Annual Governance Statement 2016-17 – Action Tracker

Annual Governance Statement - Issue	Risk Register (Ref)	Responsible Officer	Action(s)
2016-17 Annual Governance Statement			
Procurement a) The procurement function needs to adopt a more proactive approach to ensuring best value and outcomes. Currently there is no collective procurement strategy. The level of resources to deliver innovative procurement requires consideration. (*Issue 9)	35	Katharine Eberhart, Director of Finance, Performance & Procurement	The design of the revised procurement function has been agreed and is being implemented. New roles will strengthen the strategic leadership of the procurement team leading to improved value for money across the team. Category Management Plans are in place and the procurement team is engaging the business directly, with embedded resource that will drive a strategic and proactive approach over the medium term. Our Forward Pipeline Plan forms a key part of discussions with the business and as a roadmap within Category Plans. The Procurement Strategy has been refreshed, guidance for officers updated and a project management approach to procurement agreed and being implemented.
Commissioning b) The gaps in effective commissioning (particularly in areas of Children's and Adults services) adversely impacts on the organisation's ability to assess future needs and the subsequent cost and quality of service provision. (*Issues 4; 6; 7; 9)	34, 35	Katharine Eberhart, Director of Finance, Performance & Procurement	The implementation of Category Management - particularly within Children, Adult & Families Social Care - will be a key driver for a significant step change in the way Procurement and Commissioning are undertaken. Commissioning Strategies for both Adults Services and Children Services have recently been developed which are enabling a very clear approach to development and alignment of related Procurement Category Plans to

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		Kim Curry, Executive Director, Children's, Adults, Families, Health & Education	support strategy realisation. Procurement and CAFHE teams are engaged proactively to develop future demand/project activities (within Category Wave plans – identified projects and their necessary time horizon) and the redesigned activity will enable the step change to establish the longer term solution addressing concerns identified here around ability to assess future needs and the subsequent cost and quality of service provision. There is a compelling case for transforming the Commissioning Function within CAFHE, through redesigning both its practice and process to ensure that the function and form improve capability and capacity to deliver high quality commissioning aligned to strategy. Current ways of working mean that services are commissioned and delivered reactively, rather than proactively, placing the system under further strain. The revised model and design will ensure that commissioning decisions are driven by evidence and focus on prevention, through a more consultative coproduction approach.
Compliance C) There is a requirement to further embed a culture of compliance in conforming to organisational processes and procedures. Outcomes are reliant on efficient, effective and intuitive systems to compliment the Council's self-serve management approach. (*Issue 2)	7, 13	Tony Kershaw Director of Law and Assurance	Continuation of monthly monitoring and reporting to directorate management teams across a range of systems and on compliance with accounts payable processes. The compliance reports will be supplemented with reports on compliance with HR activities as well as financial and procurement activities. Information held on the council's internal staff SharePoint site relating to Accounts Payable activities has been streamlined, including a new landing page to

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			help staff readily access the various processes. Specific focus on areas of procedures which may be service or budget critical – ensuring compliance with exercise of delegated powers and procedures for sound decisions, financial commitments and their audit trail. Further work is underway in HR to review HR Policies to ensure they are easily understood. Compliance statistics are being developed to ensure adherence to these policies.
Workforce d) The Council faces skills shortages in several disciplines and areas, with a reliance on interim and agency staff, difficulties in recruitment to significant posts and to cover critical skill areas in addition to other staffing pressures. This is not assisted by an immature workforce strategy and the absence of adequate provision for succession planning, operating in a competitive market in an expensive area. (*Issues 4; 7; 8)	11	Heather Daley Director of Human Resources & Organisational Change	Workforce strategy is under development and key workforce information and reporting is now taking place, including via Cabinet Board and TPM reports on a quarterly basis. A KPI dashboard has been developed and will continue to be reviewed and refined over the next 6-12 months. The HR&OC directorate will engage with Directors to ensure a proactive approach to manage skills shortage in key areas and results used to aid succession planning. A significant level of staff engagement is already in place as well as a number of key mechanisms to address the skills challenges faced by our organisation such as Children's Social Care and Adult Services.
 Data Protection e) The Council holds and shares with partners and providers significant levels of personal and confidential data requiring robust data protection, information governance and 	39a & 39b	Tony Kershaw Director of Law and Assurance	Comprehensive training and guidance as well as systems testing are used in addition to external accreditation for data security assurance. Plans are in place to resolve identified shortfalls. PSN accreditation has been renewed.

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security systems and processes to effectively protect and manage it. The pending General Data Protection Regulations (GDPR) imposes additional obligations on the organisation in its discharge of effective information governance that need to be considered			Improved ways to log and monitor activity across the network and at points of interconnection have been established. The risk register now separately identifies Cyber
			security and information security risk reflecting the need for separate treatments. GDPR Readiness reviews were undertaken, focused on information governance (IG) and a set of work streams were led by an officer IG Board. Awareness sessions were given for all senior managers to ensure that the new and continuing data laws are
			understood and being enacted. Member training and awareness-raising was also delivered prior to May 2018. GDPR preparation was delivered including: completion of an outline asset register; documenting of data processes in services; comprehensive reviews of policy and privacy statements and introduction of privacy
			impact assessments and revision of contracts with external suppliers and partners. This has included close liaison and work planning with Capita. The Director of Law and Assurance was appointed to carry corporate responsibility for data management and he has established and appointed a new data

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			management team to undertake current and expected new work related to data management. Security or data breaches and near misses have continued to be used to inform practice and approaches, including incident reporting.
Risk Management f) The Risk Management Strategy and Corporate Risk Register were reviewed and endorsed by the Regulation, Audit & Accounts Committee in March 2017. Based on this the first iterations of directorate and strategic risk registers, including action plans, have been produced. There is now a requirement to effectively embed risk management as a process across all levels of the organisation. (*Issue 1)	10	Katharine Eberhart, Director of Finance, Performance & Procurement	The process of risk management in the organisation continues to improve as it embeds in the organisation. Criteria to support risk escalation and de-escalation has been produced. The Corporate Risk Manager meets individually with CLT members monthly to review and discuss corporate risks and risk strategy Plans are in place to provide Risk Management training and will be rolled out throughout the year.

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Capita Reset g) During much of 2015-16 a review and reset of the Council's contract with Capita was ongoing. The review identified many areas where the contract was working well and delivering the Council's original intentions, but other areas where there was a misalignment with the Council's current objectives. The reset has been carried out in a collaborative manner with Capita, although the detailed contract changes are yet to be discussed. As this contract is key to service delivery and because the discussions are ongoing it is appropriate to highlight this area.		Katharine Eberhart, Director of Finance, Performance & Procurement	The work with Capita on reviewing the contract has concluded. The results of the review were reported to PFSC in January 2018. The performance of Capita against the contract is monitored monthly and the delivery of the contract against business needs is continually assessed.
 Health Integration h) The Government is encouraging even further integration with health sector partner which represents an opportunity to the Council. However it is a significant governance issue for two reasons: capacity such integration will require in order to make it successful; potential for constraining the Council's ability to adjust its care budgets to cope with future spending restraints. 		Kim Curry, Executive Director, Children, Adults, Families, Health & Education	The local health and social care system is undergoing significant reform to drive better health and wellbeing outcomes and to close a financial gap of around £900m across the STP footprint. The focus of the work of the CCGs remains tackling their financial gap and so progress on integration has been very slow. The Chief Executive and Executive Director meet regularly with the lead for the Commissioning Alliance and the 2 West Sussex Accountable Officerss. It has been agreed to produce a paper to outline vision and intent and to share this through all relevant governance structures. This will then be supported by a joint appointment at Director level to take forward the

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			strategic commissioning agenda. PWC are supporting the work through the development of a maturity matrix to inform activity, partnership coaching and the development of a refreshed governance structure.
Business Continuity i) As an authority we learn from operational and business continuity events. Incidents in the last twelve months that have provided valuable lessons learnt through the internal and multi-agency debrief processes. As a result the County Council business continuity policy statement has been updated and was approved by Council in February 2016. Additionally, significant work is being undertaken: - to update the business impact analysis for each Directorate, - ensure the County Emergency Centre is fit for purpose - Corporate and directorate plans are up to date and validated.		Neil Stocker, Director of Public Protection and Deputy Chief Fire Officer	Upgrade of Service continuity Planning Tool, July 2018 update – Meeting held with IT (Capita) they are currently reviewing and completing the outstanding works as part of the ongoing maintenance of the BC SCP Tool. Confirmation of completion of this stage of work is awaited. Incident Plans to be kept up to date and monitored - A process for reviewing all Incident Plans is now in place. Completion of all Business Impact Analysis (BAI's) (Service Continuity) - The BIA is now forms part of the Plan as one document. This now allows an easier route to updating BIA's by Business Continuity Coordinators. All Business Resilience Plans to be completed - The Plan is now linked to the BIA so one document is now provided. Ongoing updates as required in liaison with Directorates. Business Resilience Service Plans should be tested/exercised within appropriate timescales - RET are currently reviewing and adding relevant details to spreadsheet. Ongoing liaison with Directorates to highlight the need to exercise their Service Continuity Plans and ongoing reviews linked to their BIA's and Plans. RET offer guidance and assistance to all Directorates with this ongoing process. Progress on this

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			has been slightly hampered due to the loss of 2 experienced RET Advisers.
			Corporate Response and Recovery Plan to be exercised - The Corporate Exercise was postponed due to a real life Major Incident taking place. The County Council activated all elements of its Corporate Response and Recovery Plan on 5 March 2018 due to water shortages linked to mains disruptions linked to cold weather and burst pipes. An internal debrief of the incident and its management was held in support of a Sussex wide debrief which was held on 1 May.
			Following the debrief, no direct issues were identified relating to the Corporate Plan Structure. A full review of the CR&R Plan will commence in October 2018 as part of the annual review. The reviewed CR&R Plan will be validated as part of the Pan Sussex SRF Exercise in February 2019.
			Business Continuity Training is provided to line management - A training package included in the Starter Induction Programme will be produced. The Training will include Introduction to Business Continuity and Introduction to Emergency Planning. The person who was leading on this work has now left WSCC and his replacement is awaited.
			This workstream has now been re allocated and work is in process to develop an online training package via the Learning and Development Gateway with further training being developed as part of the ongoing BC review. It is anticipated stage 1 of this process (Identify

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			the E Learning Package required) September 2018. General update re Service Continuity Plans - An independent review to include development of a Risk Assessment tool on Service Continuity Plan review periods is currently being arranged. This reduce the number of Service Continuity BIA's/Plans that will be required and with the emphasis being placed on better quality plans that support the WSCC strategic objectives.

(*some issues identified within the 2015-16 AGS are incorporated within or superseded by highlighted actions listed within the 2016-17 AGS)