

Notice of Meeting



Governance and Audit Committee

Thursday, 29 June 2006 at 6.30pm

in Committee Room 1, Council Offices,
Market Street, Newbury

Date of despatch of Agenda: 21st June 2006

For further information about this Agenda, or to inspect any background documents referred to in Part I reports, please contact Vicky Wheatley, Policy & Research Officer on (01635) 519241
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Further information and Minutes are also available on the Council's website at www.westberks.gov.uk

Governance and Audit Committee to be held on 29 June 2006 (continued)

To: Councillors Barbara Alexander (*Chairman*), John Chapman, Sue Farrant, Denise Gaines, Alexander Payton (*Vice Chairman*), Andrew Rowles and Emma Webster

Agenda

Part I

	Page No.
1. Apologies To receive apologies for inability to attend the meeting (if any).	
2. Minutes To approve as a correct record the Minutes of the meeting of this Committee held on 10 April 2006 and 2 May 2006.	1 – 5
3. Declarations of Interest <i>To receive any Declarations of Interest from Members.</i>	Verbal
4. Statement of Final Accounts <i>Purpose: To approve the Statement of Final Accounts.</i>	To Follow
5. Statement Of Internal Control 2005-2006 – Assurance Annual Report <i>Purpose: To consider the Annual Assurance Report on the internal control framework.</i>	6 - 11
6. Statement Of Internal Control 2005-2006 – Review of Standards and Procedures <i>Purpose: To consider reviews of standards and procedures of Internal Control by the Monitoring Officer and S151 Officer.</i>	12 - 16
7. Statement of Internal Control 2005-2006 – Heads of Service Assurance Statements <i>Purpose: To consider the risks identified by Heads of Service in their Assurance Statements and Service Risk Registers.</i>	17 - 20
8. Statement Of Internal Control 2005-2006 – Strategic Risk Register <i>Purpose: To consider the Council's Strategic Risk Register for 2006/07 and the resulting Action Plan.</i>	21 - 30
9. Statement Of Internal Control 2005-2006 <i>Purpose: To approve the Statement of Internal Control.</i>	To Follow

Mark Harris
Head of Policy and Performance

GOVERNANCE AND AUDIT COMMITTEE

MINUTES OF THE MEETING HELD ON 10 APRIL 2006

Councillors: Barbara Alexander (*Chairman*)(P), John Chapman (AP), Sue Farrant (P), Denise Gaines (P), Alexander Payton (P), Andrew Rowles (AP) and Emma Webster (P)

Also present: John Bull, Andy Day (for Item 14 and 15 only) Ian Priestley, Charles Morris, Martin Cawte, Julia Gillespy, Shannon Coleman and Vicky Wheatley

PART I

10. ELECTION OF VICE CHAIRMAN.

The Chairman informed the Committee that in order to ensure it's separation from the Executive and Overview & Scrutiny Commission, Councillors Jones and Brooks would no longer be members of the Governance & Audit Committee. The Chairman welcomed Councillors Sue Farrant and John Chapman to the Committee who had been nominated to replace Councillors Jones and Brooks.

Given that Councillor Brooks had been elected Vice-Chairman of the Committee, the Chairman asked for nominations for the position, and asked that nominees not be part of the Executive or Overview & Scrutiny Commission.

RESOLVED that Councillors Farrant and Payton liaise over of the position of Vice Chairman and advise the Head of Policy & Performance which of them would take up the position.

11. APOLOGIES.

Apologies for inability to attend the meeting were received on behalf of Councillors Rowles and Chapman.

12. MINUTES.

The minutes of the meeting of the Governance and Audit Committee held on 26 January 2006 were confirmed as a true and correct record and signed by the Chairman, subject to the correction of Ian Priestley's job title (Item 7) to Head of Assurance.

13. DECLARATIONS OF INTEREST.

There were no interests declared.

14. A MEDIUM TERM STRATEGY FOR MEMBER DEVELOPMENT IN WEST BERKSHIRE.

The Committee considered a report outlining the proposed Member Development Strategy for the period 2006 – 2009 presented by Andy Day, Policy Manager – Business Management. The Development Strategy reflected the different roles carried out by councillors and the variety of ways in which information would be disseminated. The Strategy would help those with career aspirations and placed great emphasis on an induction for councillors which although not mandatory, would be strongly advised.

Andy Day confirmed that an external consultant (rather than an internal officer) would carry out the personal development interviews with Members and the Member Services Officer would retain a record of training attendance. The Committee asked that this be made clear in the Strategy, as well as how private the interview would be. Councillor Farrant suggested that the IDeA conduct the interviews and follow up on progress. The Committee requested that the mandatory element of the induction

training could be softened and time management and freedom of information training be included in the Strategy.

RESOLVED that the Member Development Strategy be noted and approved, subject to the amendments referred to above.

15. STATEMENT OF FINAL ACCOUNTS 2005/6

The Committee considered a report which sought to delegate the approval of the Statement of Final Accounts to this Committee. Andy Day explained that the Council was required to approve the Statement by the end of June, and transferring the power to the Committee made good use of the current structures and would allow Members more opportunity for debate. The Statement would be considered by the Executive prior to the Governance & Audit Committee.

John Bull, Audit Manager for the Audit Commission, confirmed this action was consistent with other Council approaches and the Audit Commission's final report would be sent to the Committee.

RESOLVED that

1. The Committee note the report and agree the recommended action.
2. Councillors Jones, Brooks and Zverko be invited to attend the next meeting of the Committee to make any comments they may have on the Statement of Final Accounts.
3. All Councillors receive the full agenda of the next Committee meeting.
4. Simon Freeman to be asked to make a presentation to the Committee on the Annual Statement of Accounts at its next meeting.

16. PRESENTATION ON RISK MANAGEMENT

At this point in the meeting, Charles Morris – Risk Manager, gave a brief presentation on Risk Management – and how this fitted into the role of this Committee. Charles Morris briefly outlined the following:

- A selection of photographs taken around West Berkshire Council were shown with a bearing on risk management – including Market Place / Shaw House / Bollards / and IT equipment,
- Headlines from both local and national media gave a broad perspective on risk issues,
- A general introduction to risk and the process used in the Council,
- Achievements in this area included 'Good' CPA Ratings, An implemented Risk Strategy and the strategic risk register reviewed on a quarterly basis by Corporate Board,
- Local authorities needed to strike a balance between risk and reward,

Charles Morris reported that he would be prepared to provide further training or information to any of the Committee if requested and Members were invited to join Risk Management workshops.

The Chairman reported that she had spent a half day in Internal Audit with a Group Auditor (Julie Gillhespey) which had helped her understanding of the way Internal Audit worked. Members of the Committee were encouraged to do the same.

RESOLVED that the presentation be noted.

18. STATEMENT OF INTERNAL CONTROL 2005/06 REVIEW OF EVIDENCE.

Ian Priestley reported that the Committee's role in relation to the Statement of Internal Control was to:

- Act as a critical friend and ensure that there was sufficient evidence available to allow the Leader and Chief Executive to sign the Statement of Internal Control for 2005/06.

- To consider what assurance the Committee requires from Internal Audit over the coming 12 months in terms of the risks identified in this report to support the Statement of Internal Control for 2006/07.

The Chairman was informed that within this report was a copy of the Statement of Internal Control for 2004/05 for information so the Committee could see what the Assurance Service were seeking to achieve. The report itself set out the assurance received from Heads of Service for 2005-2006. This was in the form of an Assurance Statement and Service Risk Register. Each Assurance Statement was signed by the Head of Service, Corporate Director / Chief Executive and Portfolio Holder. Within the report was a summary of the issues / risks highlighted by Heads of Service in their risk registers. Some of the Assurance Statements were not available at the time the report was produced but all would be in place or expected shortly, and once received the report would be submitted to Corporate Board for information.

RESOLVED that

1. The report be noted and approved.
2. The Statement of Internal Control 2005-2006 Review of Evidence report be circulated to the Committee by e-mail following its presentation to Corporate Board.

19. STRATEGIC RISK REGISTER – 2006/07.

The Committee was informed that the Strategic Risk Register would be a regular item for the Committee. It was formally reviewed on a quarterly basis by Corporate Board. The Committee's role would be to:

- Act as a critical friend in reviewing the risks identified by Corporate Board,
- To monitor progress with the action plan to ensure risk were managed appropriately,
- To consider what assurance were required from Internal Audit over the coming 12 months in terms of the risks identified in this report.

The report outlined the key strategic risks that the Council had identified and the measures being taken to mitigate the risks. The covering report explained how the risk register worked. Members would want to consider how often they wish to review this register.

RESOLVED that

1. The report be noted and approved.
2. The updated Strategic Risk Register be brought back to the Committee as appropriate with focus on the implementation of the action plan

17. INTERNAL AUDIT PLAN.

The Committee was informed that its role was to consider what assurance was required from Internal Audit in respect of the risks the Council faces, as outlined in the previous two items.

The main focus of this report was to consider and approve the Internal Audit Plan. Also included were the key pieces of work being carried out by the Risk Manager (Risk Strategy) and the Health & Safety teams (new SMS).

The audit plan was set out twice. Once ordered by Head of Service (page 45) and once by type of Audit (page 68). Assurance had done this so Heads of Service were clear what work Assurance would be doing in their area. Sorting by type helped the Committee and the Audit Commission understand how Assurance respond to the different types of risk the Council was facing. The audit types were:

Advisory – where systems were changing or being developed

Anti Fraud & Corruption

Key Financial Systems – need auditing every year

Operational risks – from Service Risk Registers

Schools Audit work

Strategic Risks – from the Strategic Risk Register

For each heading in the audit plan the key risks that would be covered are highlighted. As the Risk Management process matured these risks would largely reflect the risks contained in the Strategic and Service (Operational) Risk Registers.

Ian Priestley felt that the number of planned audit days were achievable, assuming the two vacancies in the team could be filled in the near future. In the event of the vacancies not being filled then work would be prioritised.

RESOLVED that the report be noted and approved.

20. WEST BERKSHIRE COUNCIL AUDIT AND INSPECTION PLAN 2006/07.

The Committee received a report detailing the audit and inspection work that the Audit Commission proposed to undertake in 2006/07, presented by John Bull from the Audit Commission. The Inspection Plan detailed the inspection itself, the use of resources and the accounts.

The Chairman questioned why the Audit Commission fee for 2006/07 had increased by 5.6% on the previous year. John Bull explained that for 2005/06 new international standards of auditing had been set, and the cost of the extra work had not been passed to the Council. The fee increase for 2006/07 would account for this for both years, and so in real terms the increase was 1%. The Chairman reported that as the Council budget for 2006/07 had been set in November 2005, she considered that to be unfair of the Audit Commission to announce the rise in the fee in April 2006. Martin Cawte agreed to draft a letter to the Local Government Association to lobby the Audit Commission regarding the timing of the rise in fees announcement.

John Bull indicated that Cultural Services and Libraries may be subject to a full inspection in 2006/07, and if this were the case, the Council would receive a grant.

RESOLVED that

1. The report be noted and approved.
2. Martin Cawte draft a letter to the Local Government Association to express the Council's concern at the timing of the Audit Commission's fee announcement.

(The meeting commenced at 6.00pm and closed at 8.00pm)

CHAIRMAN

Date of Signature:

GOVERNANCE AND AUDIT COMMITTEE

MINUTES OF THE MEETING HELD ON TUESDAY 2nd MAY 2006

Councillors: Barbara Alexander (*Chairman*), John Chapman, Sue Farrant, Denise Gaines,
Alexander Payton (*Vice-Chairman*), Andrew Rowles, Emma Webster

PART I

1. ELECTION OF CHAIRMAN.

RESOLVED that Councillor Barbara Alexander be elected Chairman of the Governance and Audit Committee for the 2006/07 Municipal Year.

Barbara Alexander in the Chair.

2. APPOINTMENT OF VICE-CHAIRMAN.

RESOLVED that Councillor Alexander Payton be appointed Vice-Chairman of the Governance and Audit Committee for the 2006/07 Municipal Year.

3. APOLOGIES.

There were no apologies for absence received.

CHAIRMAN

Date of Signature:

Title of Report:

**Statement of Internal Control - Assurance
Annual Report 05-06**

Item 5

Report to be considered by:

Governance and Audit Committee

Forward Plan Ref:

Corporate Plan Priority:

D4 – Stronger governance

The proposals contained in this report will help to achieve the above Corporate Plan priority by:
Providing assurance on the soundness of the Internal Control framework

Purpose of Report:

To support the production of the Statement of Internal Control for 2005-06

Recommended Action:

To note the outcome of the Internal Audit work completed during 05-06

Reason for decision to be taken:

To allow members to comment on the outcomes of the work

List of other options considered:

None

Key background documentation:

- Report to Corporate Board

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Supporting Information

Background

A report is made by Internal Audit twice a year to Corporate Board to present the results of audits.

The purpose of the report is to update the Governance and Audit Committee on the results of work carried out by Internal Audit

The report covers the last six months of 2005-06. An interim report was made to the Committee in November 2005.

A further purpose of the report is to meet the requirements of the CIPFA "Code of Practice for Internal Audit" which requires the "Head of Audit" to provide an opinion on the Council's internal control framework, and to report on the performance of the Internal Audit service against the requirements of the CIPFA code of practice.

Appendices

A Report to Corporate Board

Consultation Responses

Local Stakeholders:	None
Officers Consulted:	None
Trade Union:	None

Implications

Policy:	None
Financial:	None
Personnel:	None
Legal:	None
Property:	None
Risk Management:	None

Corporate Board

**Internal Audit
Annual Report 2005 -06**

May 2006

Internal Audit – Annual Report for 2005-06

1 Introduction

1.1 The CIPFA Code of Practice for Internal Audit in Local Government requires the “Head of Internal Audit” to make a formal report annually to the Council. The report should cover:

- An opinion on the overall effectiveness of the Council's internal control framework, making any qualifications as necessary
- Provide a summary of the work undertaken upon which the opinion is based
- Highlight any issues relevant to the preparation of the Statement of Internal Control
- Summarise performance of Internal Audit and comment on compliance with the CIPFA Code of Practice

1.2 The Code recommends interim reporting during the year on any emerging issues and an interim report was produced in November 2005.

1.3 This annual report meets the requirements of the CIPFA Code of.

2 The Internal Control Framework

2.1 The internal control framework remains robust. No fundamental weaknesses were identified in the work carried out by Internal Audit.

3 Results of work completed

3.1 The audit plan was approved in May 05 by the Executive.

3.3 During the year a number of variations were made to the plan in response to changing service priorities.

3.4 A listing of the results of work that has been completed over the last six months is attached at appendix A. This list uses a traffic lights system to set out the position of each audit or follow up audit.

3.5 A rating system is used to derive the overall opinion. Each audit is categorised into one of five, these are – Very Weak, Weak, Satisfactory, Well Controlled, Very Well Controlled. Satisfactory and better are given a Green rating, weak and very weak are give Amber. Where an action plan for an audit that was Amber has not been implemented, then a Red rating is given. A note of explanation has been provided for audits noted as Amber; this is contained at Appendix B.

3.6 A key outcome of each audit is a management action plan that is designed to resolve issues of concern. All action plans are drawn up between the auditor and the service manager, agreed with the Head of Service, and copied to the relevant Corporate Director.

3.7 Internal Audit carry out follow up reviews to ensure that action plans are progressing as agreed.

3.8 The areas of real concern are those where a weak or very weak opinion has been given, action plans agreed, but follow up work, or repeat audits, by Internal Audit indicate difficulties in delivery of agreed action plans. As noted above, such audits are given a Red. There were no areas in the Red category.

4 Service performance and Internal Audit and Compliance with the CIPFA Code of Practice

4.1 Overall progress in completion of the audit plan is monitored quarterly by the Council. 85% of the 05-06 audit plans was completed.

4.2 The Internal Audit service fully complies with the CIPFA Code of Practice. An effective quality assurance process is in place. The Council's External Auditor is able to continue to place reliance on the work of Internal Audit.

Appendix A – Summary Of Completed Audits And Opinions

	Service	Audit	Opinion
1	Financial Planning and Policy	Treasury Management	Green **
2	Legal and Electoral	Registrars Service	Green
3	Legal and Electoral	Electoral Services	Green **
4	Property	Asset Management	Green
5	Revenues/Exchequer	National Fraud Initiative	N/A
6	Strategy & Commissioning	Risk Management & the Statement of Internal Control	Amber
7	Older People's Services	Shaw Day Centre Follow-up	Green
8	Older People's Services	Purchasing Care – Home Care Follow-up	Green
9	Community Care	Assessment of Needs – Learning Disability and Mental Health	Green
10	Highways & Engineering	Highways Maintenance Follow-up	Green
11	Highways & Engineering	Traffic Management	Green
12	Education – Schools	Theale Green Secondary School	Green *
13	Education – Schools	Shaw –cum- Donnington Primary	Green *
14	Education – Schools	Springfield Primary	Green

Key:-

* Overall opinion of the audit - well controlled

** Overall opinion of the audit - very well controlled

Advisory Reviews (such reviews arise from the provision of advice on system key controls, where the Service concerned is already aware that improvement is needed or the systems are being reviewed by the service area, and this approach as been agreed between the relevant Head of Service and Internal Audit at the commencement of the Review).

The Standard follow-up process applies to these reviews - at which time progress made would be linked into the traffic light reporting process.

1	I.T.	Manage problems/incidents (Helpdesk)
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Follow-ups where we have agreed extended deadlines for implementation:-

1	Resources and Commissioning	Use of Consultants – Partial implementation of our points, we were informed that there is a larger piece of work being carried out on this across the Council (will revisit the follow-up in August 2006).
2	Culture and Youth	Museum - Lack of staff in place to implement the recommendations – agreed new timeframe for the follow-up of August 2006.
3	I.T.	Change control – Some progress has been made on drafting procedures, but this needs revamping to link in with the work being undertaken by the information Security Officer (revised deadline of November 2006).

Appendix B Note re Audits highlighted as Amber

The following comments relate to those audits highlighted as Amber:-

1) Risk Management & the Statement on Internal Control

- 1.1 The main area of weakness identified was a gap in assurance between what is entered into the risk registers and what are deemed to be appropriate risks and controls.

The Risk Manager is in the process of reviewing risk registers with Heads of Service to ensure that the risks and controls in registers are meaningful and appropriate.

- 1.2 The detail contained in the operational risk registers is high level and generalised, little evidence was found to suggest that operational risk registers were being produced and monitored in conjunction with service plans. Risks identified were not mapped back to service objectives resulting in the risks to the attainment of service and Authority wide strategic objectives are not being identified or controlled.

A revised format of the risk register will ensure that risks are aligned to service objectives.

- 1.3 The action plans supporting the risk registers did not sufficiently detail how weaknesses in control are to be addressed and mitigated.

Controls will be auditable and realistic in future action Plans. The audit report has been considered by the Risk Management JCC and the Corporate Board as a way of ensuring that the agreed actions are implemented.

Title of Report:	Statement Of Internal Control 2005-2006 Reviews Of Standards And Procedures Of Internal Control By The Monitoring And Section 151 Officers	Item 6
Report to be considered by:	GOVERNANCE AND AUDIT COMMITTEE	
Forward Plan Ref:		

Corporate Plan Priority:	D4 – Stronger governance
The proposals contained in this report will help to achieve the above Corporate Plan priority by reviewing and providing assurance on the effectiveness and efficiency of the Council's governance and other arrangements which may impact upon the internal control framework.	

Purpose of Report:

To provide evidence and independent verification of governance matters which may impact on the internal control regime from the viewpoints of the Monitoring Officer and Section 151 Officers as two of the three Statutory Officers of the Council.

Recommended Action:

To note the report and adopt any recommendations contained within this report.

Reason for decision to be taken:

List of other options considered:

Key background documentation:

- Reports to Standards Committee on the review of ethics and probity during 2005/2006.
- Action plans relating to risk
- Various changes to the Council governance arrangements

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Implications

Policy:	Established as part of CIPFA guidance and reporting arrangements adopted by Council in connection with the Statement of Internal Control.
Financial:	No financial implication associated with this report
Personnel:	N/a
Legal:	In accordance with the provisions of the Local Government Act 1972, Local Government and Housing Act 1985, Local Government Finance Act 1998 and amendments thereto.
Risk Management:	In accordance with Risk Strategy

1. Background

- 1.1 As part of the Statement of Internal Control, CIPFA guidance recommends that the Monitoring Officer and Section 151 Officer provide "a key source of assurance that the Council's systems and procedures of internal control which are in operation are effective, efficient and being complied with". In essence this requires the Monitoring Officer, as the Officer charged with ensuring that the Council, and every part of it, acts legally and is not acting in a manner thought to constitute maladministration or injustice to review certain aspects of the Statement of Internal Control. Also that the Chief Financial Officer / S151 Officer similarly ensures that all parts of the Council act in accordance with the budgetary and policy framework laid down at each annual budget setting Council and that all financial administration standards are complied with.
- 1.2 This report reviews the requirements of the Statement of Internal Control, the issue or otherwise of Section 5/Section 114 reports, ethical and probity matters, together with changes to the Constitution which have occurred to ensure that the Council operates in accordance with statute, regulation and guidance, and looks at the implementation of action plans in connection with strategic risks identified by Officers.

2. Investigations undertaken by the Monitoring Officer

- 2.1 Section 5 of the Local Government and Housing Act 1989 requires the Monitoring Officer to prepare a formal report to full Council where it appears that the Council, a committee or an Officer is likely to act illegally, or in a manner such as to constitute maladministration or injustice. The Monitoring Officer's role in essence is to ensure the legality of local governance arrangements based upon statutory requirements and guidance from Government and other outside bodies. As mentioned above, this role complements that of the Section 151 Officer and the Head of Paid Service (the Chief Executive) whose roles are also established by statute.
- 2.2 The formal report process under Section 5 is one which should be approached with extreme caution and should not be undertaken lightly. If such action is proposed it is generally the view that outside advice from Counsel should be sought by the Monitoring Officer. During 2005/06 there have been no reports or investigations necessary which fall within the requirements of Section 5 of the 1989 Act.
- 2.3 The Monitoring Officer's advice has been sought in connection with a number of day-to-day administrative matters and in particular the attendance at meetings by Members in connection with the Code of Conduct. This is covered in paragraph 5 of this report.

3. Role of the Section 151 Officer

- 3.1 The definitive Statement on the Role of the Finance Director in Local Government is set out in a CIPFA publication of 2003. This identifies 5 key roles
- Maintaining strong financial management underpinned by effective financial controls
 - Contributing to corporate management and leadership
 - Supporting and advising democratically elected representatives
 - Supporting and advising officers in their operational roles
 - Leading and managing an effective and responsive financial service.
- 3.2 The Section 151 Officer is required to report to all the local authority's members, in consultation with the Head of Paid Service and the Monitoring Officer if there is, or there is likely to be, unlawful expenditure or an unbalanced budget. Such a report known as a Section 114 report derives from the Local Government Finance Act 1998 as updated by the 2000 Act and members of the Council are required to have regard to the S151 Officer's advice. Not to do so would be a breach of the Code of Conduct for members which is enforceable by the Standards Board for England.
- 3.3 Each year the S151 Officer reports as part of the budget decision making process his opinion on the adequacy of reserves and robustness of the budget estimates.

- 3.4 The S151 Officer is consulted about a wide range of discretions under the Council's constitution, in particular exemptions to standing orders and contract rules of procedures. The S151 Officer maintains a file of all such exemptions given and discretions sought and granted.
- 3.5 Throughout the year expenditure monitoring ensures that any budget overspends or income shortfalls are identified and corrective measures can be put in place to ensure that the overall council revenue budget keeps within the policy and budgetary framework agreed at the annual budget setting process. In 2005/06 as in each of the last three years the out-turn has delivered a surplus against the budget.
- 3.6 All Executive or other decision making body reports have clearly set out financial recommendations. It is the responsibility of the S151 Officer to ensure that the financial implications of all such decisions are adequately considered and that recommendations are based upon prudent financial advice. The S151 Officer is a member of Corporate Board and involved in all significant resource decisions of the authority.
- 3.7 There has been no necessity to implement the Section 114 process during 2005/06 and the S151 Officer confirms the robustness of the financial and budgetary frameworks.

4. Robustness of corporate governance arrangements

- 4.1 As Members will be aware, throughout the year reports have been considered by this Committee and forwarded to Council regarding certain amendments which have been necessary to the Constitution. These include:
- The role and position of the Constitution Task Group. This arose through the amended guidance issued by CIPFA and resulted in the establishment of the Governance & Audit Committee. During the year, following advice from the Audit Commission, changes to the membership were also agreed.
 - A review of the Contract Rules of Procedure was carried out to reflect the impact of changes to the EU Procurement regime and its effect on the Council's contracting arrangements.
 - Minor changes to delegations to Officers were agreed in the light of new legislation.
 - A report to Council following the appointment of the Chief Executive was required as the Chief Executive (then the Monitoring Officer) as Head of Paid Service under Section 4 of the Local Government & Housing Act 1989, could not hold both roles. The Head of Legal & Electoral Services was appointed to the Monitoring Officer post. As part of the cover for the Monitoring Officer deputies were also appointed by him.
 - Changes needed following transfer of Amey staff
 - Amendments to constitution following Part 1 of the Senior Management Review.
- 4.2 The above matters were referred in accordance with the Constitution and considered by full Council at meetings during the year. The changes ensured that the Council's administration remained efficient and effective and these changes will be reflected in updated versions of the Constitution and the Council's website.
- #### **5. Ethics & Probity**
- 5.1 During 2005/06 ethics and probity matters were considered by the Council's Standards Committee and as a result training sessions were carried out for Members of both this Council to refresh advice on the Code of Conduct and proposed changes to it suggested by Government, the Graham Committee and the Standards Board. Sessions were also held for parish and town councils prior to the parish conference.
- 5.2 The number of references to the Standards Board requiring full investigation either by an Ethical Standards Officer or an Adjudication Panel remained extremely low. Only one parish councillor was partially suspended by the Adjudication Panel during the year for breaches of the Code, the only such suspension since the implementation of the Code in 2002.
- 5.3 There were no references for local determination in 2005/06 of district, town or parish councillors.

5.4 The Council received the first annual report from the Chairman of Standards Committee at its annual meeting in May 2006.

6. Implementation of Action Plans from Strategic Risk Register

6.1 All strategic risks were placed on a strategic risk register and reviewed by Corporate Board and Management Board on a quarterly basis throughout the year and then by the Governance & Audit Committee. During the year, reports on all red risks on service risk registers were received and considered by Corporate Board. Actions arising from such reviews have ensured that the council's risks are considered at the highest level.

7. Conclusions

7.1 Overall the Council's governance arrangements are robust, efficient and effective and because of the regular review with the changes proposed by Government, the Audit Commission or other outside bodies. This was particularly seen with the revisions to the Contract Rules of Procedure and the fact that no formal reports to full Council have been necessary by the Monitoring Officer or Section 151 Officer. Ethical and probity matters have been managed effectively by the Monitoring Officer, the S151 Officer and Standards Committee. The Strategic Risk Register does not highlight matters of particular concern with regard to the formal requirements of Section 5 of the Local Government & Housing Act 1989. No occasion has arisen which has required the S151 Officer to issue a S114 report.

Appendices

None

Consultation Responses

Local Stakeholders:	N/a
Officers Consulted:	Andy Day, Liz Howlett, Charles Morris, Ian Priestley
Trade Union:	N/a

Title of Report:	Statement of Internal Control 05-06 - Heads of Service Assurance Statements	Item 7
Report to be considered by:	Governance and Audit Committee	
Forward Plan Ref:		

Corporate Plan Priority:	D4 – Stronger governance
The proposals contained in this report will help to achieve the above Corporate Plan priority by:	
<ul style="list-style-type: none"> • Reviewing the evidence that is available to support the Statement of Internal Control 	

<u>Purpose of Report:</u>	To set out the evidence, contained in Service Risk Registers and Heads of Service Assurance Statements that will support the SIC
<u>Recommended Action:</u>	To examine the evidence provided by Heads of Service to support the SIC
Reason for decision to be taken:	To ensure that the SIC has appropriate supporting evidence
List of other options considered:	None
Key background documentation:	Service Risk Registers and Assurance Statements from Heads of Service

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1 Introduction

- 1.1 The purpose of this report is to update the Committee on the evidence supplied by Heads of Service in their Assurance Statements for 05-06 and associated risk registers.
- 1.2 All Heads of Service have completed an Assurance Statement which has been reviewed and agreed by their Director and Portfolio Holder. Any areas of concern that they may have are highlighted on the associated service risk register.
- 1.3 Corporate Board have reviewed the areas of concern, highlighted below, and will bring these issues into consideration at the next quarterly review of the Strategic Risk Register.

2 Areas of concern highlighted by Heads of Service

- 2.1 Key issues for Members to focus on are set out by Service Grouping below:

2.2 Chief Executive / Strategy and Resources

Service	Risk	Proposed Action
Assurance	Poor retention of staff in Internal Audit	Review structure of Internal Audit
	No Corporate Business Continuity Plan	Corporate BCP is being developed
	No Safety Management System in place	SMS is currently being developed
Human Resources	Staff Turnover	Priorities and Resource Allocation plan developed by HOS needs to be refined and timescales reviewed by HRMT
Resources & Commissioning	Recruitment & Retention	Review staff skills / training
Policy & Performance	Breaches of Codes of Conduct	Training and written guidance
	Los of key staff	Succession planning Training Work planning
Information and Communication	Children in libraries targeted by inappropriate adults	Banning of particular individuals Policy adhered to and signage
	Children in libraries targeted on-line	Staff able to monitor use of PCs. AUP in place. Banning of individuals. Parental Permission. Police referrals where appropriate
Legal	Loss of Key Staff	Succession planning, Training and work planning
ICT	Malicious attack on systems	Firewalls offer Limited Protection- Continual Monitoring
	Loss of Landesk - Service	SLA with ICT Operations
Property	Staff turnover	Convert temporary staff to permanent
	Failure to adhere to H&S Asbestos Legionella - Fire	Capital bid and compliance officer in Assurance
	Projects fail	Project Management Methodology
	Delivery of improved Helpdesk	Funding required for effective software to monitor progress of works.
Service Access	Key Staff Leaving	Training, Cross Skilling, Secondments and Role Rotation

Exchequer	No issues of concern	
Finance Policy & Planning	No issues of concern	
Accountancy	Recruitment / Loss of key staff	Succession Planning – Training and work planning.

2.3 Environment and Public Protection

Service	Risk	Proposed Action
Public Protection	Lack of storage facilities Inadequate security	Introduction of new evidence control system and building of new secure evidence storage room
	Working in dangerous situations / dealing with dangerous persons	Better inter departmental communications on potentially dangerous persons. Airwave radio Licence applied for
	Staff shortages	Service improvement programme
Highways & Engineering	Staff shortages	Relocation Package Good range of technical opportunities
	Adverse weather Climate change Poor maintenance Lack of Investment Poor design	EA Liaison Experienced staff
	Increasing traffic volumes High density housing Inadequate infrastructure Poor transport planning	LTP strategies TM Projects Emerging Network Management Plan
Countryside & Environment	Loss of Key-staff	Succession planning – Training and work planning, Performance management process.
	Budgets / funding	Sound budget management – accessing external funding
	Recruitment and Retention	Good range of technical opportunities
Planning and Transport Strategy	No issues of concern	

2.4 Children and Young People

Service	Risk	Proposed Action
Education	Recruitment and Retention	Training and performance management process
	Loss of key staff	Succession planning
Culture and Youth	No issues of concern	
Children	Injury to Carer or disabled child	Ensure Manual Handling training available to foster carers etc
	Loss of focus on operational priorities impacting on integration of services to children	Managers Behaviour / operational plan Change management programme
	Funding high cost low volume preventive measures	Active management & strong Financial planning

2.5 Community Care and Housing

Service	Risk	Proposed Action
Community Care & Housing	Inadequate resources: reducing grants. Unexpected demand. Poor financial controls.	Service reviews. LD Reconfiguration plan, budget monitoring, accountancy systems. Contingency plan agreed by Council
Older People	Lack of contract compliance. Insufficient service provision in the market.	Robust contract monitoring. Cessation of contracts if poor service. Accreditation and commissioning and CSCI closely liaising. Development of External Market
	Lack of capacity due to recruitment. Development of specialist home care	Project plan with time frame identifying key stages. Recruitment initiatives Coldharbour modifications implemented and staff trained
	Care homes threatened with closure Provider services not meeting legal requirements.	Specialist H& S advice. Collaborative working across Council; Care homes, Property Planning. Appropriate links with Fire Service, CSCI and other regulatory bodies. Staff trained in awareness of H&S issues appropriate to care environment
Quality, Performance & Partnerships	No issues of concern for the service	

2.6 The Heads of Service Assurance Statements and detailed risk registers and action plans are available to Members if required.

Title of Report:

**Statement of Internal Control
Strategic Risk Register – 2006-07**

Item 8

Report to be considered by: Governance and Audit Committee

Forward Plan Ref:

Corporate Plan Priority: D4 - Stronger governance

The proposals contained in this report will help to achieve the above Corporate Plan priority by:
Strengthening the internal control framework of the Council.

Purpose of Report:

To support the Statement of Internal Control by identifying the Strategic Risks and associated action plan

Recommended Action:

To consider and comment on the Strategic Risks and action plan.

Reason for decision to be taken:

To ensure that the Council's strategic objectives are met and that any associated risks with achieving them are identified and appropriately managed.

List of other options considered:

None

Key background documentation:

- Risk Management Strategy
- Strategic risk Register / Action Plan

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Supporting Information

1. Background

- 1.1 As part of the Statement of Internal Control the Council is required to identify and set out how it intends to deal with, significant control issues. A key part of the evidence that supports this process is Strategic Risks and associated action plan.
- 1.2 The Council adopted a Risk Management Strategy in December 2004. This is revised annually. The strategy for 2006-07 is included in the agenda for approval at this Executive. This report is an annual review of the Strategic Risk Register building on the work of previous years.
- 1.3 Risk management is an integral part of the corporate governance framework and is embedded into the fabric and decision making process of the Council. Risk management is a central part of any organisation's management. It is the process by which organisations methodically address the risks associated with the delivery of their objectives. The focus of good risk management is the identification and handling of those risks. The risk management process is fully supported by Members and the senior management team.
- 1.4 The previous Strategic Risk Register was reported to Members at the last meeting of this Committee and the register has now been revised by the Council's Management Board as attached.

Appendices

Appendix A Strategic Risk Register
Appendix B Strategic Action Plan CB Key Risks

Consultation Responses

Local Stakeholders:	Not Consulted
Officers Consulted:	Corporate Board, Risk Management JCC
Trade Union:	None

Strategic Risk Register 2006 / 2007

Strategic Risks	Gov & Audit
Date	June-06

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			Owner
				Likely-hood	Impact	Score	Likely-hood	Impact	Score	
External Influences										
1.1	Economic Increased unemployment & Benefit Claims	Downturn in Economy/ Recession Increased demand on Council Services	Increased unemployment Increased Nos on benefit Reduced income to the Council Financial	3	3	9	3	3	9	Head of Policy & Performance + Cllr Anthony Stansfeld
1.2	Inability to Recruit High Inflation Increased commuting	Overheating Economy	House price inflation Skills shortages Wage inflation Inward Commuting	1	3	3	1	3	3	Head of Policy & Performance + Cllr Anthony Stansfeld
1.3	Social Civil Unrest	Unfavorable perceptions of Crime & Disorder issues	Civil unrest Perceptions / High fear of crime	1	3	3	1	2	2	Chief Executive + Police Super + Cllr Emma Webster
1.4	Terrorist Action	Action taken by international / local groups	Significant disruption Fatalities / Injuries Reputation > <i>No Insurance against Terrorist Action</i>	2	3	6	2	2	4	HOS Public Protection + Cllr Geoff Findlay
1.5	Environmental Major environmental incident	Major disaster Contamination Severe weather Outbreaks of disease Flooding	Significant disruption Fatalities / Injuries Reputation	3	4	12	3	3	9	HOS Public Protection + Cllr Geoff Findlay
1.6	Flu Pandemic	Spread flu Lack of NHS Vaccines	Significant disruption Fatalities / Injuries Reputation	3	4	12	3	4	12	Corp Director CC&H + Cllr Geoff Findlay

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			
				Likely-hood	Impact	Score	Likely-hood	Impact	Score	
1.7	Political Intervention by Central Government or Other Regulatory Body	Statutory obligations not met Change of CPA Methodology	Legal challenge Government Intervention Compensation Poor CPA Scores Poor Audit Commission Reports	3	3	9	2	2	4	Chief Executive + Cllr Graham Jones
1.8	Failure to achieve good CPA Rating / JAR 07	Statutory obligations not met Change of CPA Methodology	Legal challenge Government Intervention Compensation Poor CPA Scores Poor Audit Commission Reports	3	3	9	2	2	1	Chief Executive + Cllr Graham Jones
1.9	Administrative Area changed / WBC absorbed into another authority	Problems arising from Local Government reorganisation	Possibility of merger with another authority	1	3	3	1	3	3	Chief Executive + Cllr Graham Jones
2 Corporate Management										
2.1	Strategy Non Delivery of Corporate Plan	Failure to see demographic and other external changes Failure to understand organisational context Poor / weak leadership	Ineffective forward planning Inappropriate service delivery Intervention Budget difficulties Poor CPA Scores Poor Audit Commission Reports	3	4	12	1	3	3	Chief Executive + Cllr Graham Jones
2.2	Inappropriate change management	Inappropriate pace of change Expectations not realised	Failure to realise opportunities CPA Intervention Inefficiency Poor reputation Capacity issues	3	3	9	1	2	2	Chief Executive + Cllr Graham Jones
2.3	Finance Failure to adhere to financial rules of procedure	Failure to undertake appropriate Financial Planning Failure to account for unaccepted items	Qualification on the accounts Failure to set standards Reputation CPA Unacceptable under / Overspends Section 151 officer / DA Reports	2	4	8	1	3	3	Section 151 + Cllr Laszlo Zverko
2.4a	Difficulty in attracting funding	Difficult financial environment Poor management	Unable to meet objectives Limited Service Delivery Lack of Resources	4	3	12	3	2	5	Section 151 + Cllr Laszlo Zverko

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			Owner
				Likely-hood	Impact	Score	Likely-hood	Impact	Score	
2.4b	Loss of RSG	Changes in Government methodology	Lack of resources impacting on service delivery	3	3	9	3	2	6	Section 151 + Cllr Laszlo Zverko
2.4c	Loss of Specific grants	Changes in Gov priorities	Lack of resources impacting on service delivery	3	2	6	3	1	3	Section 151 + Cllr Laszlo Zverko
2.4d	Insufficient budget to fund Concessionary Fares Free Bus Passes issued in 2007	New Govt Policy	Lack of resources impacting on service delivery	3	3	9	3	1	3	CD E&PP + Cllr Keith Chopping
2.4e	Income targets not met	Supply / Demand Over estimate target	Lack of resources impacting on service delivery	2	2	4	1	3	3	Section 151 + Cllr Laszlo Zverko
2.5	Gershon targets Missed	Poor management Inability to find efficiencies	Potential for Government penalty Adverse Management Letter	3	3	9	2	2	4	Section 151 + Cllr Laszlo Zverko
2.6	HR Inability to recruit & retain to key posts	Local labour market Council/s reputation	Increased costs Lack of service continuity Inefficiency Service delivery problems	3	3	9	2	2	4	Head of HR + Cllr Anthony Stansfeld
2.7	Injury to staff working alone Security of staff	Lack of appropriate risk assessments / supervision	Fatality / Injury Financial / Insurance claims Theft / Damage Reputation	3	3	9	2	2	4	Head of HR + Cllr Anthony Stansfeld
2.8	Failure to Manage PR	Poor Service or outcomes resulting in bad reports in the press / media etc	Poor Reputation CPA Low satisfaction	2	3	6	2	2	4	Head of Info Comm + Cllr Anthony Stansfeld

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			Owner
				Likely-hood	Impact	Score	Likely-hood	Impact	Score	
3 Corporate Governance										
3.1	Inappropriate conduct by Staff / Members	Lack of Code of Conduct CRB Check failures	Reputation Legal Action Fatality / Injury	3	3	9	1	3	3	Chief Executive + Cllr Graham Jones
3.2	Poor / Inappropriate Decisions	Lack of full information for decision making	Legal Challenge Compensation Reputation	3	3	9	2	2	1	Head of Policy + Cllr Anthony Stanfield
3.3	Service Delivery Failure	Poor / Weak management by Officers	Inefficiency Poor Reputation	3	3	9	1	2	2	Chief Executive + Cllr Graham Jones
3.4	Poor Scrutiny	Lack of resources lack of Member engagement	Inferior decisions Regulations Poor reputation	3	3	9	2	2	1	Chief Executive + Cllr Graham Jones
3.5	Poor Corporate Governance	Poor policies and procedures	Legal Action Poor Reputation Reduced efficiency Intervention	3	3	9	2	2	1	Monitoring Officer + Chair of Standards Cttee
3.6	Ineffective Business Continuity Planning	Poor service planning Lack of BCP	Service delivery fails Impact on performance	2	4	8	2	3	6	Head of Assurance + Cllr Anthony Stanfield
3.7	Customers Stakeholders High levels of customer dissatisfaction	Inadequate Customer contact / regime	Complaints Poor reputation	3	3	9	1	2	2	HOS + Cllr Anthony Stanfield
3.8	Lack of Consultation	Lack of Strategy Poor forward planning	Disengaged community	3	2	6	1	2	2	Head of Policy + Cllr Graham Jones

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			
				Likely-hood	Impact	Score	Likely-hood	Impact	Score	
3.9	Health & Safety	Failure to comply with Health & Safety Legislation	Legal / Insurance Insurance / Financial Reputation Corporate manslaughter	3	3	9	2	2	4	Head of Assurance + Cllr Anthony Stansfeld
4 Technology										
4.1	Failure of technology	Failure of IT HR / Client systems	Service delivery / failures	2	3	6	1	2	2	Head of ICT + Cllr Emma Webster
4.2	Failure to meet IEG	Failure to set out plans and take IEG forward	Service delivery / failures & reduced access to services Reputation Loss of resources	2	2	4	1	2	2	Head of ICT + Cllr Emma Webster
4.3	Failing to invest in technology	Investing in wrong Technology Failing to invest	Lost Resources Ineffective service delivery Service failure Lack of computability	2	3	6	1	1	1	Head of ICT + Cllr Emma Webster
4.4	Failure to achieve value	Implementation of IT Systems	Capacity / Resource issues	3	3	9	2	2	4	Head of ICT + Cllr Emma Webster
4.5	Virus / Hacking Other IT security issues	Attack on Council's computer systems	Service Delivery / Failure Data Protection Reputation	3	3	9	2	3	6	Head of ICT + Cllr Emma Webster
5 Service Delivery / Procurement										
5.1	Failure to meet objectives No clear targets / objectives	Weak performance management	Reputation Potential intervention Poor CPA Scores Ineffective Service Delivery	3	3	9	2	2	4	Head of Policy + Cllr Graham Jones
5.2	Poor / Ineffective procurement	Poor Governance Lack of Skills	Waste / Inefficiency	3	3	9	3	2	6	Section 151 + Cllr Anthony Stansfeld

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			
				Likely hood	Impact	Score	Likely hood	Impact	Score	
6 Failure to Deliver / Manage Major Projects										
6.1	Shaw House	Poor Project Management Economic	Delay / Overspend Reputation Project collapse Insurance	3	3	9	2	2	4	Project sponsor + Cllr Marcus Franks
6.2	Park Way	Poor Project Management	Delay / Overspend Reputation Project collapse	3	2	6	2	2	4	Project sponsor + Cllr Emma Webster
6.3	Market St	Poor Project Management	Delay / Overspend Reputation Project collapse	3	2	5	2	2	4	Project sponsor + Cllr Emma Webster
6.4	Newtown Resource Centre	Poor Project Management	Delay / Overspend Reputation Project collapse Impact on Service	3	3	9	2	2	4	Project sponsor + Cllr Joe Mooney
6.5	Waste PFI	Poor Project Management Only ONE Bid Received Political Issues Affordability	Delay / Overspend Reputation Project collapse	4	4	16	4	3	12	Project sponsor + Cllr Geoff Findlay
6.6	Tilehurst Learning Project	Failure to deliver 1. Financial 2. Project Planning 3. Continued Operation of schools	Reputation Political issues on National and Local basis	4	4	16				HOS Education + Cllr Graham Pask
6.7	Childrens Trust	Failure to continue with existing service delivery Unaffordable structure	Service destruction / failure Harm to young people Reputation	3	4	12	2	3	6	Project sponsor + Cllr Graham Pask
6.7a	Planning Related Kennet Valley Park	Failure in planning process	Impact on Council / Education & transport facilities Government intervention	4	4	16	2	4	8	HOS PTS + Cllr Keith Chopping
6.7b	IMF, Aldermaston	Legal / management process failure	Government intervention	3	2	6	2	2	4	HOS PTS + Cllr Keith Chopping
6.7c	AWE Redevelopment	Failure in Planning process	Public order Government intervention	4	3	12	4	2	8	HOS PTS + Cllr Keith Chopping

No	Risk	Cause / Trigger	Consequences	Gross Rating			Net Rating			Owner
				Likely hood	Impact	Score	Likely hood	Impact	Score	
7	Failure to Deliver Partnerships									
7.1	Service Delivery Strategic Partners	Risks associated with the failure of partnerships Health reorganisation	Partnership failure Progress limited Service delivery	3	3	9	2	2	4	CD CC&H + Cllr Joe Mooney
7.2	Under achievement of PSA (1)	Poor Management Unachievable targets	Reduced reward Reduced outcomes in local community Reputation Failure to meet targets Potential Financial Implications	3	3	9	2	3	6	Head of Pol & Perf + Cllr Anthony Stansfeld
7.3	Underachievement of Local Strategic Partnership (LSP) LAA / PSA 2	Poor Management Unachievable targets	Reduced reward Reduced outcomes in local community Reputation Failure to meet targets Potential Financial Implications	3	3	9	2	2	4	CD CC&H + Cllr Joe Mooney + Cllr Graham Jones
7.4	Under achievement of Safer Communities Partnership	Poor Management Unachievable targets	Reduced reward Reduced outcomes in local community Reputation Failure to meet targets Potential Financial Implications	3	3	9	2	2	4	CE + Cllr Geoff Findlay / Cllr Emma Webster
7.5	Under achievement of Children's Trust	Poor Management Unachievable targets	Reduced reward Reduced outcomes in local community Reputation Failure to meet targets Potential Financial Implications	3	3	9	2	2	4	CD CC&H + Cllr Graham Pask
7.6	Under achievement of Health & Well being Partnership	Poor Management Unachievable targets	Reduced reward Reduced outcomes in local community Reputation Failure to meet targets Potential Financial Implications	3	3	9	2	2	4	CD CC&H + Cllr Joe Mooney
	Managed out of Business									
7.1	Arney Partnership (CB key Risk)	Failure / Financial or Business strategy	Service delivery Reputation Potential Default							
2.2	Planning Service (CB Key Risk)	Government Intervention in the Planning Department	Loss of democratic control Loss of budgetary control							

Strategic Risk Action Plan Red Risks

Owner	Corporate Board
Date	May-06

Risk No	Area of Concern / Risk Scenario	Existing Controls	CB Key Risks		Required Controls or Action	Responsibility of	Budget Constraint	Target Date
			Gross Risk Score	Net Risk Score				
1.1	Economic Increased unemployment & Benefit Claims	Economic Development Strategy Community Strategy Social Inclusion	9	9	None Possible	Nick Carter	None	Not Applicable
1.5	Environmental Major disaster Contamination Severe weather Outbreaks of disease Flooding	Major Incident Plan	12	9	Regular review / Intelligence and testing	Gary Lugg	None	On-Going
1.6	Flu Pandemic	Immunisation BCP	12	12	Regular consultation WBC Flu Group Various multi agency groups	Margaret Goldie	None	On - Going
6.5	Major Projects Waste PFI	Effective project Plan Regular Monitoring Preferred bidder negotiations	16	12	Sites and Planning Ensure affordability	Bill Jennison		On - Going
6.7a	Kennet Valley Project	Consultation / robust planning process	16	8	Tight monitoring and supervision	Tim Slaney		
6.7c	AWIE Redevelopment	Consultation / robust planning process	12	8	Tight monitoring and supervision	Tim Slaney		