under-represented groups by posting all our vacancies to the Derbyshire recruitment portal. In line with our Disability Confident status we give an interview to anyone with a disability who meets the essential person specification.

19.4 We enable people with a disability to work through the provision of appropriate adaptations and equipment, funded in part by Access to Work grants.

## **20. Training**

20.1 The District Council provides a range of equality training to Members and employees. We are committed to equality of opportunity in the provision of accessible training opportunities.

20.2 All staff complete online Equality and Diversity training as part of their induction as well as role specific training, such as carrying out EIAs. Members also complete Equality training as part of their induction and have the opportunity to attend further training events alongside employees. Refresher training is offered regularly to elected members and employees.

20.3 We seek to establish a working environment which is safe and supportive, where employees are able to learn, develop and work to the best of their abilities.

## **21. Service Providers**

21.1 Not all services are provided by the District Council; some are contracted out to other businesses and organisations e.g. leisure services, waste collection etc. However any contractor/organisation working for and on behalf of the Council, or any organisation receiving grants from the Council, must demonstrate their compliance with the Equality Act 2010.

21.2 In the delivery of these contracts, we ensure that evaluation models, specification of services, contract conditions, quality requirements and monitoring procedures fully address equalities issues.

## **22 PARTNERSHIP WORKING**

22.1 We consult and work in partnership with communities, other agencies, national bodies and the trade unions to promote equality and diversity. The agencies we work with include, the Derbyshire Dales Youth Forum, Age UK Derby and Derbyshire, Chesterfield African Caribbean Community Association, Derbyshire Dales CVS and colleagues at Derbyshire County Council involved with a variety of groups with protected characteristics.

22.2 We are committed to:

- Working with the local community to further equality of access to services
- Working to continuously improve the quality of local services
- Making special efforts to involve older people and people with disabilities and address their needs
- Listening to what local people tell us and acting
- Actively supporting the voluntary and community sector

## 23 COMMUNITY ENGAGEMENT

23.1 Involving local people and our partners is central to the work of the District Council. We ensure that equality and diversity are an integral part of community involvement carried out by the District Council. We do this through our regular consultation with residents and businesses, agencies representing groups with protected characteristics such as AgeUK, our Facebook page, Twitter Account and mailing lists.

23.2 The District Council understands that different groups require different forms of involvement to ensure their needs are met appropriately and sensitively. The online panel gives residents a chance annually to provide feedback to the District Council. Other consultation exercises are carried out, often focusing on one key issue or policy proposal e.g. services to business during the pandemic.

23.3 The District Council's [Equality, Consultation and Engagement plan](#) sets out how this will be achieved.

## APPENDIX ONE: THE DERBYSHIRE DALES COMMUNITY

- 1.1 Information on Derbyshire Dales' residents is drawn from a number of sources and is used to inform the development of Council plans and priorities. The [2011 Census](#) is useful, although somewhat out of date and thus is augmented by data from other reliable sources including data from the 2021 census when it is available.
- 1.2 Data on the [Council's website](#) provides information about Derbyshire Dales elected representatives. [Public Health England](#) provide annual Local Authority Health profiles. Detailed information on the Derbyshire Dales for 2019 can be found on their web site.
- 1.3 The [Government Observatory](#) provides a 2018 summary profile of Derbyshire Dales. The [Office of National Statistics](#) provides data on mid-year and annual population figures on UK populations.
- Sex (gender) – Of the estimated population of 72,325 in 2019, 49% of residents were male and 51% female. 54% of those aged 65 and over were female (ONS, Mid-year population estimates, 2019).
  - Age – the district has an ageing population. People aged 65 and over number 22141 and make up 30.6% of the population compared to 18.5% in the UK. 57.8% of people are of working age (16-64 years). The people aged 15 and under make up 8% of the district's population compared to 19% in England. (ONS, Mid-year population estimates, 2019).
  - Disability and long term ill health – people whose day to day activities are limited make up 18.5% of the population compared to 17.6% in England. In addition, 12.7% of local people provide unpaid care compared with 10.2% in England. Levels of daily activity limitation are significantly higher among those over 60 years of age.
  - Race – 96.8% of residents are White British compared to 79.8% in England. A further 1.8% are from other white backgrounds.
  - Marriage and civil partnerships – 54.8% are married compared with 46.6% in England and 0.3% live within same sex civil partnerships (similar to national position)
  - Pregnancy & Maternity – since 2001 there has been a 2.4% increase in births (half the Derbyshire average) compared to 7.9% in England
  - Religion or Belief – 68.7% of residents describe themselves as Christian compared with 59.4% in England. 23.2% declared no religious belief compared with 24.7% in England
  - Sexual Orientation – The exact number of lesbian, gay or bisexual people living in the Derbyshire Dales is not known. The Government estimate is 5-7% of the population which equates to between 3,500 - 5,000 people in the Derbyshire Dales. Census 2011 data shows that 187 persons in the Dales were in a same sex civil partnership (0.3% of all persons over 16 years of age)

- Gender Reassignment – Derbyshire LGBT+ (the main local organisation supporting the LGBT+ community) has previously estimated that between 150 - 200 people in Derbyshire identify themselves as Transgender.

#### 1.4 Socio-economic Issues:

- Wages – at £375 per week in 2020, median earnings by workplace from jobs in the Dales are the lowest in Derbyshire (where the median is £421 per week). The Great Britain median average earnings by workplace is £480 (Annual Survey of Hours and Earnings, 2020).
- Unemployment - 900 [2.5%] working age adults in the Dales were unemployed at Sept 2020. This percentage has remained stable since Sept 2018. In GB there were 1,383,000 [4.2%] unemployed working age adults at Sept 20. Further information and comparisons can be found here on the Office for National Statistics website. Data is also available from NOMIS: Official Labour Market Statistics.
- Poverty - about 9.4% (965) of the District's children live in low income families (Derbyshire Dales Health Profile, 2019).
- Debt - Derbyshire Dales CAB helped with 1208 debt issues on behalf of clients in 2018-19. Debt issues within the Dales are likely to remain a real concern due to the economic effects of the Covid-19 pandemic. Debt and welfare advice has been given to 259 vulnerable families between April and December 2020.
- Fuel poverty – 3464 households experienced fuel poverty in 2016, constituting 10.09% of all Dales' households, compared to 11.6% in Derbyshire and 11.1% in England (Dept. Energy & Climate Change, June 2016).
- In work and out of work benefit claims - Claimants – In Jan 2019 there were 370 [0.9%] of residents aged 16 to 64 claiming benefits. In Jan 2021 there were 1,330 [3.2%] claiming benefits. There was a significant increase in those claiming both in work and out of work benefits during the Covid-19 pandemic. Source: NOMIS Official Labour Market Statistics.

## **APPENDIX TWO: CASE STUDIES; EXAMPLES of EQUALITY, DIVERSITY and INCLUSION**

The following examples show how the Council meets its equality, diversity and inclusion responsibilities.

### **1. Hurst Farm Regeneration Project**

This case study demonstrates how the Council is proactive in meeting residents' needs – particularly those that link directly to equality, diversity and inclusion. The study shows how the Council works with key agencies, charities and residents to develop and deliver regeneration plans.

Hurst Farm has been part of Matlock's landscape since 1949. It consists of 600 homes and prides itself for having a strong community. However, Hurst Farm estate in Matlock is the most deprived ward in the Derbyshire Dales. Although there are many positive aspects to the estate, it was ranked as the 16th most deprived ward in Derbyshire in The English Indices of Deprivation 2015.

On 31st August 2016 representatives from DDDC, Derbyshire Dales CVS, Friends of Hurst Farm and Dales Housing attended an Estate Regeneration event that focused on three vital aspects of estate regeneration: community engagement, planning and finance.

To start the process on Hurst Farm, a stakeholder meeting was held at the Social Club on Hurst Farm Estate on 21st September 2016. The meeting was attended by both local agencies, and residents of the estate, and the ideas generated included;

- Improved traffic management and highways
- Environment improvements
- Housing improvements
- Developing community assets and maximising resources
- Community involvement in all aspects of the regeneration projects
- The development of Friends of Hurst Farm to take much more of a management and developmental role on the estate
- Community development including developing employment and training opportunities and bulk purchase of power

In December 2016 the strategy and funding plans to deliver the estate regeneration programme were reported to Council. Funding was made available through three separate pots;

1. £2m of capacity building funding in 2016/17 to help build commercial skills capacity in local authorities to deliver estate regeneration.

2. £30 million of enabling funding in 2016/17 to help landlords at the early stage of estate regeneration proposals with, for example, feasibility studies, viability assessments, master planning, community engagement and partner or procurement advice.

### 3. £140m in loan finance to start regeneration projects on estates

In 2017 the District Council successfully made a bid for Government funding to work with the community of Hurst Farm Estate in Matlock to build a long term regeneration strategy, joining forces with Derbyshire Council for Voluntary Services (CVS), Waterloo Housing Group and the Friends of Hurst Farm to make a successful £100,000 bid to the Department for Communities and Local Government (DCLG).

The initial funding helped the appointment of a regeneration manager to support a two year detailed feasibility study and master planning of the 600-home Matlock estate. The District Council also provided an additional £21,525 from its Revenue Grants Unapplied Reserve to fund the strategy.

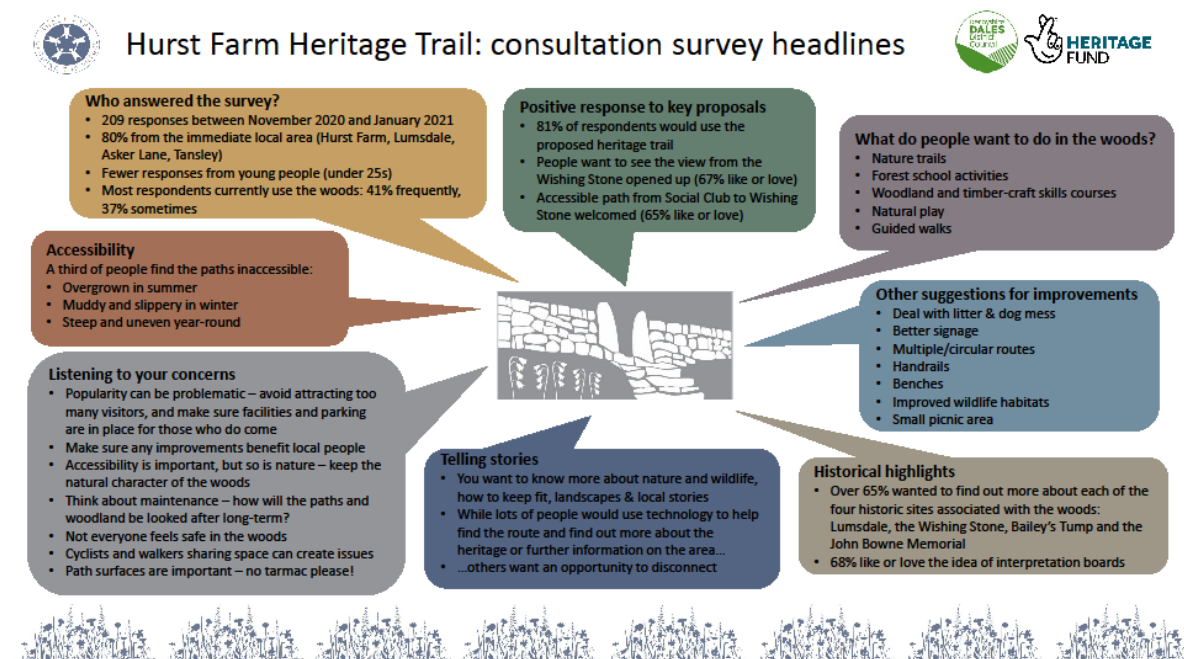
During extensive community consultation, people from Hurst Farm have told us that what matters to them is that their children and grandchildren can look forward to a bright future. We believe that by working together in partnership we can achieve this.

An online survey from Nov 2020 to Jan 2021 resulted in 209 responses, with 80% coming from the immediate surrounding areas. A huge positive for the project is that 81% would use the proposed Heritage Trail.

### The Hurst Farm Heritage Trail Project

Round 1 Development Funding was awarded from the NLHF to DDDC to detail up the heritage walk, consult with local communities and enable the submission of a successful Round 2 Capital and Revenue’s grant representing over a £1million of investment for Matlock at the End of 2021.

### Consultation on the Heritage Trail





A number of areas for consideration were identified during this consultation process, including concerns around accessibility and existing Footpaths. Comments included; cyclists and walkers sharing the Heritage Trail will be an issue, the paths are inaccessible because they are muddy in winter and overgrown in summer, the existing paths are steep in sections and uneven, no new tarmac footpaths please, an accessible path from the Social Club to the Wishing Stone will be welcomed.

In response plans have been developed to include the following;

- The Heritage Trail will be 1.2 - 1.5 metres wide and for walkers only.
- A section of the Trail from the Hurst Farm Social Club to the Wishing Stone will be wheelchair, mobility scooter and pram friendly.
- There will be new steps and sections of boardwalk, where the Trail is steep vertically or steep horizontally across the slope.
- The Heritage Trail surface will not be tarmac
- All existing un-made sections (earth) of the Trail will have a new surface to improve access and address the problems of thick mud in winter and overgrowing vegetation in summer.

Feeling Safe on the trail was also of concern to respondents, so part of the Woodland Management Plan will include thinning out of very dense stands of trees and managing the overgrown bramble next to the paths. This will improve the sight lines and reduce the perceived feeling of isolation. The project will also employ a woodland ranger who will be present on site.

Further information on the Hurst farm regeneration project can be found at

<http://www.hurstfarm.co.uk/>

<https://www.derbyshiredales.gov.uk/housing-a-council-tax/hurst-farm-regeneration-project>

## **2. Corporate Actions**

The Corporate Plan 2020 to 2024 is the District Council's primary policy document. It establishes the top priorities for the coming years, and sets the framework for allocating scarce resources through the budget process. After extensive consultation with residents and businesses during 2019, a total of 33 pledges and 44 individual actions were agreed.

One that clearly exemplifies the Council's commitment to equality, diversity and inclusion is: Helping disabled people adapt their homes so they can continue to live there.

In the year 2020/21 a total of 71 adaptations were completed. This figure is 21 above the target and was achieved despite the effects of Covid 19 lockdown restrictions earlier in year.

## **3. Corporate Key Performance Indicators [KPIs]**

Key Performance Indicators (KPIs) are the critical (key) indicators of progress toward an intended result. KPIs provide a focus for strategic and operational improvement, create an analytical basis for decision making and help focus attention on what matters most.

The council has 12 KPIs that it reports on each year. We use the same indicators to assess long term progress in meeting the authority's key targets for performance. One of these targets is to constantly improve the percentage of homeless households seeking assistance from the council for whom this intervention helped resolve their situation.

Results;

- 2018/2019 – interventions helped resolve the situation for 90% of such households
- 2019/2020 - interventions helped resolve the situation for 95% of such households
- 2020/2021 - interventions helped resolve the situation for 88% of such households [Covid complicated the challenge of resolving issues]

#### **4. Training: Elected Members, Senior Managers and Officers**

Equality training is completed by all employees as part of their induction training and they receive regular updates and refresher training.

In 2020 training for Elected Members, Senior Managers and some Officers, whose roles involve a great deal of equality related work, attended online training. The training was delivered by experts and tailored to meet the specific needs of the District Council.

A total of 28 members and 27 DDDC officers attended one of four sessions.

Pre training, the level of confidence when considering their knowledge of Equality and Diversity in general, familiarity with the Policy and completing EIAs, among members and officers was good at over 60%. Post training this had risen to 73%.

#### **5. Equality Impact Assessments**

Equality Impact assessments [EIA] are carried out whenever the District Council considers a change to an existing policy or service, or considers a proposal to introduce a new policy or service. For example, improving the accessibility of public toilets, or making changes to waste delivery services.

The process of carrying out an EIA involves considering how the proposed change, or new policy/service could impact on every group with protected characteristics and residents in rural areas. It identifies potential benefits and dis-benefits, identifies areas that need addressing and suggests potential changes. An EIA is also used to consult with people with protected characteristics and representative groups such as the Derbyshire Dales Youth Forum, the Afro Caribbean Community Association, and Derbyshire Dales Age UK.

An example of how the authority responds to the needs of groups with protected characteristics, quickly and effectively, is our response to the issues around reopening public toilets during the covid pandemic.

As the country went into lockdown in March 2020, DDDC's emergency response included the closure of public buildings and toilets. Following the announcement on 10th May 2020 when the Government stated it was easing the lockdown requirements, the attractiveness of Derbyshire Dales resulted in many visitors to our tourist hotspots. Unfortunately this had unintended consequences as a result of the closure of the public toilets. With the announcement that non-essential retail shops were to re-open in June/July and potentially result in further unintended consequences as more people visited the Derbyshire Dales, the authority decided to consider re-opening the toilets.

### **What we did during the EIA process**

#### 1. Identified the key issues;

- How to keep toilets open and safe for everyone
- How to ensure employees health and safety was protected
- The risk of infection and cross-contamination,

#### 2. Identified relevant facts

For example; from consultation with residents we learnt that

- 94% of respondents had used public conveniences in the Dales in the last 12 months
- 15.48% of respondents had used a parent / child unit.
- 16.23% had used a disabled unit.
- 58.05% of respondents favoured the introduction of a Community Toilet Scheme.
- 58.32% of respondents were prepared to pay for the use of public toilets.
- 56.73% of these would be willing to pay 20p.

#### 3. We risk assessed the potential reopening of its public toilets, whilst also considering our capacity to deliver the service and began talks with Healthmatic who provide the payments systems in our toilets,

#### 4. We considered the benefits and dis-benefits of opening the toilets for each group with a protected characteristics. The following table shows that only positive effects were identified during the process.

Protected groups	Positive effects	Negative effects	Improvement actions
<b>Age</b>	<p>Positive effect on all ages, especially the more elderly who may require more frequent access to toilet facilities when visiting Derbyshire Dales.</p> <p>As the toilets provide baby changing facilities reopening the toilets will have a positive impact upon parents with children requiring changing facilities.</p>		
<b>Disability or long term ill health</b> Physical disabilities, sensory impairments, limiting long-term illnesses, learning disabilities or mental health issues	<p>Re-opening disabled toilets will benefit disabled people with long term health issues and/or impaired mobility.</p> <p>Parents / guardians of disabled children and carers of disabled adults who also require facilities with disabled access will benefit.</p>		
<b>Women or men</b>	<p>Positive effects for both women and men as both will be able to reuse the facilities if reopened</p>		
<b>Pregnancy and maternity (including maternity and paternity leave)</b>	<p>Expectant Mothers and Mothers with young children requiring changing facilities whilst visiting Derbyshire Dales will benefit from the reopening of the public toilets</p>		

5. The Emergency Committee considered the EIA, the risk assessment and comments from the public regarding the reopening of toilets, at its meeting on the 11<sup>th</sup> June. The minutes, which detail the debate are available via this [link](#).
6. The committee voted unanimously to approve the reopening of the Council's public toilets.

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Corporate and Customer Services

## **DIGITAL TRANSFORMATION - PHASE 2 PRIORITIES AND ONGOING APPROACH TO CHANGE AND INNOVATION**

### **PURPOSE OF REPORT**

This report sets out the planned objectives for the next 12 months of the Digital Transformation project and seeks the committee's endorsement of the identified transformational priorities for the next 12 months.

### **RECOMMENDATION**

1. That the report be noted.
2. That the priorities for Phase 2 of the Digital Transformation Programme be endorsed and approved in principle.
3. That a further report be submitted setting out plans for the ongoing delivery of Transformation priorities for the 2022/23 financial year and beyond.

### **WARDS AFFECTED**

District-wide

### **STRATEGIC LINK**

Enabling the customer to enquire of, and transact with the District Council, in the most efficient manner, is at the heart of the District Council's objectives and will enable delivery of the priorities within the Corporate Plan.

## **1 BACKGROUND**

- 1.1 At the meeting of the Governance and Resources Committee held in November 2018, Members considered the work of the Customer Innovation Hub, which was established with the following aims and objectives:-

#### Aims

To scope, procure and implement, a customer platform that integrates with existing systems to enable us to drive channel shift and to deliver easier, faster and better customer service.

#### Objectives

- Provide our customers with an improved, user friendly and accessible means of accessing and paying for services electronically;

- Promote a culture of 'digital by choice' for all customer interactions and move the organisation to a future state where customer service and satisfaction is key to our success;
- Minimise avoidable contact by unifying communications across the organisation;
- Transform customer interactions to the leanest form;
- Identify cashable efficiencies by the transformation of service delivery;
- Provide a means of implementing income generation opportunities;
- Develop by June 2019, a Customer Access Strategy as a means of setting standards and guidelines for delivering convenience and excellence for our customer which we can measure our performance by;
- Map current service provision on key priority areas and estimate level of time and effort required to deliver 'as is service'. Key priority areas currently defined are:

Ordering, paying for and providing:

- new / replacement bins;
  - regular chargeable bin collections;
  - occasional bulky waste collections;
  - regular or occasional trade waste collections;
  - ordering, paying for and providing car park permits and replacement resident passes;
  - paying non domestic rates and council tax bills;
- Devise simple means of gauging customer interest in modernising service provision and likely resistance to change.

1.2 The contract for the provision of a CRM system was signed with the preferred supplier; Meritec Ltd, at the end of March 2019 for an initial period of two years. The contract includes professional services to configure the system to replicate the councils existing e-Forms, the development of a new website home page built to encourage customer use of the CRM system and the integration of the system with the council's network infrastructure and core systems.

1.3 In March 2020 the COVID-19 crisis resulted in a nationwide lockdown, requiring the Town Hall to be closed to the public and the majority of District Council staff to work from home where possible. The lockdown had a dramatic impact on resident and customer access to the District Council and the District Council's ability to effectively respond to service requests.

## **2 REPORT**

2.1 The digital transformation project was setup with a 2 year duration with a potential further year extension, which was ultimately adopted. The primary focus of the project was the implementation of the CRM system and supporting the council in moving to a digital first principle.

2.2 The first phase of the Digital Transformation project was highly successfully. The digital transformation team delivered on its primary objective of procuring and implementing a CRM system for both internal and external customer use. The CRM was launched on time and on budget with an expanded portfolio of services available and entirely

replacing all previous web-forms whilst introduced a small number of new services not previously available to customers online.

- 2.3 To fully realise both the objectives of phase 1 and the benefits of the CRM system the transformation team also procured and implemented 3 new fully integrated payment systems (SCP, Paye.net & Direct Debit) allowing for seamless transition between the CRM, paperless processing. This resulted in increased accuracy and efficiency due to removing the manual entry of data; required under the previous isolated payment systems, as well as the replacement of 7 legacy payment and cash receipting systems and reduced revenue costs.
- 2.4 The CRM build process included full Lean reviews of all existing online waste and clean and green services. As a result these newly designed Lean processes resulted in process efficiency increases of between 11%-37% and the reduction in processing/resolution times of between 39%-94% meaning customers requests were processed faster and with less staff intervention and less staff time spent on these service request (staff touch time was reduced between 17%- 98% with the majority reduced by more than 80%).
- 2.5 In addition to launching the CRM system; and the 3 integrated payment systems, the Digital Transformation team also lead on the development and implementation of the new Whitespace waste management system and its integration in with the CRM. Further expanding the range of service that could be provided to customers, whilst improving the customer experience by providing access to real time data on round status', tailored forms specific to each customer, increased automation for faster response times, and improved customer tracking reducing unnecessary contacts for updates.
- 2.6 Since the CRMs launch in April 2020 the number of services available online has been continually expanded doubling what was available at launch with a number of new services currently being considered. As a result since the launch of the CRM it has handled over 90,000 service requests with 90% of these being completed by the customer via the Self Service module.
- 2.7 The CRM has also been instrumental to the District Councils ability to launch the garden waste subscription service, which is fully managed within the CRM system. The system has handled over 20,000 enquires and subscriptions, and with its integrated payment systems handled over £684,000 of income in the first year on this service alone.
- 2.8 Digital Transformation also worked closely with the Business Support Unit to deliver the new Horizon telephony platform which together with the CRM allowed the council to continue to function during the Covid 19 pandemic by effectively enabling staff to work from home; through reduced reliance on paper and legacy locally hosted systems, and the customer to continue to interact with the District Council and request it services whilst the Town Hall was necessarily closed.
- 2.9 The Digital Transformation project also played a key role in delivering aspects of the District Council's response to the Covid pandemic by providing digital solutions for a range of emerging requirements for example; to gauge business plans for restarting following lockdowns, allowing business to apply digitally for pavement licenses and providing full end to end digital processes to apply, process and pay over 10,000

business grants and test and trace support payments which have resulted in over £37 million worth of payments to be made as fast and efficiently as possible.

2.10 As we are now emerging from the Covid crisis and the first phase of the project has been completed, the project team has focused on identifying and prioritising options for phase 2 to cover the next 12 months. The following work streams have been identified and prioritised for this next phase. A brief summary of each option is detailed, with an indication of costs, resources required and timescales for consideration. If these priorities are accepted, full business cases will be made in the future where additional expenditure is required once each project has been fully scoped.

2.11 Realistically, there is more in the list than is achievable for completion in the next 12 months, so it has been necessary to identify which work streams should be prioritised for progression at this time. The Corporate Leadership Team has discussed the transformation priorities during this period and developed the below prioritised list. Phase 2 would look to progress the priority 1 projects (Planning BPR, Paperless Resident Parking Permits) and the first 4 priority 2 projects (CRM Mobile App, Hybrid Meetings, CRM Member Portal and Systems Administration Review).

#### 2.12 Priority 1

Planning BPR	
Overview	Review of planning processes and use of systems to reduce the dependency on paper and improve process efficiency. The first part of this project is currently underway and due for launch in June 2021 with a redesigned lean process for handling planning applications with Enterprise re-configuration for process management and increased automation. Next phases of this work would consider further process reviews and a review of current system utilisation and fitness for purpose
Resources	Transformation, Planning, BSU, IT (possibly)
Cost	No costs anticipated unless new system(s)/upgrades would be required
Duration	3-6 months

Paperless Residents Parking Permits	
Overview	This was identified as a priority in the original paper to council by the Customer Innovation Hub and would consist of moving the Council from the current paper based residential parking permits to a fully electronic process with the purpose of reducing costs and the administrative burden surrounding missing permits, whilst improving the quality of service to residents.
Resources	Transformation, Parking, BSU
Cost	Unknown without full scoping but would need to be cost neutral year on year
Duration	2-3 months dependent on scoping



## 2.13 Priority 2

CRM Mobile App	
Overview	<p>This was part of phase 1.5 but was delayed due to the delay in the mobile contract review process as a result of the Covid and the introduction of the new Horizon system. The Meritec mobile app is for use by internal staff to access CRM jobs and would initially be used by the Clean and Green teams to allow them to have direct and real time access to CRM jobs when away from the office allowing for reduced lag time, reduced printing costs, and improved access to data such as GPS for prioritisation of jobs.</p> <p>This work is dependent on the delivery of the new mobile contract and suitable devices and data connection for the clean and green team</p>
Resources	Transformation, Meritec, Clean and Green
Cost	£1500 implementation costs and £6250 annual licensing costs (approved at G&R in Nov 2019)
Duration	1 month

Hybrid Meetings	
Overview	<p>Following the Covid Crisis and widespread use of home working and the exploration of extending home working/agile working in to business as normal one area which could serve to undermine this approach is the need to have some meetings in person. This could quickly expand to meetings every day for staff due to different departmental needs or flexible working patterns.</p> <p>The Council's new Horizon communications platform provides the ability for virtual meetings, however, we don't currently have an offer for hybrid meetings. As such it is recommended that compatible options be explored for running hybrid meetings with the Council's meeting rooms.</p>
Resources	Transformation, Estates, IT
Cost	Dependent on solution but potentially could be run with just a computer and TV screen per room
Duration	1-2 months

CRM Member Portal	
Overview	Implementation of the CRM member portal used to display information to members, provide a file repository for distributing documents and provide members with access to trackable Self Service forms for raising jobs and/or queries in to Council officers.

Resources	Transformation, Meritec, Business Development, Data Protection, IT, Members
Cost	£3000 implementation + £6250 annual license fee increase capped as a development partner
Duration	3 – 6 weeks

Systems Administration Review	
Overview	<p>System administration for the District Council is currently managed in multiple ways, with a number of core systems sitting with the BSU Technical Team, and others are managed in departments; such as finance systems with some overlap into IT.</p> <p>In order to support the work undertaken to date with the CRM and its various integrated systems as well as maximise existing core systems the Council needs to review the current structure and provision of systems administration. There appears to be a skills gap in systems administration and a pressure on resources under the current structures. This is resulting in delayed development and under utilisation of those systems. When coupled with an increasingly integrated and interdependent range of systems, the Council is carrying the risk of changes being made in isolation affecting other systems and an inability to effectively manage the IT systems going forward. For example, the authority does not have the necessary skills in house to provide effective systems administration to the CRM system, which has meant that the Digital Transformation Team have not been able to relinquish day to day management of the system, which runs a clear risk at the end of the project lifespan</p>
Resources	Transformation, BSU, System administrators/key users of all corporate systems, IT
Cost	Costs dependent on outcomes of any review
Duration	2-3 months for initial review – implementation of outcomes dependent on findings

CRM MyAccount Enhancements	
Overview	<p>The CRM MyAccount went live with the rest of the CRM system on 1<sup>st</sup> of April 2020. At present MyAccount allows any user to register for an account to track the progress of service requests, raise a reduced range of new service requests without duplicating key data, see their next waste collection (in district properties only), see information about their councilor (in district properties only) and view our corporate Facebook feed.</p> <p>However, there a number of enhancements which would improve the offer to customers including; increased information presented at a glance e.g. severe weather warnings, road closures and traffic info, subscription management</p>

	(e.g. MailChimp). Verified accounts to allow users to verify their identity in order to access more data and services e.g. council tax balances etc. and MyAccount user and CRM customer account linking. Currently customer records created within the CRM and user accounts created in MyAccount aren't linked which means records created for a customer when calling can't be accessed/tracked in MyAccount and records requests raised in Self Service or MyAccount aren't automatically linked to customer records in the CRM.
Resources	Transformation, Meritec, Data Protection, BSU
Cost	Exact requirements would need to be scoped including the matching exercise and validation methods, additional integrations may be required at cost to release some benefits (e.g. revs and benefits and traffic and weather info).
Duration	3-12 months dependent on scoping

Data Warehouse and CRM Reporting	
Overview	<p>At present the Council has a large amount of data in its core business systems. However, this data is primarily used in the delivery of a single service and looked at within the confines of its own system in the majority of decision making exercises.</p> <p>Developing a data warehouse; which would look to combine data from a range of systems in to a single reporting system, would provide more effective business intelligence, would allow the Council to identify opportunities, more accurately understand its current position and inform better decision making in the future.</p>
Resources	Transformation, IT, Data Protection, Procurement, Key Stakeholders from across the organization
Cost	Requires full scoping but would requires dedicated data analyst(s) to operate
Duration	6 months – 1 year

Planned Payment Module (PPM)	
Overview	<p>PPM is a module of the Capita AIM system which would handle re-occurring card payments and is intended for initial use with the Garden Waste Project, before eventual roll out in to other suitable services e.g. parking permits, licensing etc.</p> <p>This work is dependent on the v13 upgrade to the AIM system which is currently planned to go live in August 2021.</p>
Resources	Transformation, Meritec, Finance, IT
Cost	Capita costs included in v13 upgrade within the capital programme. CRM Integration costs need to be fully scoped, however, based on DD costs and

	the number of forms involved this is estimated to be between £13,000 and £15,000
Duration	2-3 months

### 2.14 Priority 3

Legal Service Case Management System & Process Review	
Overview	<p>Legal Services are currently exploring options for a case management system, which is progressed is likely to requires assistance from the Transformation team and will benefit from the legal sections processes being reviewed to ensure maximum efficiency.</p> <p>If a case management system is not progressed then Transformation can look to review processes and explore what alternative existing digital solutions could be utilised to ensure to improve overall performance and efficiency.</p>
Resources	Transformation, Legal
Cost	Transformation involvement wouldn't expect to carry any cost unless system development was required
Duration	2-3 months for process review but dependent on implementation of a new system

CRM integration to Capita CBL	
Overview	<p>As part of the v13 upgrade of the AIM system capita provide access to their Capita Business Logic API. Effectively, this gives a third party system direct access to real time data within the AIM system.</p> <p>An initial use case for this would be to provide a secondary payment confirmation channel as we know a small percentage (approx.0.5%-1%) of successful payments are not currently tracked correctly through the various system. This would provide the CRM with a secondary method to confirm these outcomes.</p> <p>Future use cases could include the ability to present CRM users (in house and self-service) the ability to access real time data such as Council Tax or NNDR balances etc.</p>
Resources	Transformation, Meritec, Data Protection, IT, Finance, Capita (may not be required)
Cost	Requires scoping
Duration	1-3 months dependent on scoping

CRM Chatbot	
Overview	<p>Exploration and implementation of the new CRM AI powered Chatbot. This work is currently in early development phases by Meritec who are looking for development partners.</p> <p>The chatbot could be employed on multiple channels (e.g. the website, Facebook etc.) to provide AI assistance to customers and some logging facilities for simple forms (e.g. missed waste etc.)</p>
Resources	Transformation, Meritec, Communications
Cost	Pricing options not yet finalised but would include an implementation cost and increase in annual license fees
Duration	Dependent on functionality and development timescales

Clean & Green Review	
Overview	Participation in the Clean and Green review and potential amendments/additions to the CRM following the review and any other items Transformation are included in.
Resources	Transformation, Clean and Green
Cost	Dependent on review outcomes
Duration	Review is scheduled to take 12 months

Non-cash Payments for Parking	
Overview	Exploration of alternative payment methods for car parks e.g. mobile pay and cards. With a view to increasing income generation through offering a wider range of available payment methods and the resilience of not being dependent solely on a machine which can and do go offline.
Resources	Transformation, Parking Team, Procurement, Legal, Parking Contractors
Cost	Dependent on solutions identified
Duration	1-2 months initial review phase

Customer Communication Restructure	
Overview	Review the current structure of the Customer Communication function following the introduction of the CRM and new Horizon telephony system to ensure that the structure is still working for the Council with the new ways of working introduced over the last 2 years

Resources	Transformation, BSU, Key Stakeholders from across the Council, HR
Cost	Dependent on outcomes of review
Duration	2-3 months dependent on outcomes of the review

CRM MyAccount for business & MailChimp integration	
Overview	<p>Development of a business specific MyAccount feature for use by businesses within the district with an initial transfer of those business accounts created as part of the COVID business grants process.</p> <p>Mailchimp integration would allow business to manage their subscriptions to business news letters from their account.</p>
Resources	Transformation, Meritec, Business Development, Data Protection, IT
Cost	£6000 implementation + £8175 Annual license fee increase with MailChimp as only integration or £12175 annual license fee increase with more integrations
Duration	4 – 6 weeks

Assure Integration	
Overview	<p>The M3 system used by Environmental Health and Licensing is being upgraded to the Assure system. This system has its own in built Self Service submission functionality which is automatically configured alongside the internal configuration. However, the Assure system lacks the ability to handle payments natively and doesn't offer the ability to track progress.</p> <p>As such there is a need to explore whether we can integrate the CRM with the Assure system to allow for integrated payments and tracking and/or whether we can integrate an existing payment system with the Assure system directly.</p> <p>This work is dependent on the configuration of the Assure system</p>
Resources	Transformation, Meritec, Northgate, Capita (if integrating payments directly to Assure) Environmental Health, Licensing
Cost	Unknown without full scoping
Duration	2-4 months depending on options (e.g. payment integration only or full CRM integration)

Lean Process Review, SLAs & CRM Expansion of Tractable Services	
Overview	The majority of the processes within the CRM did not undergo a Lean process review at the time of implementation and were built in to the CRM system as is with an email hand off to a back office function. Whilst all new processes

	<p>implemented in to the CRM system since launch have generally undergone review and have all been made fully trackable, there remains a great deal of potential for customer service and efficiency improvement in the remaining services.</p> <p>Beyond those processes already in the CRM a additional key services areas have been identified for review and inclusion in to the CRM; complaints, elections and licensing.</p>
Resources	Transformation, BSU, Service Areas
Cost	No costs expected
Duration	Ongoing but would estimate 3-6 months for existing CRM services

Revenues and Benefits Transformation	
Overview	Following the transfer of the revenues and benefits service from Avarto to Chesterfield Borough Council a review of the service and process is due to take place. It is expected that this will be led by Chesterfield Borough Council but it is anticipated that the Transformation team will play a role in this and potential changes to the CRM and other systems including the potential integration of the Academy Revs and Benefits portal to the CRM
Resources	Transformation, Revs and Benefits, Chesterfield Borough Council, Meritec
Cost	Dependent on review
Duration	Dependent on review

2.15 The above outlines the scale of work yet to be done and the ambition of the Council in continuing to improve its services for residents, as well as strengthening the capacity of services to meet internal and external expectations, which will continue to evolve and increase. The Council has previously committed to invest in a three year programme of digital transformation, but the ambition above suggests that there is a need for a permanent resource to drive and support continuous improvement across the Council.

2.16 When the Council established the Transformation function in February 2019, it did so on fixed term basis with the project to be funded from a specific Customer Innovation reserve for the three year period of the programme, which totaled £379,879.

2.17 Members have agreed an ambitious Corporate Plan to be delivered before the next municipal elections, which are to be held in May 2023. The priorities above support the delivery of the Corporate Plan, but these cannot be delivered in isolation by individual services. The experience of the past two years is that the Digital Transformation Team have provided the drive and impetus to deliver improvements, enabling services to do the day job whilst providing challenge and support to do things more efficiently with the customer at the heart of any redesign of business processes. This is not only the experience of Derbyshire Dales in recent years, but is now common place across local

authorities across the country who have taken decisions to invest in change and innovation to ensure good value and good services for their residents.

2.18 To this end, it is proposed that a further report be submitted to this Committee in September 2021 setting out how transformation priorities can continue to be delivered in the next financial year and beyond.

### **3 RISK ASSESSMENT**

#### **3.1 Legal**

The legal risk of the report and proposed projects are low as long as all issues relating to Data Protection and any legal and procurement issues are address in the design and implementation of the packages.

#### **3.2 Financial**

Estimated costs for the individual projects are set out in paragraphs 2.12 to 2.14 above. Where provision has not already been included in the revenue budget or capital programme, a report to a future Council meeting will be required to seek approval for the additional expenditure. The financial risk arising from the recommendations of this report is assessed as low.



## **4 OTHER CONSIDERATIONS**

- 4.1 In preparing this report, the relevance of the following factors has also been considered: prevention of crime and disorder, equalities, environmental, climate change, health, human rights, personnel and property.

## **5 CONTACT INFORMATION**

- 5.1 James McLaughlin, Director of Corporate and Customer Services  
Telephone: 01629 761281  
Email: [james.mclaughlin@derbyshiredales.gov.uk](mailto:james.mclaughlin@derbyshiredales.gov.uk)
- 5.2 Glenn Burton, Digital Transformation Project Manager  
Telephone: 01629 731381  
Email: [glenn.burton@derbyshiredales.gov.uk](mailto:glenn.burton@derbyshiredales.gov.uk)

## **6 BACKGROUND PAPERS**

- 6.1 14<sup>th</sup> January 2021 – Report to Governance and Resources Committee
- 6.2 21<sup>st</sup> November 2019 – Report to Council – Capital Funding Request – Customer Relationship Management
- 6.3 5<sup>th</sup> September 2019 – Report to Governance and Resources Committee
- 6.4 25<sup>th</sup> February 2019 – Report to Governance and Resources Committee
- 6.5 22<sup>nd</sup> November 2018 – Report to Governance and Resources Committee
- 6.6 2018/2019 – Customer survey findings

## **7 ATTACHMENTS**

None

Governance & Resources Committee

30<sup>th</sup> September 2021

Report of the Director of Corporate and Customer Services

## **MEMBER LEARNING AND DEVELOPMENT**

### **PURPOSE OF THE REPORT**

To consider an update on the 2020/21 Member Training & Development Plan, approve a work plan for the Member Development Working Group and approve the Member's Training & Development Plan for the 2021/22 Civic Year.

### **RECOMMENDATION**

1. To approve the plan for work to be undertaken by the Member Development Working Group during 2021/22 as set out in Appendix 1.
2. To approve the Members' Training and Development Plan for 2021/22 as set out in Appendix 2.

### **WARDS AFFECTED**

Not applicable

### **STRATEGIC LINK**

Training and Development for elected Members helps to support their role as Community Leaders and has a direct impact on the District Council's reputation and perception of its Corporate Vision and Plan.

---

## **1 BACKGROUND**

In March 2020 the Governance and Resources Committee approved the 2020/21 Work Plan for the Member Development Working Group and confirmed the following terms of reference:

To report to the Governance and Resources Committee on measures to:

- Evaluate recent training and identify any gaps in learning
- Plan a Training and Development programme for forthcoming year
- Review format and accessibility of training given diversity of current membership
- Consider a competency framework as an induction tool to plan a tailored approach to training
- Input into matters from a Councillors perspective – what does it feel like to be a Derbyshire Dales Councillor from a general and equal opportunity perspective?
- Review role profiles
- Assist Groups with potential succession planning
- Review the current Member Development Scheme

- Review mandatory training requirements and frequency
- Consider re-introduction of annual development discussions either within Groups or by the Development Group to enable individuals to reach their potential and ambition
- Consider buddying/mentoring scheme

In doing so all Members of Member Development Working Group will commit to:-

- Sharing ideas, information and knowledge
- Open and honest discussion where all participants are treated with dignity and respect

The Group is currently comprised as follows:

Councillors Jason Atkin (Chair), Helen Froggatt (Vice Chair), Jacqueline Allison, Steve Flitter, Dawn Greatorex, Alyson Hill, David Hughes, and Stuart Lees.

An update on the group's activity during 2020 was brought to a meeting of this Committee on 20 August 2020 and at that time the 2020/21 Member Training Plan was approved.

## **2 MEMBER DEVELOPMENT WORKING GROUP WORKPLAN**

### **a) 2020/21 Work Plan**

When established it was intended that the Working Group would meet at least four times a year. During 2020/21 the Working Group met four times but no meetings took place towards the end of the civic year due to the resources needed to support the Group being directed to focus on delivering the May 2021 Elections. Since June resources available have focussed on facilitating socially distanced in person meetings at venues away from the Town Hall and delivering the Annual Canvass.

However the following progress has been made:

#### **i) Evaluate feedback from the 2019 Induction.**

This was completed in July 2021.

As the next District Council Elections are due to take place in May 2023 it is proposed that the Working Group include new Member Induction in their work plan and start looking at the content of the 2023 induction programme during the current Civic Year with a view to confirming the arrangements during 2022/23.

#### **ii) Member Training and Development Plan for 2020/21 Civic Year**

The programme was approved by this Committee in August 2020. Details of progress made in delivering ae set out later in the report.

Planning the 2021/22 Training Plan is included in the 2021/22 Work plan.

#### **iii) Considering alternative methods of delivering training during the Covid-19 Pandemic and beyond**

This was pursued by offering all the training identified in the 2020/21 Plan using Zoom. On the whole this seemed to work well and attendance was good. Online training offered more flexibility and avoided the need for Councillors travelling long

distances. During 2020 the Group looked at the generic online training provided by the Local Government Association. While this covered a large range of topics relevant to Members and was available in the form of online courses which can be accessed at a convenient time, it was felt that it was too generic to replace any of the in house training offered.

In the 2021/22 Work Programme the Working Group will seek feedback from Members perceptions how delivering training sessions on Zoom worked and explore the options for alternative learning resources such as the Councils on-line training resource LOLA.

#### **iv) Survey members based on the LGA competency framework.**

The aim of this task was to use the Local Government Association's Political Skills Framework to identify areas for further development. For the reasons above this was not completed in 2020/21 but will be carried forward into the 2021/22 work programme.

#### **v) Produce a Meetings Quick Guide**

A quick guide has been produced and discussed by the Working Group but not yet circulated as it is possible that some changes will be required as a result of the deliberations of the Governance Review Working Group. It is therefore proposed that this action is carried forward into the 2021/22 Work programme so that any changes are incorporated into the guide.

#### **vi) Shadowing Scheme**

This action proposed that a scheme would be developed to enable members who wished to shadow officers for a short period to understand how services are delivered.

This proposal has not progressed as it has not been possible to set these up during lockdown. This will be reviewed during 2021/22 once the Town Hall reopens and it is deemed safe to permit employee shadowing. So this can be introduced relatively quickly once restrictions permit shadowing to take place the Working Group will be asking for feedback from Members and Officers on potential opportunities and identifying how it can be introduced without a detrimental impact on service delivery.

#### **b) 2021/22 Work Plan**

A draft Work Plan for 2021/22 is attached as appendix 1.

This plan includes items brought forward from the 2020/21 Plan with an additional action to produce an evaluation form to be used to gain Member feedback on learning and development opportunities.

In setting up the Working Group the Committee agreed that the work plan would remain fluid to enable the group to respond, so far as practicable, to events and the needs and wishes of Members.

The Group is intended to be Member led and non-members are strongly encouraged to contact one of the group if they feel that there is something lacking in the training provided or they have ideas for other training/development that could be incorporated in future programmes.

### 3 2020/2021 MEMBER LEARNING AND DEVELOPMENT PLAN

#### a) Mandatory Training

During 2020/21 All Councillors were required to undergo mandatory training in:

- Planning and Ethics
- Licensing and Appeals (Committee Members only)
- RIPA
- Safeguarding
- Equality and Diversity
- Data Protection

Unfortunately we were unable to set up the RIPA and Safeguarding Training so these will be carried forward into the 2021/22 Plan.

#### b) Non Mandatory Training

Training on Mental Health Awareness was offered during 2020/21. While the session was not mandatory the Member Development Working Group strongly urged Members to attend.

Attendance at the events were as follows:

Topic	Date	Attendance	% of Councillors attending
Planning and Ethics	14 September 2020	19	82%
	1 October 2020	13	95% of Planning Committee <sup>1</sup> )
Licensing & Appeals	29 September 2020	10	38%
	30 September 2020	5	(83% of L&A Committee <sup>1</sup> )
Equality & Diversity	11 November 2020	10	66%
	17 November 2020	10	
	24 November 2020	6	
Data Projection	12 October 2020	14	72%
	4 November 2020	14	
Mental Health Awareness	16 September 2020	13	33% (Not Mandatory)

<sup>1</sup> As all members of Planning Committee and Licensing and Appeals Committee are required to take this training before participating in decision making on applications, one to one sessions were arranged with the remaining Members so that 100% of the current membership of both Committees have now completed the training.

There is no data available on the quality or impact of the training sessions, however the Working Group has identified this as an issue and approving a mechanism to capture this data is a priority action in the 2021/22 Work Programme.

### 4 2021/2022 MEMBER LEARNING AND DEVELOPMENT PLAN

#### a) Mandatory Training

A proposed Member Learning and Development Plan for 2021/2022 is set out in appendix 2 and includes the following mandatory training:

- Planning and Ethics
- Licensing and Appeals (Committee Members only)
- RIPA
- Safeguarding
- Equality and Diversity
- Prevent

With regard to Planning and Ethics and Licensing and Appeals training the Member Development Working Group recommends that a deadline of 31 December 2021 is set for completion by all Members. Any Member who does not complete the necessary training by the deadline will not be eligible to sit on the Planning Committee or a Licensing Hearing Panel.

There is also a mandatory session for Chairs and Deputy/Vice Chairs to provide refresher training on Chairing meetings following the recent to return to in person meetings.

### **b) Non Mandatory Training**

There is currently one non mandatory session on treasury management in the programme. During the year some non-mandatory training may be added to the programme. While not compulsory the Member Development Working Group strongly urges Members to attend as many sessions as they can.

### **c) Delivery of Training**

As things stand the training identified will continue to be delivered remotely through Zoom. One of the items included in the Working Group's work plan is to look at alternative ways of delivering training so some elements may move to alternative delivery methods as the Plan progresses.

## **5 RISK ASSESSMENT**

### **5.1 Legal**

There are no legal risks arising directly from the report. An effective training and development plan helps to prepare Members to make an informed and balanced decisions which helps to mitigate legal risk in the round.

### **5.2 Financial**

The training and development set out in this report can be provided within the existing revenue budget. The financial risk is, therefore, assessed as low.

## **6 OTHER CONSIDERATIONS**

In preparing this report the relevance of the following factors has also been considered: prevention of crime and disorder, equality of opportunity, environmental, health, legal and human rights, financial, personnel and property considerations.

## **7 CONTACT INFORMATION**

Jason Spencer - Electoral and Democratic Services Manager  
[jason.spencer@derbyshiredales.gov.uk](mailto:jason.spencer@derbyshiredales.gov.uk)

Councillor Jason Atkin, Chairman of the Member Development Working Group  
[jason.atkin@derbyshiredales.gov.uk](mailto:jason.atkin@derbyshiredales.gov.uk)

## **8 BACKGROUND INFORMATION**

None

## **9 ATTACHMENTS**

Appendix 1 – Member Development Group Work Plan 2021/22  
Appendix 2 – Draft Member Training and Development Plan 2021/22

<b>MEMBER DEVELOPMENT WORKING GROUP WORKPLAN 2021/22</b>				
<b>Task</b>	<b>Reason</b>	<b>Priority</b>	<b>Target Date</b>	<b>Status</b>
Planning for new 2023 New Councillor Induction Programme	To start to planning and identifying costs for delivering the induction of new Councillors following the elections in 2023.  To deliver this the Working Group will look at best practice and revisit feedback on the 2019 Induction.	Medium	May 2022	To start
Develop a mechanism to capture feedback on development opportunities	To develop a for form or some other process to obtain feedback on learning and development provided and use this to inform the development of future events	High	September 2021	In progress – draft prepared but needs signing off by MDWG
Member Training Plan for 2021/22 Civic Year	To plan a programme of training that meets mandatory requirements and, where possible, accommodates other training needs identified by the Group	High	September 2021	In progress – Draft plan produced needs to be signed off by MDWG & G&R
Evaluate the delivery of training during the pandemic and explore other options	All training during lockdown was delivered through Zoom. The working group will consider feedback and explore other options such as LGA online provision and LOLA, which would offer Members the opportunity to do the training in their own time and at their own pace	Medium	Spring 2022	To start
Survey members based on the LGA	To identify areas of development that require further consideration.	Medium	Spring 2022	To start

ITEM 1



competency framework				
Publish a Meetings Quick Guide	A quick reference guide for Members on the rules of debate contained in the Constitution has been produced but will be reviewed in the context of recommendations from the Governance Review Working Group.	Medium	Spring 2022	In progress – Draft document produced and considered by MDWG.
Shadowing scheme	Develop scheme to enable members who wish to do so to shadow officers for a short period to better understand how services are delivered.	Medium / long – dependent on relaxing of current social distancing rules	When feasible	To start.

## MEMBERS TRAINING AND DEVELOPMENT PROGRAMME 2021/22

EVENT/DATE	TIME	CONTENT	INTENDED AUDIENCE	PRESENTED BY
<b>Annual Planning Training</b>	5 October at 4pm or 20 October at 6pm	All Members are required to attend Planning Training on an Annual Basis – in addition to the value of an annual refresher from an individual point of view this is to ensure that, if a decision or process were to be challenged, the Council could demonstrate that all concerned had undergone up to date training. The ethics element will update Members on the requirements of the Code of Conduct, and any other issues identified during the course of the year.	Attendance at one session is Mandatory for All Councillors	Jon Bradbury and Chris Whitmore
<b>Decision Making and Ethics</b>	2 December at 4pm or 7 December at 6pm	To take a look at the Councils Constitution in the context of good governance and ethics	Mandatory for all Councillors	James McLaughlin
<b>Licensing &amp; Appeals Committee</b>	19 October at 4pm or 28 October at 6pm	To enable Councillors to have an understanding of the following: <ul style="list-style-type: none"> <li>• The background to licensing legislation relating, in particular to alcohol, entertainment &amp; late night refreshment; gambling; taxis and animal welfare.</li> <li>• The principles of robust decision making, legal context and sound reasoning.</li> <li>• The roles and responsibilities of the Legal Advisor and the Licensing Officer.</li> </ul>	Mandatory for ALL Members of the Committee	Lee Gardner and Eileen Tierney
<b>Current Issues</b>	To be arranged	Workshops for Members on current issues to be arranged as and when required.	All Councillors	Corporate Leadership Team
<b>Treasury Management</b>	25 January at 6pm	A session to give Councillors a better understanding of the Council's approach to Treasury Management.	All Councillors	Karen Henriksen
<b>Other Finance Issues</b>	Need for finance training on general or specific issues, in addition to proposed Member Workshop to be confirmed by KH	To provide Councillors with information on the following topics: <ul style="list-style-type: none"> <li>• An overview of the Council's finances (including the difference between revenue and capital expenditure, sources of funding and the Medium Term Financial Strategy)</li> <li>• Collecting Council Tax, Business Rates and Sundry Debts</li> <li>• Housing Benefits</li> <li>• Effective scrutiny.</li> </ul>	All Councillors	Karen Henriksen

EVENT/DATE	TIME	CONTENT	INTENDED AUDIENCE	PRESENTED BY
<b>Prevent</b>	6 October at 4pm or 4 November at 6pm	<p>Prevent is part of the UK's Counter Terrorism Strategy known as CONTEST. The aim of Prevent is to stop people becoming terrorists or supporting terrorism. It covers all forms of terrorism and extremism, including:</p> <ul style="list-style-type: none"> <li>• Religious – extreme or militant religious groups</li> <li>• Political – including far right and far left groups</li> <li>• Northern Ireland Related Terrorism (NIRT)</li> <li>• Conflicted Ideology – where someone becomes fixated on more than one type of extremism or terrorism.</li> <li>• School Massacre / mass harm – where someone might not have a clear 'ideology', but thinks about doing harm to a lot of people.</li> </ul> <p>The training aims to raise awareness of prevent to help Councillors to identify the signs of racialization and how to report incidents to help safeguard those vulnerable people <i>before</i> they commit any criminal terrorist related offences.</p>	Mandatory for All Councillors	Vikki Hatfield and Alena Greenwood
<b>Regulation of Investigatory Powers Act (RIPA) Training</b>	2 November at 4pm OR 10 November at 6pm	Lee Gardner to tender for outside provider – dates provisional on outcome of that.	Mandatory to satisfy requirements of Inspector	TBA
<b>Equalities and Diversity</b>	1 November 4pm OR 2 November at 6pm	<ul style="list-style-type: none"> <li>• To communicate, to members and officers, an update on the new Equality Diversity and Inclusion Policy; with a focus on recent changes and responsibilities</li> <li>• To share the updated Equality Impact Assessment form and guidance with members and officers; with a focus on why they are essential and how they should inform projects, including working through an example</li> </ul>	Mandatory for All Councillors	To be agreed
<b>Safeguarding</b>	17 November at 4pm OR 23 November at 6pm	<p>Subject to To help Members find out about their obligations as follows:</p> <ul style="list-style-type: none"> <li>• What is Safeguarding?</li> <li>• Identifying the various types of abuse</li> <li>• The District Council's role</li> <li>• Partners and the public roles in Safeguarding</li> <li>• What to do if you suspect someone is at risk</li> </ul>	Mandatory for all Councillors	Ash Watts
<b>Data Protection &amp; Information Security</b>	12 January at 6pm OR 18 January at 4pm	Update on previous training based on experience any and any breaches. In depth look at the policy for the acceptable use of email	Mandatory for all Councillors	Lee Gardner

EVENT/DATE	TIME	CONTENT	INTENDED AUDIENCE	PRESENTED BY
<b>Committee Chairs Refresher Training</b>	7 October at 3pm	Refresher training for to provide a refresher on best practice recommendations for Chairing meetings.	Committee Chairs and Vice Chairs	

**BACK TO AGENDA**