

BROMSGROVE DISTRICT COUNCIL

CABINET

TUESDAY, 10TH JULY, 2007 AT 6.00 PM

COMMITTEE ROOM, THE COUNCIL HOUSE, BURCOT LANE, BROMSGROVE

AGENDA

MEMBERS: Councillors R. Hollingworth (Executive Leader),

Mrs. J. M. L. A. Griffiths (Deputy Executive Leader),

Dr. D. W. P. Booth JP, G. N. Denaro, Mrs. J. Dyer M.B.E., Mrs. M. A. Sherrey JP, R. D. Smith, M. J. A. Webb and

P. J. Whittaker

- 1. Apologies
- 2. Declarations of Interest
- 3. Minutes (Pages 1 2)
- 4. Scrutiny Steering Board (Pages 3 4)
- 5. Performance Management Board (Pages 5 6)
- 6. Audit Board (Pages 7 10)
- 7. Affordable Housing under the Homebuy Scheme (Pages 11 16)
- 8. Amendments to the Car Parking Order (Pages 17 42)
- 9. Data Quality Strategy (Pages 43 74)
- 10. Comprehensive Performance Assessment and Improvement Plan 2007/2008 (Pages 75 170)
- 11. Health and Safety at Work Revision of Lone Working Policy and Risk Assessment Policy and Procedures (Pages 171 212)
- 12. Capital Programme Increase Oakalls Play Facility (Pages 213 216)

- 13. Town Centre Regeneration (Pages 217 222)
- 14. Public Questions Procedure
- 15. Local Government Act 1972

"RESOLVED: that under Section 100A(4) of the Local Government Act 1972, the public be excluded from the Meeting during the consideration of the following item(s) of business on the grounds that it/they involve(s) the likely disclosure of "Exempt Information" as defined in Part I of Schedule 12A to the Act, the relevant paragraph of that part, in each case, being as set out below:-

Item No.	Paragraph(s)	
16	3	
17	1	"

- 16. Capital Programme Increase Dolphin Centre Catering Contract (Pages 223 226)
- 17. Senior Management Restructure (Pages 227 256)

K. DICKS
Chief Executive

The Council House Burcot Lane BROMSGROVE Worcestershire B60 1AA

17th July 2007

BROMSGROVE DISTRICT COUNCIL

MEETING OF THE CABINET

WEDNESDAY, 27TH JUNE, 2007

PRESENT: Councillors R. Hollingworth (Executive Leader), Mrs. J. M. L. A. Griffiths

(Deputy Executive Leader), Dr. D. W. P. Booth JP, G. N. Denaro,

Mrs. J. Dyer M.B.E., M. J. A. Webb and P. J. Whittaker

Observer: Councillor J. T. Duddy

Officers: Mr. K. Dicks, Mr. P. Street, Mr. H. Bennett, Mr. M. Bell, Mrs. C. Felton, Mr.

J. Godwin, Mr. D. Hammond, Ms. J. Pickering, Ms. J. Pitman, Ms. D.

Poole and Ms. R. Cole.

14/07 **APOLOGIES**

An apology for absence was received from Councillor Mrs M. A. Sherrey J.P.

15/07 **MINUTES**

The Minutes of the Cabinet held on 13th June 2007 were submitted.

RESOLVED: that the Minutes of the Meeting be approved and confirmed as a correct record.

16/07 <u>INTEGRATED PERFORMANCE AND FINANCIAL OUTTURN REPORT</u> 2006/07

The Cabinet considered a report which linked the Council's strategic objectives with service delivery and which gave details of the outturn results across a range of performance indicators which related to service delivery and corporate priorities. In addition the report demonstrated the interrelationship between the Council's financial position and operational performance. Following discussion it was

RECOMMENDED:

- (a) that the considerable improvement in the Council's performance be noted, in particular, that 38% of the Council's indicators are now above the local authority average compared to 21% in 2005/06.
- (b) that the net revenue outturn position of £11.092 million against the Budget of £11.564 million giving an underspend of £472,000 be noted.
- (c) that the list of revenue items to be carried forward be approved.

<u>Cabinet</u> <u>Wednesday, 27th June, 2007</u>

- (d) that the use of General Fund Revenue Balances and earmarked reserves be approved .
- (e) that the capital underspend of £2.597 million against the total Profiled Capital Budget be noted together with the progress made on capital schemes.
- (f) that the additional Capital budget carry forwards totalling £345,000 be approved.
- (g) that the financing of capital expenditure totalling £4.077 million for the year 2006/07 be noted.

17/07 ANNUAL REPORT 2006-07 PARTS 1 TO 4

The Cabinet considered a report covering the Council's Annual Report for 2006/07 together with the required Statement of Internal Control. In addition the report gave details of changes in accounting practice for the 2006/07 accounts. Members expressed their appreciation of the work undertaken by staff together with the improvements made in producing the required accounts and reports in a timely manner. Following discussion it was

RECOMMENDED:

- (a) that the information contained in Parts 2, 3 and 4 of the Annual Report be noted together with the intention that Part 1 in "Together Bromsgrove" be based on the approved information contained in Parts 2, 3 and 4.
- (b) that Part 2, the unaudited Annual Report Performance, be approved in accordance with the Local Government Act 1999 (Best Value).
- (c) that Part 3, the unaudited Statement of Accounts for the year ended 31st March 2007, be approved in accordance with the Accounts and Audit Regulations 2003 (amended 2006).
- (d) that the Statement of Internal Control be approved.

The meeting closed at 5.35 pm

Chairman

BROMSGROVE DISTRICT COUNCIL

MEETING OF THE SCRUTINY STEERING BOARD

TUESDAY, 12TH JUNE 2007

PRESENT: Councillors Mrs. M. Bunker, B. Lewis F.CMI, P. M. McDonald, D. L. Pardoe, R. D. Smith and C. B. Taylor

Observers: Councillors Mrs. R. L. Dent, Mrs. J. Dyer M.B.E. and Mrs. M. A. Sherrey

Officers: K. Dicks, P. Street, Mrs. C. Felton, Mrs. S. Sellers and A. Jessop.

1/07 **ELECTION OF CHAIRMAN AND VICE-CHAIRMAN**

That Councillors P.M. McDonald and J.T. Duddy be appointed Chairman and Vice-Chairman of the Board respectively for the municipal year.

2/07 TO RECEIVE APOLOGIES FOR ABSENCE

An apology for absence was received from Councillor J.T. Duddy.

3/07 TO RECEIVE THE MINUTES OF THE MEETING OF THE SCRUTINY STEERING BOARD HELD ON 3RD APRIL 2007

The Minutes of the Meeting of the Scrutiny Steering Board held on the 3rd April 2007 were submitted.

RESOLVED: that the Minutes be approved and confirmed as a correct record.

4/07 CABINET DECISIONS ON SCRUTINY REPORTS

A Report summarising the decisions made by the Cabinet in relation to the reports submitted by the Flytipping, Car Parking and Watercourses Task Groups, was submitted. Members were advised that each one of these Task Groups was now disbanded, and that their findings were due to be reviewed in April 2008.

RESOLVED: that the contents of the Report be noted.

5/07 OVERVIEW AND SCRUTINY TRAINING

A report setting out a general overview of the training planned for Members in relation to Overview and Scrutiny was submitted.

RESOLVED: that the contents of the Report be noted.

6/07 **WORK PROGRAMME**

Consideration was given to the future work of the Scrutiny Steering Board and Scrutiny Task Group review dates. Whereupon it was

RESOLVED:

- (a) that Task Groups be established to consider the following three topics, i.e.
- (i) Air Quality;
- (ii) Public Transport (Buses) throughout the District; and
- (iii) Refuse and Recycling Service (who's terms of reference should embrace the wording of a previous joint proposal considered at a previous meeting of the Board, and which was set out in paragraph 3.6 of the Report);
- (b) that the Chairmen of the Task Groups referred to in (a) above be Councillors P.M. McDonald, B. Lewis F.CMI and C.B. Taylor respectively;
- (c) that, insofar as possible future issues for scrutiny were concerned, a copy of the Scrutiny Proposal Form, as set out at Appendix A to the report, be circulated to all Members;
- (d) that the previous process whereby, upon the receipt of a scrutiny proposal, a meeting was arranged between the proposer, the Chairman of the Board, the Chief Executive and the Corporate Director (Services) in order to discuss its possible inclusion onto an agenda, be discontinued;
- (e) that, in future, rather than submitting as an Information item for this Board, reports from this Council's representative on Worcester County Council's Health Overview and Scrutiny be distributed to all Members of the Council to ensure that they are kept up to date with all current County Health issues;
- (f) that the Task Group review dates as set out in Paragraph 3.11 of the report be noted; and
- (g) that the Work Programme, together with any suggestions for Scrutiny received from Heads of Service, be examined in more detail at the next meeting of the Board.

7/07 ITEMS TO BE CONSIDERED AT THE NEXT MEETING OF THE CABINET

Consideration was given to the items on the agenda for the meeting of the Cabinet which was scheduled to be held on 13th June 2007. No comments were made and, accordingly, it was

RESOLVED: that these matters be noted.

8/07 **CABINET'S FORWARD PLAN**

The Forward Plan of the Cabinet, setting out a list of key decisions which they expect to have to make during the period June - September 2007, was submitted.

RESOLVED: that the Forward Plan be noted.

The meeting closed at 7.00 pm

Chairman

BROMSGROVE DISTRICT COUNCIL

MEETING OF THE PERFORMANCE MANAGEMENT BOARD

TUESDAY, 19TH JUNE, 2007

PRESENT: Councillor C. B. Taylor (Vice-Chairman), Councillor Mrs. M. Bunker,

Councillor S. R. Colella, Councillor Mrs. A. E. Doyle, Councillor Mrs. C. M.

McDonald and Councillor R. D. Smith

Observers: Councillor G.N. Denaro

Officers: Mr. H. Bennett, Mrs. J. Pickering, Ms J. Pitman, Ms. D. Poole

Ms. A.M. Darroch and Mr. A. Jessop.

9/07 **APOLOGIES**

Apologies for absence were received from the Chairman (Councillor J.T. Duddy), Mrs. J. Dyer M.B.E. (Observer) and Mr. K. Dicks (Chief Executive).

10/07 **MINUTES**

The Minutes of the Meeting of the Board held on the 22nd May 2007, were submitted. Referring to Minute No. 5/07 (Training), the Assistant Chief Executive reported that training sessions for members of the Board would take place on the 16th and 23rd July 2007, at 7.00 p.m., with a further date to be arranged in August, if necessary - this was noted. Members were also advised (i) that the Annual Audit letter, which was referred to at the last meeting, had not been brought to this meeting as it had already been circulated to Members with a previous Cabinet agenda, and (ii) that the Improvement Plan had now effectively been "delivered" and that a new Plan was to be presented to the Cabinet meeting in July. Whereupon it was

RESOLVED: that the Minutes be confirmed and signed as a correct record.

11/07 PERFORMANCE REPORT - APRIL 2007 (PERIOD 1, 2007-08)

A report on the Council's performance as at 30th April 2007 (Period 1) was submitted. A general discussion took place on the Report, with questions raised on the Street Scene and Waste Management Service, the Customer Service Centre, the processing of Benefit Claims and the late payment of Invoices. Whereupon it was

RESOLVED: that the Board notes -

- (1) that 63% of indicators are improving or stable as at 30th April 2007;
- (2) that 66% of indicators are achieving their targets at 30th April 2007;
- (3) and celebrates the successes as outlined in Section 4.3 of the report;
- (4) the potential areas for concern and corrective action taken, as set out in Section 4.4, together with the actions being taken to improve performance generally, as set out in Section 4.5; and

Performance Management Board Tuesday, 19th June, 2007

(5) that the report submitted to the Corporate Management Team meeting held earlier today by the Customer Services Manager, which incorporated a number of statistics relating to the Centre, be forwarded to the members of the Board for information.

RECOMMENDED: that Cabinet be requested, along with the appropriate Portfolio Holder, to work on the introduction of an Action Plan to address the problem issues surrounding the Customer Service Centre, i.e., capacity, service failure and customer expectation.

12/07 **GRAPHIC DESIGNER/ BRANDING AND STYLE GUIDELINES**

In accordance with the wishes of the Board as expressed in Minute No. 4/07(d) of the last meeting, a report on the possible funding of a Graphic Designer post at the Council, together with a copy of the Council's Branding and Style Guidelines, were submitted. In this regard, Ms. Anne Marie Darroch, the Council's Communications and Customer First Manager was introduced to Members to assist with any discussion or debate.

RESOLVED: that the Report be noted.

13/07 <u>SELF-ASSESSMENT OF CURRENT POSITION AGAINST DATA QUALITY</u> KEY LINES OF ENQUIRY

Further to Minute No. 3/07(a) of the last meeting (Data Quality Strategy), a report setting out a self assessment of the current position against the Data Quality Key Lines of Enquiry was submitted.

RESOLVED: that the Report be noted.

14/07 IMPROVEMENT PLAN EXCEPTION REPORT UPDATE - APRIL 2007

Consideration was given to the report on the Improvement Plan for April 2007, together with the corrective action being taken, as set out in the appendix to the report.

RESOLVED:

- (1) that the revisions to the Improvement Plan Exception Report, together with the corrective action being taken, be noted; and
- (2) that it be noted that, from the 61 actions highlighted for April, 64% of the Plan was on target (green), 1.6% was one month behind (amber), and 4.9% was over one month behind (red) with 29.5% of actions having been rescheduled or suspended, with approval.

The meeting closed at 8.15 p.m.

Chairman

BROMSGROVE DISTRICT COUNCIL

MEETING OF THE AUDIT BOARD

MONDAY, 25TH JUNE, 2007 AT 6.00 P.M.

PRESENT: Councillors S. R. Colella, D. McGrath, C. R. Scurrell, Mrs. C. J. Spencer,

E. C. Tibby and C. J. K. Wilson

Observer: Councillor G. N. Denaro

Officers: Mr. K. Dicks, Miss. J. Pickering, Mr. N. Shovell, Ms. K. Firth

and Ms. D. Parker-Jones

1/07 **ELECTION OF CHAIRMAN AND VICE-CHAIRMAN**

RESOLVED: that Councillors C. J. K. Wilson and S. R. Colella be appointed Chairman and Vice-Chairman of the Board respectively for the ensuing municipal year.

2/07 **APOLOGIES**

An apology for absence was received from Councillor Mrs. H. J. Jones.

3/07 **DECLARATIONS OF INTEREST**

No interests were declared.

4/07 MINUTES

The Minutes of the meeting of the Audit Board held on 19th February 2007 were submitted.

RESOLVED: that the Minutes be approved as a correct record and signed by the Chairman.

5/07 INTERNAL AUDIT PROCESS AND AUDIT BOARD GUIDANCE

The Audit Services Manager gave members a brief summary of the Council's internal audit process and explained some of the requirements contained within the CIPFA "Audit Committees: Practical Guidance for Local Authorities" publication.

During the discussion reference was made to the frequency of the meetings of the Board. Members were informed that the Board was required to meet at least four times per year but that additional meetings could be arranged should the need arise.

Audit Board Monday, 25th June, 2007

RESOLVED:

- (a) that the internal audit process be noted; and
- (b) that the guidance detailed in the CIPFA "Audit Committees: Practical Guidance for Local Authorities" publication be noted.

6/07 **USE OF RESOURCES**

The Head of Financial Services reported that the Use of Resources report had not been received from KPMG LLP, the Council's External Auditors, and stated that the matter would therefore be referred to a future meeting of the Board.

7/07 STATEMENT OF ACCOUNTS AND STATEMENT ON INTERNAL CONTROL

Consideration was given to the unaudited Statement of Accounts for the year ended 31st March 2007, which incorporated the Statement of Internal Control.

Members queried how the Audit Board could see that the effectiveness of the system of internal control was both maintained and duly followed up on, as appropriate. The Audit Services Manager stated that any identified weaknesses were given a priority 1, 2 or 3 rating (priority 1 being the highest level), with each priority then being tracked on a quarterly basis. Managers were required to provide progress updates on priority areas and any outstanding priority 1 issues were automatically referred to the Audit Board, with senior management investigating such issues prior to their referral.

RECOMMENDED: that the Executive Cabinet be requested to recommend to full Council the approval of the unaudited Statement of Accounts, which incorporated the Statement of Internal Control, for the year ended 31st March 2007, in accordance with the Accounts and Audit Regulations 2003 amended 2006

8/07 ANNUAL AUDIT AND INSPECTION LETTER

A copy of the Audit Commission and Council's External Auditor's Annual Audit and Inspection Letter was considered. It was noted that the document was somewhat less detailed than usual due to the publication of the Council's Comprehensive Performance Assessment.

RESOLVED: that the Annual Audit and Inspection Letter be noted.

9/07 <u>CIPFA AUDIT CODE SELF-ASSESSMENT AND 2007-2010 INTERNAL</u> AUDIT STRATEGY

The Board considered a report which gave a summary of the Internal Audit self assessment against the standards detailed in the CIPFA Code of Practice for Internal Audit in Local Government, and which also presented the 2007-2010 Internal Audit Strategy.

Audit Board Monday, 25th June, 2007

RESOLVED:

- (a) that the Internal Audit self assessment be noted; and
- (b) that the 2007-2010 Internal Audit Strategy be noted and approved.

10/07 **2006/2007 INTERNAL AUDIT OPINION**

Members considered the 2006/2007 Internal Audit Opinion on the Council's internal control environment.

RESOLVED: that the Internal Audit Opinion report on the Council's internal control environment for 2006/2007 be approved.

11/07 LOCAL CODE OF CORPORATE GOVERNANCE AND 2006/2007 STATEMENT OF ASSURANCE

Consideration was given to the updated Local Code of Corporate Governance and the Statement of Assurance for 2006/2007.

<u>RESOLVED</u>: that the updated Local Code of Corporate Governance and the Statement of Assurance for 2006/2007 be noted and approved.

12/07 **MEMBER TRAINING**

In order to assist them in carrying out their functions on the Board, members requested that they be given specific training on audit matters and that there be liaison with other councils, whose Audit Boards were deemed to be operating well, to see whether there were any lessons to be learned in this regard.

Members also agreed that it would be useful for them to receive a copy of the programme of annual audits.

RESOLVED:

- (a) that audit training be arranged for the members of the Audit Board; and
- (b) that officers forward a copy of the programme of annual audits to the members of the Board.

The meeting closed at 7.10 pm

Chairman

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BROMSGROVE DISTRICT COUNCIL

EXECUTIVE CABINET

DATE 4th July 2007

AFFORDABLE HOUSING UNDER THE HOMEBUY SCHEME

Responsible Portfolio Holder	Cllr P. Whittaker
Responsible Head of Service	Dave Hammond

1. **SUMMARY**

- 1.1 The report outlines the Government's Homebuy Scheme that is operated in Herefordshire and Worcestershire by West Mercia Housing Group under which a grant subsidy in the form of an equity loan is given to allow first time buyers to purchase a home on the open market at 75% of its market value. A limited amount of Government grant is available to support the scheme over the period of 2006 2008.
- 1.2 An opportunity arises for the availability of the scheme to be extended when the government funding has been exhausted by the Council contributing grant that would be match funded by the RSL operating the scheme.
- 1.3 The report offers the opportunity for the Council to approve the scheme in principle for funding from the Council's Strategic Housing Capital Programme in the absence of demand for funding for new build shared ownership schemes. If approved, the scheme would only be funded in the event of there being applicants wishing to take up the scheme after the government funding has been exhausted.

2. RECOMMENDATION

2.1 That the Bromsgrove Homebuy Scheme be approved as a scheme to receive local authority grant in the event of there being funding remaining available within the approved housing capital budgets and there being a demand from Bromsgrove applicants after government financial support to the scheme has been exhausted.

3. BACKGROUND

- 3.1 West Mercia Housing Group is the Government's appointed agency for the operation of the Homebuy Scheme in Herefordshire and Worcestershire.
- 3.2 The Homebuy Scheme allows first time buyers to access the private housing market by purchasing a dwelling at 75% of market value. Under the scheme, the Registered Social Landlord (RSL) operating the scheme provides the interest free 25% equity loan secured by a charge against the property. The owner benefiting under the scheme has to repay the 25% loan within a 10 year period based upon open market value at the time. The maximum purchase price for a dwelling to qualify under the scheme is £165,000.
- 3.3 Whilst the scheme will still not be affordable to many housing applicants it can provide a viable option for a number of people struggling to get onto the property ladder and whose future income prospects would allow them to repay the initial subsidy within 10 years or move on to alternative housing. Housing needs studies at both local and South Housing Market Area level indicate a significant demand for intermediate housing solutions of this nature.
- 3.4 Government funding has been allocated to West Mercia Housing Group to enable up to 135 completions across Herefordshire and Worcestershire over the two year period up to March 2008. The scheme has been suspended during part of the last financial year whilst the Government was introducing changes to the original scheme by bringing in additional private funding and introducing the 10 year pay back clause. Accordingly marketing has been delayed. However in Bromsgrove the scheme has to date, delivered 3 completions, 15 firm offers of assistance and has a waiting list of 24 applicants expressing an interest in the scheme.

4.0 <u>AN OPPORTUNITY TO EXTEND THE HOMEBUY SCHEME IN</u> BROMSGROVE

- 4.1 There is an opportunity to extend the scheme in Bromsgrove if there is continuing demand after the government funding has been exhausted. West Mercia Housing Group is prepared to match fund 12.5% of the grant subsidy required for each completion if the Council agrees to also fund 12.5% of the loan cost.
- 4.2 On a dwelling being purchased at the price ceiling (allowed under the scheme) of £165,000 the 25% subsidy would be £41,250. Under the proposed extension to the scheme, the RSL would fund £20,625 (12.5%) and BDC would fund £20,625 (12.5%). Under the 10 year payback clause, or in the event of the dwelling being sold, 12.5% of the market value at the

- time of payback or sale, would be repayable to the Council or ring fenced and recycled for further investment in the scheme.
- 4.3 For each completion administered by the RSL, the Council will be charged £1,000 administration fee.
- 4.4 The maximum grant subsidy per completion would therefore be £21,625.
- 4.5 Three neighbouring authorities within Herefordshire and Worcestershire have approved funding additional units through this scheme outside of the existing government funding.
- 4.6 For the reasons set out under 'financial implications' below it is recommended that the scheme be approved for introduction <u>only</u> when all government support has been exhausted and again <u>only</u> in the event of there being spare capacity within the approved strategic housing capital budget if not required to supplement new build schemes being worked up by our partner RSLs in readiness for the 2008 2011 Housing Corporation bidding round.

5.0 FINANCIAL IMPLICATIONS

- 5.1 As set out above at 4.2 to 4.4 the maximum cost to the Council per completion would be £21,625.
- 5.2 The grant funding would be re-cycleable at 25% of market value at the time of sale or repayment within 10 years.
- 5.3 There is competition for the Council's Strategic Housing Capital Programme budgets. For 2007/08, £740,000 of the £777,000 capital budget available for supporting <u>rented</u> housing schemes has been committed to the Hostel Remodelling programme. Accordingly for 2007/8 their only remains £37,000 for <u>rented</u> housing. In addition there is a budget of £182,000 approved to support <u>low cost</u> housing schemes (shared ownership and fixed equity schemes)
- 5.4 However, a number of new affordable housing schemes are currently being worked up in preparation for the Housing Corporation's next bidding round (2008 2011) and accordingly the funding remaining (as detailed at 5.3 above) may be required to help support bids through jointly commissioning new schemes. Accordingly it is recommended that at this stage the funding that remains available should not be utilised to support the extension of the Homebuy scheme until it is clear what competing demands there will be to supplement other new build schemes being worked up.

5.5 However, members are asked to approve this scheme for the application of any approved housing capital funding remaining unallocated to new build schemes later in the financial year.

6. <u>LEGAL IMPLICATIONS</u>

6.1 Implementation of the scheme would require a legal agreement to be drawn up between the Council and West Mercia Housing Group.

7. CORPORATE OBJECTIVES

- 7.1 The scheme addresses Objectives 1, 2 and 3 by supplementing the availability of affordable housing, improving the availability and access to private sector housing and indirectly assisting in addressing homelessness by taking the pressure off the demand for social housing.
- 7.2 By implementing this scheme, the Council will be making better use of the housing market as a whole. The district has witnessed an increase in the market value of properties in recent years leading to an unbalanced housing market where only the more affluent can afford to buy. The proposed scheme would go some way to realigning these inconsistencies by making private property more affordable to lower income households.

8.0 CUSTOMER IMPLICATIONS

8.1 Improved customer service by enabling a wider range of housing options to be made available and to potentially be able to assist applicants who would otherwise be unable to benefit from the government subsidised Homebuy scheme.

9. OTHER IMPLICATIONS

Procurement Issues

West Mercia Housing Group is the Government appointed agent for operating the National Homebuy Scheme which the proposed scheme would be an extension of.

Personnel Implications

None as scheme will be administered by West Mercia Housing Group.

Governance/Performance Management

N/A

Community Safety including Section 17 of Crime and Disorder Act

1998
N/A
Equalities and Diversity
West Mercia Housing Group operates an Equalities and Diversity
Policy.

10. OTHERS CONSULTED ON THE REPORT

Portfolio Holder	Yes
Acting Chief Executive	Yes
Corporate Director (Services)	Yes
Assistant Chief Executive	Yes
Head of Service	Yes
Head of Financial Services	Yes
Head of Legal & Democratic Services	Yes
Head of Organisational Development & HR	N/A
Corporate Procurement Team	N/A

11. BACKGROUND PAPERS

None

CONTACT OFFICER

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AGENDA ITEM NO 8

BROMSGROVE DISTRICT COUNCIL

EXECUTIVE CABINET

10th JULY 2007

AMENDMENTS TO CAR PARKING ORDER

Responsible Portfolio Holder	Margaret Sherrey
Responsible Head of Service	Mike Bell

1. SUMMARY

1.1 This report summarises changes to the car parking order on October 1st 2007.

2. RECOMMENDATIONS

- 2.1 That the attached Car Parking Order is implemented.
- 2.2 That the parking charges outlined in "Proposed charges from 01/10/2007" in paragraph 4.1 are implemented.
- 2.3 That annual and quarterly permits are issued in line with Schedule 4 of the proposed Order.
- 2.4 That Aston Road (Part) is incorporated within the Car Parking Order and managed as a non-paying car park.
- 2.5 That parking offenders who wish to appeal are given an additional 14 days in which to pay the reduced amount following the response to the appeal.
- 2.6 That the above recommendations take effect from 1st October 2007.
- 2.7 That officers report back to Members in 2008 with a full review of the parking operation.

3. BACKGROUND

- 3.1 At the meeting of the executive cabinet on 4th April 2007 the Car Parking Scrutiny Report was considered. As a result of this report it was resolved;
 - (b) that Blue Badge holders be allowed an additional hour of parking over and above the time for which they have paid.
 - (e) that officers be requested to look at ways of encouraging the most efficient and flexible use of the car park facilities.
 - (f) that if possible, the ticket machines be adjusted so that customers receive the full time for which they have paid and that the use of mobile telephones to allow "remote payment" be considered further at a later stage.

- (g) that officers be requested to review the system of issuing Concessionary Permits in view of the predicted growth in the elderly population of the District.
- 3.2 Furthermore the scale of charges for car parking was decided on 21st February 2007 and is shown in paragraph 4.1, in the column indicated "Scale of charges..." However, these charges were calculated without taking into account the continued high level of ticket sales. In light of this fact, and the need to keep prices low to support the economic development of the town centre, Officers would recommend the adoption of the charges titled "Proposed charges from 01/10/2007" in paragraph 4.1.
- 3.3 The Order will also require amending to include the provision of a cashless payment system. Officers are looking into this in some detail and will report back to Members in a wider ranging report in 2008.
- 3.4 Officers were tasked with looking at ways of encouraging the most efficient and flexible use of the car park facilities. To that end officers would recommend that the charges for annual and quarterly permits are amended to reflect the true cost of parking in individual car parks. This will allow for better marketing of underused car parks. Amendments to the proposed charges are presented in the finance section of this report.
- 3.5 Officers would also request that part of Aston Road, which is currently under the jurisdiction of the Council, is adopted under the Order as a free car park. This is in order to prevent parking on the pavement which causes problems with visibility when entering and exiting businesses in this area.
- 3.6 Officers would also take the opportunity whilst amending the Order to add that parking offenders who wish to appeal may are given an additional 14 days in which to pay the reduced amount following the response to the appeal. This is in line with the standards used by parking operators who have adopted Decriminalised Parking Enforcement, and allows greater clarity for the customer.
- 3.7 Following the limited usage of Churchfields Multi Storey car park in the evening, the revised Order also includes provision to close this car park at 19.30 from Monday to Saturday inclusive.
- 3.8 There are a number of issues regarding parking that Officers believe will require addressing soon in order to prevent problems in the future. In order to address these problems, a further report reviewing all the factors around the parking operation will be presented to Members in 2008.

4. FINANCIAL IMPLICATIONS

4.1 A copy of the tariffs agreed by Cabinet is shown in the following table. Officers believe that the implementation of the charges in column 2 will still enable budgeted revenue to be reached.

		Scale of charges agreed at Cabinet 21/02/2007	Proposed charges from 01/10/2007	Current Fee
Bromsgrove Station	All day	£2.50	£2.50	£2.10
Churchfields Multi	1 Hour	£0.70	£0.60	£0.60
Stourbridge Road	2 Hours	£1.40	£1.20	£1.20
	All day	£2.00	£2.00	£2.10
Dolphin Centre	1 Hour	£0.70	£0.60	£0.60
School Drive	2 Hours	£1.40	£1.20	£1.20
Hanover Street	3 Hours	£2.10	£1.80	N/A
Rec Road North	All day	£3.00	£3.00	£2.10
New Road	30 minutes	£0.40	£0.30	£0.30
Parkside	1 Hour	£0.70	£0.60	£0.60
Rec Road South	2 Hours	£1.40	£1.20	£1.20
	3 Hours	£2.10	£1.80	N/A
	4 Hours	£2.80	£2.40	N/A
	5 Hours	£3.50	£3.00	N/A
	-			
Windsor Street	30 minutes	£0.40	£0.30	£0.30
	1 Hour	£0.70	£0.60	£0.60
	2 Hours	£1.40	£1.20	£1.20

4.2 In order to maximise the use of Churchfields Multi Storey car park, officers would recommend the setting of charges in line with the following chart;

	Suggested Current Fee Fee (2007/2008)		Fee	
Bromsgrove Station	£	300	£	300
Sports Centre	£	300	£	300
Hanover Street	£	300	£	300
Rec Road North	£	300	£	300
School Drive	£	300	£	300
Stourbridge Road	£	200	£	200
Churchfields Multi Storey	£	300	£	200

5. LEGAL IMPLICATIONS

5.1 The making and amendment of car parks orders is regulated the Road Traffic Regulations Act 1984 and the Local Authorities Traffic Orders (Procedure) (England and Wales) Regulations 1996.

6. CORPORATE OBJECTIVES

6.1 The town centre is a priority for the Council, and the setting of parking charges has a direct influence on the development of the local economy. The lower the parking charges, and the more attractive the parking facilities are, the more customers are likely to use them.

7. RISK MANAGEMENT

7.1 There is a risk that the proposed tariff will mean that the revenue target is not achieved. However, in light of the current revenue figures this is unlikely, and the revenue figures are reviewed weekly to highlight any problems.

8. CUSTOMER IMPLICATIONS

8.1 The majority of customers will see no change in the amount charged, however there will be more choice available as a result of these changes.

9. OTHER IMPLICATIONS

Procurement Issues None
Personnel Implications
None
Governance/Performance Management
None
Community Safety including Section 17 of Crime and Disorder Act
1998 Non-a
None
Policy
None
Environmental
None
Equalities and Diversity
None

10. OTHERS CONSULTED ON THE REPORT

Portfolio Holder	Yes
Chief Executive	Yes
Corporate Director (Services)	Yes
Assistant Chief Executive	Yes
Head of Service	Yes
Head of Financial Services	Yes
Head of Legal & Democratic Services	Yes
Head of Organisational Development & HR	Yes
Corporate Procurement Team	Not Applicable

11. APPENDICES

Appendix A: Proposed Car Parking Order

12. BACKGROUND PAPERS

None.

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DISTRICT COUNCIL OF BROMSGROVE THE ROAD TRAFFIC REGULATION ACT 1984

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007

DISTRICT COUNCIL OF BROMSGROVE

ROAD TRAFFIC REGULATION ACT 1984

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007

The Council of the District of Bromsgrove (hereinafter referred to as "the Council") in exercise of their powers under Sections 35(1) and (3) of the Road Traffic Regulation Act 1984 and of Part IV of Schedule 9 to the Act of 1984 and of all other powers enabling them in that behalf and with the consent of the County Council of Worcestershire as required by Section 39(3) of the Act of 1984 and after consultation with the Chief Officer of Police in accordance with Part III of Schedule 9 of the Act of 1984, and the Freight Transport Association and the Road Haulage Association in accordance with Regulation 6 of the Local Authorities Traffic Orders (Procedure) (England and Wales) Regulations 1996, hereby make the following Order:-

Part 1 : General

- The Order shall come into operation on Wednesday 1st October 2007 and may be cited as the District Council of Bromsgrove (Off-Street Parking Places) Order 2007.
- 2. The District Council of Bromsgrove (Bromsgrove) (Off-Street Parking Places) Consolidation Order 2006 made under Section 35 (1) and (3) of the Road Traffic Regulation Act of 1984 is hereby revoked.
- 3. In this Order, except where the context otherwise requires, the following expressions have the following meanings:

Expression	Meaning
"driver"	Means, in relation to the vehicle being left in a parking
	place, the person driving the vehicle at the time it was
	left in the parking place.
"the Act of 1984"	Means the Road Traffic Regulation Act 1984.
"owner"	Has the same meaning as in the Act of 1984.
"parking place"	Means any area of land specified by name in Column 1
	of Schedule 1 of this order.
"parking bay"	Means any area of a parking place which is provided for
	the leaving of a vehicle and indicated by markings on
	the surface of this parking place.
"prescribed position"	Means in the case of a vehicle fitted with a front
	windscreen, the ticket is exhibited on the dashboard of
	the vehicle with the front clearly visible.
	In the case of a vehicle not fitted with a windscreen, the
	ticket is exhibited in a conspicuous position on the
	vehicle with the front clearly visible.
"disabled person's badge"	Means a badge issued by a local authority in
	accordance with the provisions of regulations made
	under section 21 of the Chronically Sick and Disabled
	Persons Act 1970 or a card issued by a member state of
	the European Union in compliance with 89/376/EC –
	Council recommendation of 4 th June 1998 on a parking
	card for people with disabilities.
"Order"	Means this Order, and any schedule included with this
	Order.

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"parking"	Means leaving a vehicle stationary whether the driver
	leaves the vehicle or not, but excluding such times as
	the vehicle is stationary in order to avoid a collision or
	by reason of circumstances beyond the driver's control.
"permit"	Means any or all of the types of permit which may be
	issued by the Council under any schedules to this order
	and shall be understood depending on the context.
"ticket machine"	Means a device or method, provided by the Council or
	its partners, on or near to the parking place, which
	issues parking tickets for payment, or records that
	payment has been made.
"in writing"	Includes transmission by facsimile or electronic mail,
	and any other means resulting in a permanent record.

Part 2: Use of Parking Places

- 4. Each parking place may be used subject to the following provisions of this Order on such days and during such hours as are specified in relation to that Parking Place in column 3 of Schedule 1.
- 5. Each parking place may be used subject to the following provisions of this Order where vehicles are of the following class;
 - a) Motor cars, motor cycles, and invalid carriages all as defined in Section 136 of the Act of 1984.
 - b) Motor vehicles not exceeding 1.5 tonnes unladen weight constructed or adapted solely for the purpose of carrying goods.
 - c) Any other class of vehicle as specified in column 2 of Schedule 1.
- 6. No person shall, except with the permission of the Council or authorised person operating on behalf of the Council, drive a vehicle onto a parking place except for the purpose of parking the vehicle in accordance with the provisions of this Order, or for the purpose of departing from that parking place.
- 7. Wherever parking bays are provided, vehicles shall be positioned wholly within the markings denoting the parking bay.
- 8. No vehicle shall be allowed to remain in a car park for longer than the maximum time permitted for that parking place in column 5 of Schedule 1.
- 9. No vehicle shall return to any parking place until after the expiry of the time specified in column 6 of Schedule 1.
- 10. The driver of a motor vehicle using a parking place shall stop the engine as soon as the vehicle is parked within a parking bay, and shall not start the engine except when about to change the position of the vehicle or depart from the parking place.
- 11. Except with the consent in writing of the Council, no person shall use a vehicle while it is in a parking place, in connection with the sale of any article to persons in or near the parking place, or in connection with the selling or offering for hire of their skill or services.
- 12. No person shall drive a vehicle in a parking place specified in paragraph 5 of this Order or additionally specified in column 2 of Schedule 1;
 - a) unless he or she is the holder of a licence authorising him or her to drive a motor vehicle of its class or description on a road, or

- b) unless he or she is the holder of a provisional driving licence and is accompanied in the vehicle by a person holding a licence of the type mentioned in (a) above
- c) unless the vehicle is licensed in accordance with the provisions of Section 1 of the Vehicle Excise And Registration Act 1994 and unless there is in relation to the use of the vehicle by the driver, such policy of insurance as complies with the requirements of Part VI of the Road Traffic Act 1988 or any re-enactment thereof
- d) at a speed exceeding 10 miles per hour
- 13. If in any case owing to the presence of a vehicle in a parking place an accident occurs whereby personal injury is caused to a person other than the driver of that vehicle or damage is caused to a vehicle other than that vehicle or to any other property whatsoever (including the parking place) the driver of the vehicle shall stop and if required so to do by any officer, agent or servant of the Council or any other person having reasonable grounds for so requiring give his or her name and address and also the name and address of the owner and the identification marks of the vehicle and his or her certificate of insurance.
- 14. Except as may be authorised in writing by the Council, no person shall use any part of the parking place or any vehicle left in the parking place:
 - a) for sleeping or camping purposes;
 - b) for eating or cooking purposes; or
 - c) for the purpose of servicing or washing any vehicle or part thereof other than is reasonably necessary to enable that vehicle to depart from the parking place.
- 15. No person shall use a parking place as means of passage proceeding from one road to another.
- 16. Where in a parking place signs are erected or surface markings are laid for the purpose of:
 - a) indicating the entrance to or exit from the parking place; or
 - b) indicating that a vehicle using the parking place shall proceed in a specified direction within the parking place,

no person shall drive or cause or permit to be driven any vehicle (i) so that it enters the parking place otherwise than by an entrance, or leaves the parking place otherwise than by an exit, so indicated, or (ii) in a direction other than that specified, as the case may be.

- 17. In a parking place no person shall:
 - a) erect or cause or permit to be erected any tent, booth, stand, building or other structure without the written consent of the Council; or
 - b) light or cause or permit to be lit any fire.
- 18. Where in a parking place signs are erected or surface markings are laid for the purpose of indicating that a particular parking bay is for the use of a disabled person's vehicle, no person shall cause a vehicle to be parked in such a parking bay unless the vehicle displays a disabled person's badge in accordance with the terms and conditions of issue.
- 19. Where in a parking place signs are erected or surface markings are laid for the purpose of indicating that a particular parking bay is only to be used for a minimum period of time, and the return of vehicles is indicated as being prohibited for a specific amount of time, no person shall cause a vehicle to be parked in such a parking bay for any longer than the time specified or permit the vehicle to return in less time than is specified.

- 20. Where in a parking place signs are erected or surface markings are laid for the purpose of indicating that a particular parking bay is only to be used by a taxi or private hire vehicle, no person shall cause a vehicle to be parked in such a parking bay unless that vehicle is a taxi or private hire vehicle.
- 21. Where in a parking place signs are erected or surface markings are laid for the purpose of indicating that a particular parking bay is only to be used by drivers who are visiting a particular premises, or using a particular service, no person shall cause a vehicle to be parked in such a parking bay unless that person is visiting that particular premises, or using that particular service.

Part 3 : Initial Charge For Use Of Parking Places

- 22. The following vehicles left in a parking place shall be exempt from the payment of any charge specified in column 4 in Part I of Schedule 1 to this Order;
 - a) vehicles displaying a permit (or having made the appropriate electronic payment for parking) issued and used in accordance with the terms and conditions thereof as specified in any Schedule, or any previous Schedule, of this Order;
 - b) vehicles owned and operated by the police, fire and ambulance services when attending an emergency in the vicinity of the parking place.
- 23. When a vehicle is left in the parking place during the charging hours as specified in column 3 of Schedule 1, the driver of such vehicle shall immediately become liable to pay the charge specified in column 4 of Schedule 1. Vehicles displaying a disabled person's badge in accordance with the terms and conditions of use shall be permitted to park for an additional hour beyond the time displayed on any ticket purchased.
- 24. The charge shall be paid by:
 - a) the electronic transfer of the appropriate fee (including any advertised handling or additional processing fees) to the Council or its partner by the means advertised in that parking place;

or:

- b) the insertion of an appropriate fee:
 - 1. in the case of the pay and display car parking places on entry to the car park
 - 2. in the case of pay on leaving parking places on leaving the car park

into the apparatus or device provided being an apparatus or device approved in accordance with Section 35(3) of the Act and the provisions of Section 47(5) of the Act shall apply in respect of such apparatus.

- 25. Any ticket issued at a pay and display parking place shall in the case of a vehicle fitted with a front windscreen be exhibited on the dashboard of that vehicle with the details of the parking charge facing forwards in such a way as to be clearly visible for checking purposes, and in the case of a vehicle not fitted with a windscreen shall be exhibited in a conspicuous position on the vehicle in respect of which it was issued. A vehicle shall not be left in a parking place if it displays an out of date or expired ticket.
- 26. No vehicle shall display a parking ticket that has previously been displayed on another vehicle.

Part 4 : Excess Charge For Use Of Parking Places

27. Where a vehicle is:

- a) left in a pay and display parking place without the display of a valid ticket, or there is no electronic record of any payment having been made for the parking of that vehicle at that time, or:
- b) left in a pay and display parking place for a period longer than that for which payment has been made in accordance with the foregoing provisions or for longer than the maximum period allowed for that parking place as specified in column 5 of Schedule 1, or:
- c) parked in a space reserved for another class of vehicle, or:
- d) is used in contravention of any of the articles listed in part 2 of this Order,

an additional charge (hereinafter known as the "excess charge") as specified in Schedule 2 shall be payable.

- 28. In the case of a vehicle in respect of which an excess charge may have been incurred it shall be the duty of the officer to inform the driver that he has incurred an excess charge by preparing a notice, which shall include the following particulars;
 - a) the registration mark of the vehicle, or where the vehicle is being used under a trade licence, the number of the trade plate carried by the vehicle;
 - b) the offence for which the excess charge has been issued which may be one or more of 27a, 27b, 27c, or 27d;
 - c) a statement that the excess charge is required to be paid;
 - d) the manner in which and the time within which the excess charge should be paid; and,
 - e) a statement that it is an offence under Section 35A(1) of the Act for the driver of a vehicle who has left the vehicle in a parking place to fail to pay the excess charge.
- 29. The notice shall be;
 - a) attached to the vehicle in a conspicuous position, or;
 - b) given to the person presenting himself as the driver of the vehicle.
- 30. If payment of the excess charge is made so as to be received on or before the fourteenth day following the day it was incurred the charge shall be abated to half the standard excess charge and payment of such abated sum shall fully discharge liability for paying the excess charge. In the event that the Council receives a formal representation from the driver of the vehicle committing the excess charge offence within fourteen days after the date of issue, the Council has the right to extend the period during which the abated sum can be received.
- 31. Where a notice has been affixed to a vehicle in accordance with the provisions of paragraph 29 of this Order, no person other than the driver shall remove the notice from the vehicle unless authorised to do so by the driver.
- 32. Where:
 - a) An excess charge has been incurred under the provisions of paragraph 27 of this Order, and
 - b) notice of incurring the excess charge has been given or affixed as provided in paragraphs 28 and 29 of this Order, and
 - c) the excess charge has not been duly paid in accordance with paragraph 28d of this Order

and where in the following provisions of this Order reference is made to the "excess charge offence" this shall mean an offence under Section 35A (1) of the Act of 1984 in not complying with the provisions of this Order by failing to pay the excess charge.

- 33. After a period of at least 28 days after the date on which the excess charge notice was issued, a notice shall be sent to the registered owner of the vehicle and shall give particulars of the excess charge and shall provide that, unless the excess charge is paid before the expiry of the period specified therein, the person on whom the notice is served:
 - a) is required, before the expiry of that period, to furnish to the Council by or on behalf of whom the notice was served a statement of ownership (as defined in Part 1 of Schedule 8 of the Act of 1984).
 - b) is invited, before the expiry of that period, to furnish to the Council a statement of facts (as defined in Part II of Schedule 8 of the Act of 1984)
- 34. If, in any case where:
 - a) a notice under paragraph 33 of this Order has been served on any person, and
 - b) the excess charge specified in the notice is not paid within the period specified therein

the person so served fails without reasonable excuse to comply with the notice by furnishing a statement of ownership he shall be liable on summary conviction to a fine (or in the case of a second or subsequent conviction to a fine not exceeding) those figures as set out in Schedule 2 to this Order.

- 35. If, in compliance with or in response to a notice under paragraph 33 of this Order, any person furnishes a statement which is false in a material particular, and does so recklessly or knowing it to be false, he shall be liable on summary conviction to a fine (or in the case of a second or subsequent conviction to a fine not exceeding) those figures as set out in Schedule 2 to this Order.
- 36. Subject to the provisions of this Order:
 - a) for the purpose of institution of proceedings in respect of the excess charge offence against any person as being the owner of the vehicle at the relevant time, and
 - b) in any proceedings in respect of the excess charge offence brought against any person as being the owner of the vehicle at the relevant time

it shall be conclusively presumed that he was the driver of the vehicle at that time and accordingly that acts or omissions of the driver of the vehicle at that time were his acts or omissions.

- 37. Paragraph 32 of this Order shall not apply to any person unless the notice referred to in paragraph 33 of this Order has been served on the registered owner within six months of the date of issue of the excess charge notice.
- 38. If a person who has been served a notice in accordance with paragraph 33 of this Order was not the owner of the vehicle at the relevant time, and furnishes the Council with a statement of ownership to that effect in compliance with the notice, then paragraph 32 shall not apply to that person.

Part 5: Removal Of Vehicles

- 39. If a vehicle is left in a parking place in contravention of the provisions of the Order, and the vehicle;
 - a) is causing an obstruction
 - b) is owned or operated by a person who has repeatedly committed excess charge offences which at the time of the current contravention remain unpaid
 - c) is used in contravention of any of the provisions listed in this Order

- then a person authorised in that behalf by the Council may remove the vehicle or arrange for it to be removed from that parking place.
- 40. On seeking to recover from the Council any vehicle which has been removed in accordance with paragraph 39 of this Order the owner of the vehicle shall pay the Council any unpaid excess charges outstanding for that vehicle at that time, and any further charges which have been incurred by the Council, or any persons so authorised by the Council, in the removal and storage of the vehicle.
- 41. Any person removing or altering the position of a vehicle by virtue of paragraph 39 of this Order may do so by towing or driving the vehicle or in such other manner as he may think necessary and may take such measures in relation to the vehicle as he may think necessary to enable him to remove it or alter its position, as the case may be.
- 42. When a person authorised by the Council removes or makes arrangements for the removal of a vehicle from a parking place by virtue of paragraph 39 of this Order, he shall make such arrangements as may be reasonably necessary for the safe custody of the vehicle.

Part 6 : Suspension Of Parking Places

- 43. Any person duly authorised by the Council may suspend the use of a parking place or any part thereof whenever he considers such suspension reasonably necessary.
- 44. A police constable in uniform may suspend for not longer than twenty-four hours the use of a parking place or any part thereof whenever he considers such suspension reasonably necessary for the purpose of facilitating the movement of traffic or promoting its safety.
- 45. Any person suspending the use of a parking place or any part thereof in accordance with the provisions of paragraph 43 or paragraph 44 of this Order shall thereupon place or cause to be placed within the parking place or that part thereof, the use of which is suspended in accordance with this Order, a notice indicating that the use thereof is suspended and that waiting by vehicles is prohibited.
- 46. The Council at their discretion may suspend the use of any part of a parking place and thereafter may designate that part of such parking place to be reserved for the parking of vehicles engaged in the operations of any designated organisation and any part of a parking place so designated shall be marked so as to identify that it is reserved for vehicles engaged in such operations.
- 47. No person shall cause or permit a vehicle to be left or to wait:-
 - (a) in a parking place or any part thereof during such period that the use of the parking place is suspended or during such period as there is in or adjacent to a parking place or any part thereof a notice placed in pursuance of paragraph 45 of this Order; or
 - (b) in any part of a parking place marked as being designated by the Council in pursuance of paragraph 46 of this Order.
- 48. The Council may by resolution close either permanently or for any specified period of time either the whole or any part of any parking place specified in Schedule 1 to this Order, whereupon for the period of the closure, if not permanent, the order shall cease to have effect in respect of the parking place to which the resolution applies for the specified period, and if permanent, permanently.

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THE COMMON	SEAL of the	he DISTRICT	
COUNCIL OF B	ROMSGR	OVE was hereunto	
affixed this	day of		
	-		
in the presence	of:		

Head of Legal and Democratic Services

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THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 1 – Parking Places

1. Parking Place	2. Class of Vehicles Permitted	3. Hours and days of Operation	4. Charges	5. Maximum Waiting Period Allowed	6. Minimum Time In Which Return Is Prohibited
Bromsgrove Station	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	All day £2.50	N/a	N/a
Churchfields Multi Storey	Levels 1 and 2; solely as specified in Paragraph 5 of the Order Levels 3,4,5, and 6; vehicles not in excess of 3 tonnes	0800 – 1900 Monday to Saturday 0900 – 1630 Sunday	Up to 1 hour £0.60 Up to 2 hours £1.20 All day £2.00	N/a	N/a
Hanover Street	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 All day £3.00	N/a	N/a
New Road	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 30 minutes £0.30 Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 Up to 4 hours £2.40 Up to 5 hours £3.00	5 hours	5 hours
Parkside	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 30 minutes £0.30 Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 Up to 4 hours £2.40 Up to 5 hours £3.00	5 hours	5 hours
Recreation Road North	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 All day £3.00	N/a	N/a
School Drive	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 All day £3.00	N/a	N/a
Stourbridge Road	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 1 hour £0.60 Up to 2 hours £1.20 All day £2.00	N/a	N/a
Recreation Road South	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 30 minutes £0.30 Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 Up to 4 hours £2.40 Up to 5 hours £3.00	5 hours	5 hours

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 1 – Parking Places

			<u> </u>		1
Windsor Street	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 30 minutes £0.30 Up to 1 hour £0.60 Up to 2 hours £1.20	2 hours	2 hours
Dolphin Centre	Solely as specified in Paragraph 5 of the Order	0800 – 2200 everyday	Up to 1 hour £0.60 Up to 2 hours £1.20 Up to 3 hours £1.80 All day £3.00	N/a	N/a
Catshill	Solely as specified in Paragraph 5 of the Order	0000 – 2359 everyday	No charges	2 hours	2 hours
Alvechurch	Solely as specified in Paragraph 5 of the Order	0000 – 2359 everyday	No charges	N/a	N/a
Aston Road (Part)	Solely as specified in Paragraph 5 of the Order	0000 – 2359 everyday	No charges	N/a	N/a

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 2 – Excess Charge And Fines

Excess Charge or Fine	<u>Amount</u>
Rate of excess charge	£60
Failing to comply with notice as specified in paragraph 34	£100
Furnishing a statement which is false in a material particular, and doing so recklessly or knowing it to be false	£100

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THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 3 – Concessionary Permits

1. In this Schedule, except where the context otherwise requires, the following expressions have the following meanings;

'The Council'	means the Council of the District of Bromsgrove.		
'Car park'	means any off-street parking place provided by the Council for		
	members of the public.		
'Permit'	means a written or printed form of ticket issued by the Council in		
	accordance with and subject to the conditions of the scheme.		
'Authorised vehicle'	means the vehicle displaying the permit with the registration number		
	which is inscribed on the face of the permit.		
'Prescribed fee'	means the fee which the Council has set.		
'Holder' a person to whom the permit has been issued.			

- 2. The Council may issue to residents aged 60 years or over one concessionary permit for use on one vehicle which is owned by the applicant provided that the prescribed fee of £30 has been paid.
- 3. In exceptional circumstances residents who are disabled and who have difficulty in paying parking fees may also apply in writing to a designated officer requesting a concessionary permit. Permits issued in this manner are done so at the discretion of the designated officer.
- 4. The applicant is required to provide proof of ownership with a vehicle log book at the point of application, or in the case of a lease car, a lease agreement which specifies that the applicant is the leaseholder.
- 5. The Council will print the vehicle registration number shown on the log book onto the face of the permit.
- 6. The vehicle registration number printed on the permit shall not be altered or substituted with a different number except by the Council on the application of the holder.
- 7. The permit shall only be considered to be valid if it is securely fixed to the windscreen of the authorised vehicle at the time of parking. Holders should not affix the permit so that it obscures their vision.
- 8. The concessionary permit shall be valid in all Council pay and display car parks at all times until expiry providing a space is available and the person in control of the vehicle complies in all respects to the regulations and directions in place in the car park at that time.
- 9. No pass shall be valid over the maximum waiting time permitted in that parking place.
- 10. The Council in their absolute discretion may refuse to issue a permit to any person without giving any reason for such refusal, and similarly may withdraw, or invalidate in writing, the permit at any time without giving reason for such withdrawal or invalidation.
- 11. The holder of the permit does not acquire any right in respect of the use of any car park (other than not having to make any payment to park) which are not enjoyed by other members of the public using the car park.

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 3 – Concessionary Permits

12. Any vehicle parked on the car park will be parked entirely at the owners risk and all permits issued by the Council are strictly on the basis that the Council shall have no liability for any loss or damage to any such vehicle or its contents with the exception of such loss or damage due to an act or omission on the part of the Council.

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 4 – Annual And Quarterly Permits

1. In this Schedule, except where the context otherwise requires, the following expressions have the following meanings;

'The Council'	means the Council of the District of Bromsgrove.	
'Car park'		
'Permit' means a written or printed form of ticket issued by the Council in accordance with and subject to the conditions of the scheme.		
'Authorised vehicle'	means the vehicle displaying the permit with the registration number	
	which is inscribed on the face of the permit.	
'Prescribed fee'	means the fee which the Council has set.	
'Holder'	a person to whom the permit has been issued.	

- 2. The Council may issue to applicants one permit for use on one vehicle which is used by the applicant provided that the prescribed fee has been paid.
- 3. The vehicle registration number printed on the permit shall not be altered or substituted with a different number except by the Council on the application of the holder.
- 4. The permit shall only be considered to be valid if it is securely fixed to the windscreen of the authorised vehicle at the time of parking. Holders should not affix the permit so that it obscures their vision.
- 5. The permit shall only be valid in the Council pay and display car park printed on the front of the permit at all times until expiry providing a space is available and the person in control of the vehicle complies in all respects to the regulations and directions in place in the car park at that time.
- 6. The Council in their absolute discretion may refuse to issue a permit to any person without giving any reason for such refusal, and similarly may withdraw, or invalidate in writing, the permit at any time without giving reason for such withdrawal or invalidation.
- 7. The holder of the permit does not acquire any right in respect of the use of any car park (other than not having to make any payment to park) which are not enjoyed by other members of the public using the car park.
- 8. Any vehicle parked on the car park will be parked entirely at the owners risk and all permits issued by the Council are strictly on the basis that the Council shall have no liability for any loss or damage to any such vehicle or its contents with the exception of such loss or damage due to an act or omission on the part of the Council.
- 9. The amount charged for the permit which is valid for a particular parking place is specified below;

Churchfields Multi Storey	£	200
Stourbridge Road	£	200
All long stay car parks	£	300

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007

Schedule 4 - Annual And Quarterly Permits

- 10. An annual or quarterly permit holder may surrender a season ticket to the Council at any time
 - (1) A season ticket holder who surrenders a season ticket to the Council before it has become valid shall be entitled to a refund of the fee paid in respect thereof.
 - (2) A season ticket holder who surrenders a season ticket to the Council after it has become valid shall be entitled to a refund of one twelfth of the fee paid in respect thereof for each complete month of the period specified thereon as the period during which it shall be valid which remains unexpired at the time when the season ticket is surrendered to the Council.

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 5 – Staff Permits

1. In this Schedule, except where the context otherwise requires, the following expressions have the following meanings;

'The Council'	means the Council of the District of Bromsgrove.
'Car park'	means any off-street parking place provided by the Council for members of the public.
'Permit'	means a written or printed form of ticket issued by the Council in accordance with and subject to the conditions of the scheme.
'Authorised vehicle'	means the vehicle displaying the permit with the registration number which is inscribed on the face of the permit.
'Prescribed fee' means the fee which the Council has set.	
'Holder' a person to whom the permit has been issued.	

- 2. The Council may issue to members of staff one permit for use on one vehicle which is operated by the applicant provided that the prescribed fee has been paid.
- 3. Members of staff who are essential car users (and may need to make use of Council car parks during the course of their duties) may apply for staff permits through their appropriate Head / Director of Service. The application will need to state the name of the member of staff, the fact that they are an essential car user, the registration number of the vehicle to be used, and the date on which the permit is to be used from.
- 4. Members of staff who require the use of a Council operated car park if they would not otherwise have access to adequate parking facilities may apply for staff permits through their appropriate Head / Director of Service. The application will need to state the name of the member of staff, the car park that they wish to use, the registration number of the vehicle to be used, and the date on which the permit is to be used from.
- 5. The vehicle registration number printed on the permit shall not be altered or substituted with a different number except by the Council on the application of the holder.
- 6. The permit shall only be considered to be valid if it is securely fixed to the windscreen of the authorised vehicle at the time of parking. Holders should not affix the permit so that it obscures their vision.
- 7. The permit shall only be valid in Council pay and display car parks printed on the front of the permit at all times until expiry providing a space is available and the person in control of the vehicle complies in all respects to the regulations and directions in place in the car park at that time.
- 8. The holder of the permit does not acquire any right in respect of the use of any car park (other than not having to make any payment to park) which are not enjoyed by members of the public using the car park.
- 9. Any vehicle parked on the car park will be parked entirely at the owners risk and all permits issued by the Council are strictly on the basis that the Council shall have no liability for any loss or damage to any such vehicle or its contents with the exception of such loss or damage due to an act or omission on the part of the Council.

THE DISTRICT COUNCIL OF BROMSGROVE (OFF-STREET PARKING PLACES) ORDER 2007 Schedule 5 – Staff Permits

- 10. The permit shall only be valid if the member of staff is engaged solely on Council business. The use of a permit for other than official Council duties may lead to disciplinary action, withdrawal of the permit, and enforcement of an excess charge.
- 11. Members of staff who are not eligible for staff permits but who are obliged to make use of Council operated car parks through the course of their duties may purchase a parking ticket at the time of parking and have the fee paid for this ticket reimbursed through a mileage claim.

BROMSGROVE DISTRICT COUNCIL

4TH JULY 2007

CABINET

DATA QUALITY STRATEGY

Responsible Portfolio Holder	Councillor Dr. D. W. P. Booth JP
Responsible Head of Service	Hugh Bennett Assistant Chief Executive

1. **SUMMARY**

To propose a Data Quality Strategy and action plan.

2. **RECOMMENDATIONS**

2.1 That Cabinet approves the attached Data Quality Strategy and Action Plan.

3. BACKGROUND

3.1 Accurate data is essential to support the decision making processes. The Audit Commission now judges each council on a four point scale for various elements of data quality and reports this in the Annual Audit Letter. Bromsgrove Council currently scores 1 for some elements and 2 for others. The objective of the strategy is to improve our score for all elements to level 3 within the next twelve months, at which time a decision will be made as to whether to aim for level 4 status.

4. DATA QUALITY STRATEGY

4.1 In order to effectively implement the strategy it will be necessary to have a publicity campaign and also a training programme. Training is currently scheduled in the outline training plan commencing in quarter 2.

5. FINANCIAL IMPLICATIONS

5.1 No financial implications

6. LEGAL IMPLICATIONS

6.1 No Legal Implications

7. CORPORATE OBJECTIVES

7.1 Performance reporting and performance management contribute to achieving the objective of improving service performance.

8. RISK MANAGEMENT

8.1 There are no risk management issues

9. CUSTOMER IMPLICATIONS

9.1 None

10. OTHER IMPLICATIONS

Procurement Issues: None.
Personnel Implications: None
Governance/Performance Management: see 7.1 above
Community Safety including Section 17 of Crime and Disorder Act
1998: None
Policy: None
Environmental: None
Equalities and Diversity: None

11. OTHERS CONSULTED ON THE REPORT

Portfolio Holder	Yes
Acting Chief Executive	Yes
Corporate Director (Services)	Yes
Assistant Chief Executive	Yes
Head of Service	Yes
Head of Financial Services	Yes
Head of Legal & Democratic Services	Yes
Head of Organisational Development & HR	Yes
Corporate Procurement Team	No

12. APPENDICES

Data Quality Strategy attached

13. BACKGROUND PAPERS

None

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BROMSGROVE DISTRICT COUNCIL

DATA QUALITY STRATEGY

Version Author

2 John

John Outhwaite,

Senior Policy & Performance Officer, Corporate Communications, Policy

& Performance team

Foreword by the Leader and Assistant Chief Executive

Public services need accurate performance information to manage services. As increasing reliance is placed on performance information, the need to demonstrate that the underlying data is reliable has become more critical.

Successful authorities have recognised data quality as a corporate priority and have taken action to embed strong arrangements for managing the quality of the data they collect and use.

Audit Commission research shows that in many authorities the quality of financial information is generally higher than that of performance information, because finance data is collected according to professional accounting rules and is subject to strong internal controls and a formal audit regime. The quality of non-financial performance information can be more variable, because internal controls for the recording and preparation of the underlying data are often less developed.

The risk in not identifying and addressing weaknesses in performance data quality, or the arrangements that underpin data collection and reporting activities, is that performance information may be misleading, decision making may be flawed, resources may be wasted, poor services may not be improved, and policy may be ill-founded. There is also a danger that good performance may not be recognised and rewarded.

Increasingly, organisations working in partnership need to share data or rely on data from other providers. To be confident of the quality of this data, a data sharing protocol, statement, or service level agreement is needed.

Staff at all levels within the organisation need the appropriate knowledge, competencies and capacity for their roles in relation to data quality, recognising that they are the key to recording accurate and reliable data.

The Council has therefore decided to develop and implement this Data Quality Strategy in order to improve the quality of our performance data in line with good practice.

Leader of the Council

Assistant Chief Executive

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- 1 Introduction
- 2 Priorities
- 3 Awareness
- 4 Definitions
- 5 Input
- 6 Verification
- 7 Systems
- 8 Output
- 9 Presentation

Appendix 1 – Data Quality Action Plan

Appendix 2 – Data Quality Responsibilities Matrix

Appendix 3 – Audit Commission Key Lines of Enquiry

Bromsgrove District Council's Performance DataQuality Strategy

1. Introduction

- 1.1 The purpose of this strategy is to set out an approach to improving the quality of Performance Indicator data. Consistent, high-quality, timely and comprehensive performance information is vital to support good decision-making and improved service outcomes.
- 1.2 Performance information is increasingly being used by external bodies to assess our performance, often as an alternative to inspection, and this trend is causing external bodies to place a bigger emphasis on data quality. In particular, the external audit approach of checking calculations and systems reports is evolving into a more challenging scrutiny of systems controls.
- 1.3 The Audit Commission published a set of Key Lines of Enquiry for data quality in 2006 which are used to give each authority a score of between 1 to 4 for data quality, this is reported in the Annual Audit Letter. They have also just (March 2007) published a consultation document "Improving information to support decision making: standards for better quality data". Currently Bromsgrove Council scores between 1 and 2, the outcome of implementing the action plan contained in this strategy should be that our score will rise to 3in the next 12 months. Thereafter decisions will be made about whether to plan to proceed to level 4.
- 1.4 There are a number of principles that underpin good data quality. It is important to consider these sequentially because if any of these principles are not adhered to, inaccuracies are likely to creep in, and adherence to subsequent principles will not be able to rectify the position:
 - Awareness: everyone recognises the need for good data quality and how they can contribute;
 - **Definitions:** everyone knows which PIs are produced from the information they input and how they are defined;
 - **Input:** there are controls over input, especially that information is input on an ongoing basis; rather than stored up to be input later;
 - Verification: there are verification procedures in place as close to the point of input as possible;
 - **Systems and Procedures :** are fit for purpose and staff have the expertise to get the best out of them;
 - Output: performance indicators are extracted regularly and efficiently and communicated quickly; and

- **Presentation:** performance indicators are presented, with conclusive evidence, in such a way as to give an easily understood and accurate picture of our performance, whoever the audience.
- 1.4 The first five of the above principles are where we need to focus our attention. The following sections look at each of these principles in more detail, an action plan is included at Appendix 2

2. Priorities

- 2.1 The priority areas for improvement are around the capture and point of entry of performance data. Priority will be given to ensuring that staff gathering performance data and those inputting performance data understand the importance of accuracy of information and also understand the purpose of the data they are gathering and/or entering.
- 2.2 PI definitions and processes for capturing and calculating the PI need to be documented.
- 2.3 There is a need for some Internal Audit work to be done and there will be an annual report to PMB on progress against the action plan.

3. Awareness

- 3.1 Data quality is the responsibility of every member of staff entering, extracting or analysing performance data. Every officer should be aware of his or her responsibilities with regard to data quality. The commitment to data quality will be communicated clearly throughout the Council to reinforce this message.
- 3.2 Responsibility for performance data should be reflected in job descriptions and the appraisal process. Departments are encouraged to ensure that suitable appraisal targets and paragraphs in job descriptions are included, appropriate to the level of involvement staff have in the PI process.
- 3.3 There is collective responsibility for performance data quality, but it is necessary to be clear about what actions and responsibilities are allocated to specific individuals and teams in order to implement this strategy. A summary of this is included as Appendix 1, and it is also reflected in the text that follows and in the action plan.

4. Definitions

4.1 All officers should have an appropriate level of understanding of any PIs affected by the performance data they contribute.

- 4.2 BVPIs have nationally set definitions. It is important that every detail of the definition is applied.
- 4.3 For local PIs we need to have a clear definition and ensure that there are procedures in place to collect and report the data in an agreed format. In particular, we need to be clear about whether target and outturn figures refer to a snapshot or cumulative position.
- 4.4 Every PI should have a named officer, with a named deputy, who is responsible for collecting and reporting the information. This ensures that there is consistency in the application of definitions and use of systems for providing the data.

5. Input

- 5.1 There must be adequate controls over the input of performance data. The aim should be 100% accuracy 100% of the time. It is important that officers have clear guidelines and procedures for using systems and are adequately trained to ensure that information is being entered consistently and correctly.
- 5.2 A key requirement is that data should be entered on an ongoing basis, not saved up to be entered in a block at the end of a period. This reduces the error rate and the need for complex verification procedures.
- 5.3 Controls should also be in place to avoid double-counting. These should be designed according to the nature of the system, in particular where more than one person inputs performance data. A likely control will be an absolutely clear division of responsibility setting out who is responsible for what data entry.
- 5.4 Systems must also record all relevant information. Individual systems need to be evaluated to determine whether additional controls are necessary. There is more information about how to carry out this type of evaluation in section 7.

6. Verification

- 6.1 Performance data requirements should be designed along the principle of 'getting it right first time'. Nevertheless, even where there are strong controls over input, errors can creep in. Where it is needed, a verification procedure should exist close to the point of performance data input. The frequency of verification checks will need to be aligned with the frequency of performance data reporting.
- 6.2 The simplest verification system might be a review of recent performance data against expectations, or a reconciliation of systems-produced data with manual input records. Depending on the complexity of the system, it might be necessary to undertake more thorough verification tasks, such as:

- data cleansing, e.g. to remove duplicate records or to fill in missing information;
- sample checks to eliminate reoccurrence of a specific error, eg checking one field of data that is pivotal to a PI against documentation, for a sample of cases;
- test run of report output, to check the integrity of the query being used to extract data; and
- spot checks, e.g. on external contractor information.
- 6.3 Particular attention needs to be paid to data provided by external sources. A number of PIs are calculated using information provided by contractors and partners and the Council must work with them to ensure that such data is accurate, as responsibility for the PI remains with the Council.
- 6.4 When entering into contracts with service providers it is essential that, wherever relevant, there is a requirement to provide timely and accurate performance information, and that we are clear with the contractor about their responsibilities for performance data quality and how we will be checking the information they provide.
- 6.5 It might not always be possible to alter existing contracts so that contractors are fully committed to providing an agreed quantity of performance data. In this case, the performance data must be treated as high-risk and thought must be given to establishing a system of checks and measures to ensure that we are confident about the accuracy of this data.
- 6.6 Responsibility for data verification will lie within Departments, but Internal Audit and/or the Communications, Policy and Performance team can offer advice and guidance about verification procedures and processes.

7. Systems and procedures

- 7.1 Responsibility for maintaining robust systems and procedures for performance data lies within Departments.
- 7.2 A central record of performance indicators will be maintained by the Communications, Policy and Performance team which will include:
 - the identity of the data quality lead (and deputy)
 - The PI definition
 - a summary of data quality and verification actions undertaken;
 - risk assessment undertaken
- 7.3 Each PI should have a named officer responsible for data quality issues. There should also be a named substitute officer who can deputise to

maintain the day-to-day work of capturing and processing performance data. The responsible officer will ensure that:

- The PI has a clear definition and a set of written procedures exists for the purpose of capturing and calculating performance information. This will be recorded on the PI certificate.
- Users are adequately trained, where appropriate by having a formal training programme which is periodically evaluated and adapted to respond to changing needs
- there is security of access and amendment of data.
- periodic tests of the integrity of performance data are undertaken
- information management and support is available to users
- changes to processes and procedures are made where necessary (for instance to accommodate amendments to PI definitions)
- there are adequate audit trails to demonstrate the validity of the performance calculations
- actions recommended by system reviews (e.g. by the external auditors) are implemented
- 7.4 There are a number of conditions that might lead to a PI being considered high risk, and every PI needs to be considered against these factors. The risk assessment will be updated annually by the Communications, Policy and Performance team in consultation with Departments. 'High risk' conditions will include:
 - a high volume of data/transactions
 - technically complex PI definition/guidance
 - problems identified in previous years
 - inexperienced staff involved in data processing/PI production
 - system being used to produce a new PI
 - PI's which rely on data from external sources
- 7.5 The purpose of undertaking a risk assessment is to target limited resources at the areas that require most attention. A programme of improvement will be put together focusing on high-risk PI's.
- 7.6 Responsibility for delivering the improvements will lie within Departments, but support will be available from the Communications, Policy and Performance team and Internal Audit, see Appendix 1 for more detail.

8. Output

8.1 Best use can be made of performance data if it is produced and communicated on a timetable that allows for management action. A

- reporting timetable will be produced each year by the Communications, Policy and Performance team.
- 8.2 It is important that performance information is subject to scrutiny and challenge before being passed up the line for management action. This can be undertaken at several stages in the process. The most likely instances will be either a verification check on output reports (described in paragraph (see 6.2 above), or a Departmental review meeting of performance data (e.g. at DMTs prior to the monthly performance report to CMT).

9. Presentation

- 9.1 During external audits, there should be at least one other officer who is able to provide advice and information on the PI in the absence of the lead officer. This is an important control to ensure that audit work proceeds smoothly.
- 9.2 When information is presented for external audit, another officer must review working papers to confirm that the definition has been followed, the calculations are correct and the indicator is supported by a full audit trail.
- 9.3 A PI certificate must be completed for all BVPI's and all local PI's that are corporately reported. The PI certificate should contain, or refer to, supporting information necessary for an external audit of the PI.

No	Theme	Action	How	Who	When	Priority
1	Awareness	Ensure that responsibility for data quality is part of job descriptions and the PDR process.	Departments will need to check and rectify any gaps. Revised JD's to be seen by CCPP team. HR to audit PDR's for a sample of nominated employees in 2008	Departments, CCPP	By Q2 2007 and incorporated into PDR's in 2008	М
2	Awareness	Develop and deliver awareness training and more specific training for staff responsible for data quality	Awareness seminars and training sessions scheduled in training plan	Communications, Policy and Performance team with HR	Quarter 2 2007/08 onwards	М
3	Definitions	Ensure that, when making submissions on nationally reported PIs, the definition has been followed.	This will be achieved by completion and review of PI certificates	All PI compilers and those responsible for PI data quality	April 07 to June 07, thereafter January to June in subsequent years	Н

No	Theme	Action	How	Who	When	Priority
4	Definitions	Ensure that all local PI's (whether reported corporately or not) have specific definitions and	PI certificate format will be reviewed/amended as necessary for local PI's.	Performance Plus sub- group	End Jun 07 Corporately reported Pl's. End Sep 07	
		counting rules.	Certificates will be used for local Pl's for 2007 onwards	All PI compilers and those responsible for PI data quality supported by Communications, Policy and Performance team	thereafter January to June in subsequent years	н
5	Definitions	Ensure that all PI's have a documented procedure for the gathering of PI data and calculation of the PI	Guidance will be provided by CCPP team (in conjunction with ICT).	PI data quality lead	By end Q3 2007/08	Н
5	Definitions	Ensure that all relevant staff have an understanding of PI definitions calculated from data they input/analyse/extract	Training (where this is not already the case)	Departmental PI data quality leads	Ongoing	Н
6	Verification	Ensure that data provided by external contractors meets requirements for reporting performance.	Depending on individual circumstances this might be achieved by making provision in contracts or by direct action such as documented spot checks	Performance managers/officers; Communications, Policy and Performance team; Internal Audit (as part of appropriate scheduled audits)	Ongoing	М

No	Theme	Action	How	Who	When	Priority
7	Verification	Ensure that all future contracts specify requirements of contractors to provide performance data	Procurement procedures to be reviewed and revised if necessary	Procurement team supported by Communications, Policy and Performance team	Quarter 2 2007	М
8	Verification	Ensure that the council has a programme of data validation to support accurate performance reporting.	Programme to be implemented by PI data quality leads, with central record kept by the P&I team	Communications, Policy and Performance team; performance managers/officers Internal Audit (as part of appropriate scheduled audits)	July 07 and ongoing	М
9	Systems and Procedures	Ensure that data controls are robust.	Specific measures will depend on the system and will be the responsibility of the data quality lead for each system to address.	All PI compilers and those responsible for PI data quality supported by Internal Audit & Communications, Policy and Performance team	July 07 and ongoing	М
10	Systems and Procedures	Ensure that all PI's have a nominated person and deputy responsible for data quality	Data gathering exercise	Heads of Service supported by Communications, Policy and Performance team	Mar 07 and updated regularly	Н

No	Theme	Action	How	Who	When	Priority
11	Systems and procedures	Undertake an annual risk assessment of Pl's. Develop an appropriate programme of improvement	Council risk methodology	Communications, Policy and Performance team with PI data quality leads. Relevant PI data	Sep to Oct each Year Ongoing	Н
12	Output	Ensure that appropriate scrutiny of PI's is undertaken at, for instance, DMT's, prior to submission of performance information to CMT	Visits and briefings at DMT's	quality leads DMT's visited/supported by Communications, Policy and Performance team	April 07 and ongoing	М
13	Presentation	Ensure that PI certificates are completed for all PI's	Guidance already issued – implemented in 2006 supported by workshops	All PI compilers/reviewers and PI data quality leads supported by Communications, Policy and Performance team	April 07 – June 07 and subsequent years	Н

Matrix of Data Quality responsibilities

All with responsibility for inputting data and calculating performance measures	PI data quality leads	Departments (HoS responsible overall but will discharge responsibility via DQ leads)	Communications, Policy and Performance team	Internal Audit
Knowledge of relevant PI definitions and guidance Input accurate information Up-to-date record keeping (not entered in a block)	Maintain a robust data quality environment Identify and rectify gaps in data quality Training/guidance of departmental staff Provide information to Communications, Policy and Performance team so central record is kept	Overall responsibility for the reliability of performance information presented at CMT	Maintain list of PI's and PI certificates Co-ordinate risk assessment of PI's liaising with IA and DQ leads Co-ordinate programme of systems work, liasing with IA and DQ leads Communicating the commitment to DQ	Support improvement on individual systems Incorporate DQ issues in routine audit work

1. GOVERNANCE AND LEADERSHIP

Has the body put in place arrangements at a senior level to secure the quality of data used to manage and report on performance? Key line of enquiry

1.1 Responsibility for data quality is clearly defined.

Audit Focus

- there is top level commitment to data quality; and
- the body acts on this commitment, to secure the quality of its data.

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-	aval 2	١.	Level 3		Level 4	
_	Level 2					
*	Responsibility for data quality has been assigned within the organisation.	*	An individual at top management level has overall strategic responsibility for data quality.	*	Data quality is seen as being 'part of the day job', and is fully integrated into planning, monitoring and reporting	
*	The organisation's commitment to data quality (for example, the importance of,	*	The corporate commitment to data quality		processes in the organisation.	
	and arrangements for, securing the quality of key data) is outlined in key strategic documents, such as the corporate plan.		is communicated clearly, reinforcing the message that all staff have a responsibility for data quality.	*	There is a member lead for data quality issues and there is evidence that this role is undertaken effectively.	
		*	Accountability for data quality throughout the organisation is clearly and formally defined and is part of the corporate performance appraisal system for those defined as responsible and accountable for data quality.	*	Members have received training on the importance of data quality and the body's specific approach to managing the associated risks.	
		*	Issues relating to data quality are considered by or reported to those charged with governance.			

Key line of enquiry

1.2 The body has clear data quality objectives.

Audit Focus

- there is a strategy for data quality which includes specific data quality objectives; and
- there is a plan for delivery of these objectives.

Criteria	for	Judgemen	t
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Level 2	Level 3	Level 4
★ Objectives for data quality management are developing, but may not yet be formalised in a strategy or plan.	★ A formal strategy for data quality is in place and has been approved by the Board. The strategy covers all	★ Challenging data quality objectives have been set, and are being achieved.
 ★ The organisation is working to improve data quality, but there may be no defined milestones, targets or monitoring. 	 departments and functions. The corporate objectives for data quality management are linked to business objectives. 	★ The organisation has undertaken a review of staff awareness of data quality issues.
★ The organisation has begun to focus on data quality, but this work has so far been driven departmentally rather than corporately.	★ The strategy has an associated delivery plan, with clearly identified actions, responsibilities and timescales to support improvement. This is reflected in the corporate plan.	
	★ The organisation communicates its commitment to data quality to staff at all levels.	
	★ All departments have set data quality objectives.	

Key line of enquiry

1.3 The body has effective arrangements for monitoring and review of data quality.

Audit Focus

- there is a framework in place for monitoring performance in relation to data quality; and
- there is a formal programme of review of data quality.

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Level 2	Level 3	Level 4		
 ★ Monitoring and review of data quality has been undertaken, although this has primarily been on an ad hoc basis. ★ Reports are produced as a result of these 	★ There is a framework for monitoring data quality, with regular formal reporting on key measures of data quality to those charged with governance, enabling them to challenge the integrity of data.	★ The organisation undertakes benchmarking exercises to review the effectiveness of its own monitoring and review arrangements.		
reviews which are submitted for top management attention.	 ★ There is a formal programme of data quality review, which is proportionate to 	★ The organisation is able to demonstrate that it satisfies all internal and external requirements (where applicable) in		
★ The organisation has begun to consider data quality as part of its corporate risk management arrangements.	risk and reported to those charged with governance. This includes reporting on the accuracy of data supporting key performance indicators.	 relation to the quality of its data. ★ The organisation can demonstrate that it has taken action to address key variances 		
★ The organisation can demonstrate that it has taken action to address the results of internal and external data quality reviews.	Data quality is embedded in corporate risk management arrangements, with regular	in relation to data quality. ★ Examples of good practice in securing		
internal and external data quality reviews.	assessments of the risks associated with unreliable and inaccurate information.	data quality are publicised to all relevant staff.		
	★ Data is subject to robust scrutiny by those charged with governance and is subject to approval prior to external reporting.			

2. POLICIES

Has the organisation defined its expectations and requirements in relation to data quality?

Key line of enquiry

2.1 A policy for data quality is in place, supported by a current set of operational procedures and guidance.

Audit Focus

Evidence that:

- a formal policy for data quality is in place;
- policies are applied in practice; and
- operational procedures and guidance meet users' needs.

Criteria for Judgement

Level 0	110	11 4
Level 2	Level 3	Level 4
★ A data quality policy, or set of policies, is in place at the operational level. The policies have been designed to support the data quality objectives.	★ There is a comprehensive current data quality policy in place. This covers data collection, recording, analysis and reporting and has been implemented in all business areas.	 ★ The policy covers data quality requirements in relation to partnership working, where relevant. ★ The organisation can demonstrate that
 ★ The data quality policy has been approved by senior management at least at a departmental level. 	★ The policy meets any relevant national standards and requirements, as well as defining local practices and monitoring	operational procedures and guidance have been developed with staff fully involved in the process.
★ There are a number of procedures and guidance notes in place but these do not yet cover all aspects of data collection, recording, analysis and reporting, or are not in place in all business areas.	 ★ The policy is supported by a comprehensive and current set of operational procedures and guidance. 	
	★ The policy and procedures are reviewed at least annually and updated when needed.	

Key line of enquiry 2.2 Policies and procedures are followed by staff and applied consistently throughout the organisation.

Audit Focus

 processes are carried out in line with established policy and procedures. 					
Criteria for Judgement					
Level 2	Level 3	Level 4			
★ All relevant staff are aware of the data quality policy, operational procedures and guidance and have access to the documents.	★ All staff are able to access the policies, procedures and guidance. Where possible this is supported by information systems.	★ Each department has been assigned a data quality champion who regularly reviews and reports on compliance with the relevant policies and procedures.			
★ Training on the policy and procedures takes place.	★ Mechanisms are in place to monitor compliance with the policies and procedures, and the results are reported to top management.	★ The champion is effective in rectifying any non-compliance and can demonstrate an impact on data quality.			
	★ Instances of failure to comply with corporate policies and procedures and national standards, or poor performance against data quality targets, are investigated and corrective action taken.				
	★ The organisation can demonstrate that it is proactive in informing staff of any policy or procedure updates on a timely basis.				

3. SYSTEMS AND PROCESSES

Are there effective systems and processes in place to secure the quality of data?

Key line of enquiry

3.1 There are appropriate systems in place for the collection, recording, analysis and reporting of the data used to monitor performance, and staff are supported in their use of these systems.

Audit Focus

Evidence that:

systems (manual or computerised) produce data which is fit for purpose.

Level 2	Level 3	Level 4
★ There may be some minor weaknesses in the systems for data collection, recording, analysis and reporting of performance information, but action is being taken to address these.	★ There are systems in place for the reporting of corporate performance information which is based on data which is accurate, valid, reliable, timely, relevant and complete.	 ★ The organisation undertakes regular reviews to ensure that outputs are timely, accurate, clear and in a format convenient to users. ★ The organisation consults with staff when
★ The organisation recognises the importance of these systems, whether manual or computerised, operating on a 'right first time' principle. Some work is needed to achieve this.	★ Systems and processes operate according to the principle of 'right first time' rather than employing extensive data cleansing or manipulation processes to produce the information required.	developing or implementing systems.
 ★ Support for staff using these systems is provided, but improvements could be made (e.g. by making support more accessible or responsive). ★ Any internal or external reviews of the 	★ Arrangements for collecting, recording, compiling and reporting data are integrated into the wider business planning and management processes of the organisation, and support staff in their day-to-day work.	
systems have not identified significant weaknesses.	 ★ Adequate support is provided for all staff using the organisation's systems and processes. User guides and help desk services are provided. 	

Key line of enquiry

3.2 The body has appropriate controls in place to ensure that information systems secure the quality of data used to report on performance.

Audit Focus

Evidence that:

• data is produced without the need for subsequent intervention, manipulation or correction.

Level 4 ion systems have ★ The organisation can demonstrate that it
ion systems have The organisation can demonstrate that it
imise the scope for ulation, and prevent missing data, and anges (e.g. the use is proactive in strengthening performance information system controls rather than merely reacting to issues when detected.
at least annually to vorking effectively.
ews are reported to
artmental checks ew for each e being reported to

Key line of enquiry
3.3 Security arrangements for performance information systems are robust, and business continuity plans are in place.

Audit Focus

 performance information systems are secure, allowing the organisation to function under adverse circumstances. Criteria for Judgement 								
Level 2	Level 3	Level 4						
★ Security arrangements, including access control, are in place for the organisation's business critical performance information systems.	★ Procedure notes/manuals are in place for all performance information systems identified as being business-critical and these are reviewed and updated as appropriate.	★ The organisation can demonstrate that it has carried out detailed scenario planning for its performance information systems and made changes to address any weaknesses identified.						
★ There are procedure notes/manuals in place for the organisation's business critical performance information systems.	 ★ The organisation regularly tests its performance information systems to ensure that processes are secure and 							
★ A business continuity plan is in place to provide protection for records and performance data which are vital to the continued effective functioning of the organisation.	reports to top management.							

Key line of enquiry

3.4 An effective management framework for data sharing is in place.

Audit Focus

Evidence that:

• the organisation has high standards in relation to the data it shares internally and externally.

Level 2	Level 3	Level 4
★ All instances of internal and external data sharing have been identified, but formal protocols have yet to be developed.	★ A formal set of quality requirements is applied to all data used by the organisation which is shared externally, or which is provided by a third-party	★ The organisation can demonstrate that it has implemented high standards of data management governance, for example in relation to partnership working.
★ There is a framework in place for identifying and complying with all relevant legal, compliance and confidentiality standards.	organisation. These quality requirements could be in the form of a data sharing protocol, contract or service level agreement.	
	★ There are protocols in place for sharing key data internally.	
	★ There are processes in place to validate data from third parties.	

4. PEOPLE AND SKILLS

Does the organisation have the resources in place to secure data quality?

Key line of enquiry

4.1 The body has communicated clearly the responsibilities of staff, where applicable, for achieving data quality.

Audit Focus

- specific skills and responsibilities in relation to data quality have been identified; and
- staff understand their role in achieving data quality; and are putting the theory into practice.

Le	evel 2	Le	evel 3	Le	evel 4
*	assessment of the data quality skills that it has in place across the workforce and identified potential gaps.	*	Roles and responsibilities below the strategic level in relation to data quality are clearly defined and documented, and are incorporated into job descriptions.	*	The organisation can demonstrate that it has an effective internal network of data quality champions that have successfully driven improvement throughout the organisation.
*	Staff are clear about their responsibilities in relation to data quality.	*	These roles and responsibilities for data quality are applied consistently throughout the organisation. Data quality targets and standards are set	*	The organisation can demonstrate that it has made assessments of how well staff understand their roles and responsibilities with regard to data quality.
			and staff are assessed against these.		

Key line of enquiry

4.2 The organisation has arrangements in place to ensure that staff with data quality responsibility have the necessary skills.

Audit Focus

Evidence that:

• the organisation has provided training to ensure that staff have the necessary skills and knowledge in relation to data quality.

•		HISU	ire that stair have the necessary skills and knowledge i	11116	elation to data quality.
Cr	iteria for Judgement				
Le	vel 2	Le	vel 3	Le	evel 4
*	Staff with specific responsibilities for data input or data quality have received data quality training.	*	The organisation has trained all staff to ensure they have the necessary skills to ensure the effective collection, recording, analysis and reporting of data.	*	The organisation can demonstrate that it has identified future developments that may impact on data quality staff skills and capacity
*	There is evidence of review of the current data quality training provision but this has yet to be developed corporately.	*	Any weaknesses identified through internal or external reviews of data quality are adequately addressed through the training programme or briefing sessions.		and is proactively managing these.
*	Some departments are addressing weaknesses identified from data quality reviews through training but this has yet to be developed corporately.	*	the latest changes in data quality procedures, guidance and systems are disseminated and acted upon in a timely manner.		
		*	There are corporate arrangements in place to ensure that data quality training provision is periodically evaluated and adapted to respond to changing needs.		

5. DATA USE

Are there effective arrangements and controls in place for the use of data by the organisation?

Key line of enquiry

5.1 The body has put in place arrangements that are focused on ensuring that data supporting performance information is also used to manage and improve the delivery of services.

Audit Focus

Evidence that:

reported performance information is actively used in the decision making process.

Criteria for Judgement Level 2	Level 3	Level 4
★ Reported data is fed back to those who generate it to reinforce understanding of the way it is used.	 ★ Data used for reporting to those charged with governance is also used for day-to- day management of the organisation's business. 	★ Senior management routinely and actively use data supporting performance information is used to plan and allocate resources.
★ Performance information is regularly used, to identify deviations from planned performance.	★ Reports are prepared on an exception basis so that areas where action is needed are clearly identified.	 ★ Members have available to them high level information with which they can assess delivery of services in relation to
★ There is timely action on performance shortfalls, and follow-up to ensure action has been taken.	 ★ There is evidence that management action is taken to address service delivery issues identified by data returns and performance information reports. 	agreed plans.
	★ Reports include an element of prediction rather than merely being a record of historical events.	
	★ Data is used not only to measure the volume of activity delivered but also to assess the quality of the service provided.	

Key line of enquiry

5.2 The body has effective controls in place for data reporting.

Audit Focus

Evidence that:

• information used to report on performance is subject to a system of internal control and validation.

Criteria for Judgement Level 2 Level 3 Level 4 ★ Definitions are generally applied correctly ★ Data returns are supported by a clear and ★ There is evidence that members and complete audit trail. senior officers follow up on action taken to to all data items. address identified problems to ensure that ★ All data returns are supported by an audit ★ Information which is used for external the action has been implemented and has trail, although there may be some reporting is subject to rigorous verification. been effective especially where errors may lead to loss weaknesses. of income. ★ There is evidence that controls are exercised over data to verify its accuracy. ★ All data is subject to senior approval prior to external reporting. Reported data is generally submitted on a timely basis. Instances of data not being submitted on a timely basis are fully investigated and reported to management.

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BROMSGROVE DISTRICT COUNCIL

EXECUTIVE CABINET

10TH JULY 2007

COMPREHENSIVE PERFORMANCE ASSESSMENT AND IMPROVEMENT PLAN 2007/2008

Responsible Portfolio Holder	Roger	Hollingworth,	Leader	of	the
	Council				
Responsible Head of Service	Hugh	Bennett,	Assistant		Chief
	Executiv	ve			

1. **Summary**

- 1.1 To formally report the Audit Commission's Comprehensive Performance Assessment report to Cabinet.
- 1.2 To agree the Improvement Plan for July 2007 to June 2008. The Improvement Plan is a detailed one year plan, based on the corporate priorities and high level actions set out in the Council Plan 2007/2010.

2. Recommendations

- 2.1 It is recommended that Executive Cabinet:
 - i. Notes the Audit Commission's Comprehensive Performance Assessment report, in particular, the areas for improvement set out on page 7 (**Appendix 1**).
 - ii. Approves the Improvement Plan 2007/08 (Appendix 2).
 - iii. Notes that the Improvement Plan 2007/08 does cross reference to the recommendations contained in the Audit Commission's Comprehensive Performance Assessment report (**Appendix 3**), but also contains other actions for 2007/08 designed to deliver the Council Plan 2007/2010.
 - iv. Agree the changes to the Council Plan set out in 3.4, based on the Corporate Management Team's view of the Council's capacity to deliver the Council Plan 2007/2010.

v. Agrees that further updates to the Improvement Plan 2007/08 may be required, based on discussions between the Improvement Director and Corporate Management Team.

3. Background

- 3.1. Members will be aware that the Council recently received its first Comprehensive Performance Assessment from the Audit Commission. Overall, the Council received a rating of "Poor", which is the lowest of the five possible ratings. The Audit Commission's report does identify that:-
 - "after a considerable period of inaction and poor decision making, Bromsgrove have come a long way, from a very low base, in the past year".
- 3.2. Despite this progress, the Council still has a significant distance to travel in order to be "Fair" rated and no longer in voluntary engagement with Central Government. The Audit Commission have made four key recommendations. These are detailed on page 7 of their report.
- 3.3. Appendix 2 of the report contains a detailed Improvement Plan 2007/08, which sets out what actions the Council intends to take over the next 12 months to deliver its 10 corporate priorities as set out in the Council Plan 2007/2010. The Council has previously delivered a recovery plan, focusing on the financial management of the Council and in August 2006 Cabinet approved an improvement plan focused on more outward facing issues like customer service, performance indicators and reputation management. The attached Improvement Plan 2007/08 stays with the same format, but is updated to reflect actions for the year ahead. The Council Plan is wider in its scope that the four Audit Commission areas for improvement, so Appendix 3 cross references the relevant parts of the Improvement Plan 2007/08 to the Audit Commission's areas for improvement.
- 3.4 Capacity has been identified as an issue in the Audit Commission's report and the 2006/07 Improvement Plan was considered "ambitious" by the Audit Commission and Government Monitoring Board. As a result, the Corporate Management Team have considered this issue and recommend the following changes to the Council Plan 2007/2010 and therefore to the Improvement Plan 2007/08:-
 - the switching off of voicemail to be suspended and re-programmed into 2008/09. Whilst Corporate Management Team believe this action will be in the long term interest of achieving a more Customer First culture, there are more immediate management issues around how the "back office" interfaces with the Customer Service Centre, job evaluation and Single Status and the Spatial Project, which need addressing first (Improvement Plan ref. 15.3).
 - the roll out of workforce planning to be re-programmed into 2008/09. The Council is to undergo job evaluation and Single Status during

2007/08. Previous advice from the Government Monitoring Board and officer experience from other councils suggests that this is a very difficult project. The Human Resources and Organisational Development Department are unlikely to have the capacity to deliver workforce planning on top of these major changes (Improvement Plan ref. 20.1).

3.5 The Improvement Director has also outlined a number of additional actions which may be required to drive the Council through to a "Fair" rating in 2008/09. These require further consideration and will need to be incorporated into the Improvement Plan as they are considered and actions agreed.

4. Financial Implications

4.1 The 2007/2010 medium term financial strategy is based on the Council's priorities, which the Improvement Plan is also based on.

5. <u>Legal Implications</u>

5.1 There are no legal implications to this report.

6. Corporate Objectives

6.1 The Improvement Plan is aligned to the Council's Corporate objectives and priorities.

7. Risk Management

7.1 The Improvement Plan will be supported by the Council's strategic risk register.

9. Customer Implications

9.1 Putting the customer at the heart of what the Council does is a key area for improvement in the Audit Commission report and is addressed by the Improvement Plan (see 4., 5.2 and 17.1).

9. Other Sub Headings

8.1 All the following issues have been reflected in the definitions of the Council Objectives:-

Procurement Issues

The Improvement Plan contains a number of procurement issues e.g. town centre, leisure trust etc.

Personnel Implications See section 20.

Governance/Performance Management Considerations
See section 16 on Governance and section 6 on
performance.

Community Safety Considerations
See section 7.

Policy Considerations
The Improvement Plan reflects the ten priorities of the
Council.

Environmental Considerations
See section 9.

Equalities Implications

10. OFFICERS CONSULTED ON THE REPORT

Chief Executive	Yes
Corporate Director (Services)	Yes
Assistant Chief Executive	Yes
Head of Service	Yes
Head of Financial Services	Yes
Head of Legal & Democratic Services	Yes
Head of Organisational Development & HR	Yes
Corporate Procurement Team	N/a

Background Papers

See 7.4.

Council Plan 2007/2010, Cabinet, February 2007.

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June 2007



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Corporate Assessment

Bromsgrove District Council

The Audit Commission is an independent body responsible for ensuring that public money is spent economically, efficiently and effectively, to achieve high quality local services for the public. Our remit covers around 11,000 bodies in England, which between them spend more than £180 billion of public money each year. Our work covers local government, health, housing, community safety and fire and rescue services.

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Introduction

- 1 Comprehensive Performance Assessment (CPA) is the means by which the Audit Commission fulfils its statutory duty under section 99 of the Local Government Act 2003 to make an assessment, and report on the performance, of local authorities. Corporate assessment is one element in the overall assessment that leads to a CPA score and category.
- 2 The purpose of the corporate assessment is to assess how well the Council engages with and leads its communities, delivers community priorities in partnership with others, and ensures continuous improvement across the range of Council activities. It seeks to answer three headline questions which are underpinned by five specific themes.

What is the Council, together with its partners, trying to achieve?

- Ambition
- Prioritisation

What is the capacity of the Council, including its work with partners, to deliver what it is trying to achieve?

- Capacity
- Performance management

What has been achieved?

Achievement and Improvement

Executive summary

- 3 After a considerable period of inaction and poor decision making, Bromsgrove have come a long way, from a very low base, in the past year. The change in style at the top of the organisation and internal improvements that have been made is welcomed and recognised by staff and partners, and progress is continuing at the right pace and in the right direction. However this progress is against a baseline of poor corporate and service performance. It is also in comparison to other councils who have continued to improve guickly. Whilst Bromsgrove should continue this positive improvement journey, there is still a lot to do to ensure services are adequate and improvement is maintained and sustained.
- 4 Bromsgrove recognised some time ago that it was not performing adequately and asked for government support and help. Part of this support involved less inspection, and voluntary engagement with an external improvement board. As a result this is the first corporate assessment Bromsgrove have had. Although the overall assessment shows that Bromsgrove are a poor council, in the last year they have been making positive progress. They were however so far behind other councils that even with the positive progress made, they have yet to reach acceptable standards for the areas we inspected.
- There is still a very long way to go before the public will notice a step change and be at the heart of what the council does. There are many areas where the Council is not meeting an acceptable standard and has yet to deliver. Although some poor services have recently improved it is not clear that all improvements are sustainable, there is still work to do on improving customer interface with the Council.
- The Council leadership has a clear understanding of what it wants to achieve in its plans for the area. There are some examples of community leadership such as the equality forum and some difficult decisions have been made although not consistently across the organisation. However, the vision for Bromsgrove has not been consulted on effectively and has yet to drive all the Council's plans and proposals. Not all staff are clear about how they fit into this overall vision, or could easily articulate it. In addition the Council's relationship with the county is not effective, has not been effective for some time and has not shown any immediate signs of improving. While this is not entirely Bromsgrove's responsibility, it has not taken active steps to resolve the situation. This will impact on the ability to deliver the vision.
- Priorities have recently been developed within the Council to help deliver the overall vision. These reflect issues for the Council and for the wider local area and have had an impact on the Local Strategic Partnership (LSP), with clear linkages between their priorities and the Council's. However, there is no functional community plan and the priorities are not very specific and allow most services and interests to claim they are a priority. There is evidence of money starting to move towards priorities but this is not yet embedded and the impact of this is yet to be seen.

- An area of concern is the Council's own capacity to make the changes needed in a reasonable timeframe so that the public would notice the difference. There are many councillors who do not understand their role on the Council. They do not understand how to hold the executive to account, do not understand the role of a modern councillor and do not allow staff to get on with the job. There is still a lack of trust between some councillors and members of staff. This has a destabilising effect on the business of the Council and a negative impact on its reputation. Whilst there has been clear improvement in the recent past, and a more co-operative and effective relationship between parties for the sake of the area, there is still some way to go before acceptable standards have been reached.
- 9 Currently there is good leadership being shown by the Chief Executive and Leader. They share a common agenda for the Council and work together well driving through many of the recent changes. However, there is considerable reliance on these two individuals which is difficult to sustain. In addition, there is limited operational experience in the senior management group and this exposes the Council to considerable risk.
- 10 Bromsgrove has recognised it needs to understand its performance as well as monitor and manage it. There are regular performance reports to managers and councillors and there is challenge within this process. However, performance management has yet to embed in the organisation, with operational managers regularly challenging each other, and performance improvement has not yet resulted from internal recognition, as opposed to external scrutiny. In addition, the Council does not manage complaints in a transparent and standardised way, and has no process in place for managing the performance of partnerships.
- There has been considerable progress in the past year that is recognised by both partners and staff. They have noticed and appreciated a different management style that engages and consults, both internally and externally. There has been significant improvement in financial management which is now assessed as adequate by external audit. There is also evidence of good achievements in community safety, street cleansing and recycling and the public appreciate the community events that are organised. The service on both benefits and planning has improved. However, whilst un-audited data shows positive trends in 2006/07 for some key areas, the baseline is still poor and improvements may not be sustainable. Audited performance for 2005/06 is unimpressive. The public will not have noticed much difference.
- The Council has set up a new customer service centre to deal with public facing services, but is not making the most effective use of the facility. While the top of the organisation is committed to improving services to the public, and many front line staff want to deliver this, there is still too much complacency from the rest of the organisation to the changes that need to be implemented to deliver this. Basic management information such as cost benchmarking is lacking and there is limited understanding of the process re-engineering that will be needed. The Council does not have clear or robust means to determine if it is getting value for money from its services. While the establishment of the customer service centre is a step in the right direction, there is still a long way to go before the vision espoused of 'customer first' delivers for the residents of Bromsgrove.

Areas for improvement

- 13 Place the customer at the heart of Council activity.
 - In order to do this the Council should:
 - base service planning and delivery on the outcomes of both evidence based needs assessment and inclusive consultation; and
 - make customer satisfaction a key deliverable for all managers and staff, and take robust and timely action to address dissatisfaction.
- 14 Develop and enhance councillor capacity in order that they can contribute effectively to the development of a high performing Council.
 - In order to do this the Council should:
 - develop the knowledge and strategic leadership skills of all councillors by establishing their training needs and implementing a comprehensive training plan. This should include opportunities for individual and group mentoring, exposure to how other councils do things and participation in leadership programmes; and
 - require professional working relationships between political groups and between councillors and officers.
- 15 Ensure that there are sufficient resources and capacity to deliver the breadth and pace of change required by the Council in order to deliver high quality services for local residents.
 - Establish the management capacity and skills to deliver the requirements of both corporate recovery and operational service improvements.
 - Integrate value for money into the culture of the Council and its partnerships enabling resources to be saved and redirected to support corporate priorities.
 - Use partnership working to enhance capacity and deliver shared priorities efficiently and effectively.
- 16 Ensure that performance management consistently leads to performance improvement.
 - Integrate performance management with both resource and risk management.
 - Use the scrutiny function to effectively hold the Executive to account particularly relating to major investments such as the spatial project.
 - Manage the performance of partnerships in delivering shared ambitions and priorities.

Summary of assessment scores

Headline questions	Theme	Score*	Weighted score					
What is the Council, together	Ambition	1	2					
with its partners, trying to achieve?	Prioritisation	1	2					
What is the capacity of the	Capacity	1	2					
Council, including its work with partners, to deliver what it is trying to achieve?	Performance management	1	2					
What has been achieved?	Achievement and Improvement	1	7					
Weigl	nted score		15					
СРА	CPA category							
*Key to scores								
1 – below minimum requirements – i	nadequate performance							

- 2 at only minimum requirements adequate performance
- 3 consistently above minimum requirements performing well
- 4 well above minimum requirements performing strongly

**Banding thresholds for determining CPA category

Category	Required score
Excellent	45-60
Good	36-44
Fair	28-35
Weak	21-27
Poor	20 or less

Context

The locality

- Bromsgrove District is in north Worcestershire, covering a large area of approximately 83.9 square miles. Ninety per cent of the District is greenbelt which poses issues for regeneration and housing policy. Despite its predominantly rural nature, road and rail transport routes are good. This contributes to a net commute out of the district of 9,469 people, primarily into Birmingham and local towns.
- The population of the district is 90,550. The population increased by 0.8 per cent between 2003 and 2004 (the joint highest in Worcestershire) mainly attributable to inward migration as a result of a number of large housing developments. It is also set to expand by a further 0.9 per cent between 2006 and 2010. The black and minority ethnic population (BME) is 3.3 per cent, which is low for the region and low nationally. There are 37,798 households in the district. Over 25 per cent of households contain only one older person and an estimated 6,964 households in the district have one or more members with identified special needs which is well above the national average.
- The economic picture of the district is generally very positive. The district ranks 293rd out of 354 Councils on the national index of multiple deprivation (2004) making the district one of the least deprived nationally. It has no wards in the top 20 per cent most deprived in England. Four thousand and fifty households are in receipt of housing or Council tax benefits in the district, one of the lowest figures in Worcestershire. The mean household income is £36,906 which is the highest in the County. The closure of the Longbridge car plant in April 2005 resulted in the loss of 5,850 jobs and contributed to increased unemployment levels in the district. However in the intervening period these have returned to a very low level of 2.5 per cent.
- There are two major areas of economic concern within the district, the redevelopment of the Longbridge site and Bromsgrove town centre. Bromsgrove and Birmingham Council's are working together to produce an Area Action Plan for the former MG Rover site. Local residents feel that Bromsgrove Town Centre needs a major overhaul to encourage local shopping and compete with neighbouring shopping centres. The number of VAT registered businesses in the district has also fallen in recent years although the Council is supporting new small business development.
- Eighty three per cent of households are owner occupier, the 11th highest figure in England and Wales. House prices are increasing faster than the national average with the average house price being £219,949. The provision of sufficient affordable housing is a key challenge for the Council. It has a target of 80 units of affordable housing a year for the next five years. It has been operating a planning moratorium on new development for the last three years with only affordable housing developments being built.

Generally, the district's population is healthier than the regional average. Teenage pregnancies increased marginally across Worcestershire from 2000-2003 but the overall rate is significantly lower than England as a whole. Levels of crime are generally reducing. Ninety seven per cent of residents feel safe during daytime and 70 per cent after dark. Drug offences are low.

The Council

- 23 Bromsgrove District Council has been a poor council for some time. It recognised that it was not providing the service to the public that it should and that it needed support and assistance rather than inspection. On this basis, in 2004, it was given a Corporate Performance Assessment (CPA) rating of poor and it entered into voluntary engagement with the Department for Communities and Local Government (DCLG). As a result this is the first corporate assessment that Bromsgrove have had. A progress assessment for the Council was completed in December 2005. It identified a positive direction of travel but some significant remaining challenges if the Council were to emerge from engagement in 2007. As a result of the assessment, six priorities for improvement were agreed. These formed the basis of the Council's recovery/improvement plan. The Council requested an early CPA against the new 2006 Framework in order to validate their Improvement Plan and to identify further areas of improvement.
- The Council has a majority Conservative administration, with 24 Conservatives, six Labour, six independents, two 'Wythall Residents Association' and one Liberal Democrat. The Council operates a modernised political structure with the Leader/Cabinet model, supported by three non-Executive Boards: Audit Board, Scrutiny Steering Board and Performance Management Board, the latter chaired by the Leader of the Opposition. There are also Planning, Standards and Licensing Committees.
- The Council has had a recent history of frequent changes in senior management and political leadership. It has a new Corporate Management Team (CMT), with a Chief Executive appointed in March 2007. At this time there was also a change of Leader. An experienced ex-London Borough Chief Executive has been appointed as a temporary Improvement Director in order to provide additional strategic support and mentoring to the Acting Chief Executive.
- 26 The Council supported the development of the Bromsgrove Local Strategic Partnership (LSP) in 2003. The partnership produced a Community Plan 2003 to 2010. However this plan is now considered to be out of date and is no longer driving the focus for strategic planning and delivery of services. The Council accepts that it needs to improve and clarify the roles of its partners within its plans. The re-launch of the Community Plan is seen as key to this, particularly with respect to the delivery of the Local Area Agreement (LAA).

The Council has a net budget of £11.313 million (2007/08), a planned Council Tax increase of 4.99 per cent and Government Grant of £4.730 million. The projected level of balances at end of financial year 2006/07 is £1.434 million. Capital expenditure levels from the Council's own resources have been set at £1 million per annum with capital reserves for 2007/08 standing at £13.165 million. The Council's reserves are predominantly from the sale of its housing stock to Bromsgrove District Housing Trust. In September 2006 the Council approved a medium term financial plan for 2007/08 to 2009/10. It plans to set a balanced budget for each of the next three years with annual planned council tax increases of 4.99 per cent. The Council employs 454 staff across all services.

What is the Council, together with its partners, trying to achieve?

Ambition

- 28 The Council is performing inadequately in this area. The Council is not working effectively with local residents and partners to develop and communicate its ambitions. The ambitions are not based on robust needs analysis. In general, leadership shown by councillors from all political groups is weak and whilst there are some signs of community leadership, it is inconsistent. The District does not have a functional Community Plan.
- The Council has made progress in defining its ambitions over the last year. Since May 2006 the Council has had a new Leader, Chief Executive and Senior Management Team. They have brought a focus to the organisation characterised by the development of a new corporate vision, values and objectives adopted by the whole Council. The Council's Vision is: 'Working together to build a District where people are proud to live and work, through community leadership and excellent services'. The Vision and the Values that underpin it: Leadership, Partnership, Equality and Customer First, have been developed through a change programme 'Building Pride'. The Council has developed four objectives; regeneration, improvement, sense of community and well being, and environment. This links with the recently revised priorities for the LSP.
- However, the Council has not engaged external stakeholders in the development of its vision or communicated it effectively. The Council's vision and values have been revised internally by councillors and senior officers. Contributions from the community, other stakeholders and staff have been limited, as they decided to use existing information, rather than undertake full consultation, in the interests of speed and efficiency. Until recently, the Council's strategic focus has been on re-building the Council to be fit for purpose. As a result the Council's ambitions for its communities are not yet fully developed. Partner organisations are unaware of the Council's vision and do not see how they fit into the Council's improvement plans. This means that the Council cannot be sure that its vision reflects the needs of local people and partners.
- 31 Analysis and intelligence of community needs is not well developed but improving. The Council has historically undertaken some needs analysis of its local communities. This was not robust or sufficiently evidenced based to enable it to inform the new corporate vision and objectives. The Council has not collaborated with partner organisations to assess local needs. However more recently the Council and its partners have undertaken some more robust analysis of older people's needs to inform the older people strategy. The Council has insufficient information to understand its local community.

- Consultation is not comprehensive and has limited impact. Consultations on the Council's vision were limited to a small number of local resident and stakeholder focus groups. Consultations with service users are not influencing service planning or delivery. However the Council has invested in improving consultation through a senior appointment and the adoption of consultation guidelines. It has actively engaged local people and communities in the Local Development Scheme. Vulnerable groups are now consulted through the Equalities and Diversity group. As a result the Council cannot be sure that it is delivering services which are important to local people.
- Political leadership by all councillors is not effectively underpinning the ambitions of the Council. The Council has a poor track record in providing clear leadership. Whilst the current leader has a strong leadership style and a clear vision for what he wants to achieve for Bromsgrove, councillors in general are not demonstrating the leadership associated with their role and are reluctant to embrace new developments. Consequently the absence of political leadership from councillors is inhibiting the delivery of its ambitions.
- The Council recognises the need to deliver community leadership but it is not demonstrating this consistently. Leadership has often focused on the interests and aspirations of individuals rather than a Council wide strategic approach. The 2007/08 planning process has been more strategically driven but it is too early to identify the outcomes from this. There is a willingness to take some difficult decisions but implementation is inconsistent. Community engagement is developing through two neighbourhood action zones although impact is as yet limited. Leadership for vulnerable groups is being demonstrated through the equalities and diversity forum. Overall however, this inconsistency means that the Council is not always providing effective leadership for the community it serves.
- Ambitions for communities are not fully developed or communicated through a Community Plan. The LSP agreed a Community Plan for 2003 to 2010. This is now out of date, it is not owned by the local community and not providing an overarching vision for the District. A new vision and priorities for the LSP have been developed although this has not been subject to full community consultation, ratification or publication. The vision and priorities are forming the basis of revisions to the Community Plan which links into the developing Local Area Agreement (LAA). This means that there is not a robust strategy in place for delivering ambitions in partnership with others.
- The Council is not working effectively with the County Council to develop and deliver its ambitions. Councillor relationships with the County Council are not effective, have not been for some time and are not improving. There is a level of antagonism between the District and County which is impacting on their ability to work together. There is a lack of trust at political level reinforced by recent disagreements about shared service proposals, local government re-organisation and plans for community engagement. Whilst this is not the sole responsibility of the Council, it has not taken active steps to resolve the situation. This has impacted on Bromsgrove's ability to deliver its vision which relies on a number of county functions.

14 Corporate Assessment | What is the Council, together with its partners, trying to achieve?

Prioritisation

- The Council is performing inadequately in this area. Although the Council has identified its priorities in consultation with others, they are sufficiently vague to enable most areas to claim they are a priority. Resources have started to be targeted towards some priorities but currently only a small proportion of the overall budget. As they are not sufficiently specific it may be difficult for the Council to justify disinvestment in areas. The Council is making progress in delivering in priority areas although this is not consistent, for example corporate objectives are effectively linked into business planning and development reviews for individual staff but not all partnerships contribute effectively to the delivery of these priorities.
- The Councils four corporate objectives are each underpinned with three year priorities (2007/2010). The key priorities for regeneration are Bromsgrove town centre, Longbridge and Housing. Improvement focuses on the priorities of customer service, reputation and performance. Sense of community and well being prioritises community influence and community events as a key way in which the Council can encourage social cohesion in the district. The corporate objective of the environment prioritises a clean district and planning.
- Corporate priorities are in place and influencing service planning but they are insufficiently specific to drive the redistribution of resources. Corporate priorities reflect sub-regional and local issues although links with national policy frameworks are tenuous. They are based on the outcomes of previous consultations, stakeholder events, public focus groups and the work of staff champions. They are being integrated into corporate systems and are beginning to provide a focus for business planning and performance management. However the corporate priorities do not provide sufficient focus for service management, allowing most interests to claim they are a priority. The priorities are not sufficiently specific to allow a clear identification of non priorities which will support decisions around areas of disinvestment.
- The Council is underpinning its priorities with additional resources but this is not yet comprehensive and limited to small amounts. The Council can demonstrate additional capital and revenue investments in priority areas such as street cleaning, ICT infrastructure and customer service. However there is less evidence of disinvestment in areas which are not prioritised. For example a reduction of posts in Leisure has not released resources which have subsequently been reinvested into priority areas. A commitment to moving money towards priorities is evidenced in the 2007/08 budget process but it is too early to identify the full impact of the changes. The transfer of additional resources is resulting in service improvements in priority areas.

- The Council is taking effective action to deliver improvements in priority areas. In areas where the Council has been required to focus through voluntary engagement there are clear targets that have led to corporate improvements, for example, in waste management. Progress is being made in the delivery of regeneration, which is another Council priority. The Council has focused with its partners on the opportunities offered by the regeneration of the former MG Rover site for which an area action plan has been developed. The plans should enable the Council to deliver more affordable housing allowing it to achieve its own targets and meet the demands of local people. Whilst the Council is delivering around 75 new affordable homes per year, against a target of 80, it is constrained by a planning moratorium on new housing, in place for the last three years. There is less progress with the redevelopment of Bromsgrove town centre although the Council is currently seeking to identify a preferred partner to drive the redevelopment planning forward.
- Partnership working is not contributing to the delivery of the Council's objectives. Partner organisations report a more positive approach to partnership working but political engagement continues to be limited and communication inconsistent. Partnership working with the Bromsgrove Housing Trust and many Parish Councils has historically been poor and is still not fully effective. The LSP has been ineffective for a number of years and whilst action has been taken to improve this it is too early to demonstrate impact. In contrast the crime and disorder partnership has consistently worked effectively and contributed to reductions in most areas of crime. Proactive working with partners increases both capacity and the resources available to deliver priorities.
- The Council is not demonstrating to the public and its partners that it is taking timely and transparent decisions. Public and partners feel that the Council is overly bureaucratic in the way it deals with issues. Whilst there is some evidence that the Council is willing to listen it continues to be poor at providing feedback to partners and local residents about decisions and plans. The new corporate priorities have not yet been effectively communicated to local people and partners. A lack of feedback on decisions following consultation is affecting the public's trust and confidence in the Council.
- The Council has taken effective action to improve its corporate systems to underpin the delivery of corporate priorities. Business and performance management has been developed through a business planning framework. A customer first strategy and communications strategy are now in place. The Council has recently developed a plan for managing its assets although this is not yet embedded in the operation of the organisation. Alignment of strategies is partial because a strategic framework has only recently been agreed. Performance and financial frameworks are at an early stage of integration, with 2007/08 planning being the first time the integrated approach has been used. In addition, planning and budget cycles have not been linked, although the new planning cycle for 2007/08 seeks to address this. The integration of corporate systems via the 2007/08 planning cycle is leading to an effective focus on the delivery of corporate priorities.

- **16** Corporate Assessment | What is the Council, together with its partners, trying to achieve?
- 45 The Council is positively engaging with black and minority ethnic groups (BME) and vulnerable groups. The Equalities and Diversity Forum is providing an effective way for the Council to listen to the needs of minority and vulnerable groups. The Business plans for 2007/08 contain information on equalities and diversity and how the service area will meet equality standards. The Council has effectively raised the profile of equality amongst councillors who have benefited from diversity seminars although some key partners are unaware of the Equality and Diversity Forum and have not made use of this resource. As a result of a focus on this area the Council has a better understanding of the specific needs of these groups.

What is the capacity of the Council, including its work with partners, to deliver what it is trying to achieve?

Capacity

- The Council is performing inadequately in this area. There is insufficient councillor and officer capacity to deliver the pace and breadth of change required by the Council. With the exception of improved officer training, actions taken to improve capacity are temporary or are too early to be able to demonstrate impact. Some issues relating to the effective management of the workforce and reputation management have not been addressed.
- 47 Councillor capacity is weak, lacks effective challenge and is too reliant on a few individuals. Councillors are struggling to come to terms with the modern councillor role. They are not working effectively together to drive and focus on improvement. There remains a level of distrust between officers and politicians. Some councillors continue to demonstrate obstructive and critical behaviour and are too focused on the details of operational management. The pace of councillor development has been slow and attendance at training is generally poor. There is limited strategic debate taking place at full Council with a lack of clarity on political and managerial roles and responsibilities. Councillor understanding and willingness to engage with ethical governance is variable and the Council is actively investing to ensure consistently high standards. As a result the lack of capacity amongst councillors is inhibiting the Council's recovery and the delivery of corporate objectives.
- 48 Capacity at senior management level is fragile and under-resourced. While the senior management team is predominantly new and has limited experience of corporate management at this level, it has demonstrated that it has the skills to drive improvements both to corporate systems and the culture of the organisation. The Improvement Director is highly experienced, providing support to drive improvements in operational service delivery, but he is an interim appointment. While there have been some new middle management appointments, there is still insufficient experience of good strategic and operational service delivery at the top of the organisation to provide the challenge and deliver the extent and pace of change required of the Council.

- **18** Corporate Assessment | What is the capacity of the Council, including its work with partners, to deliver what it is trying to achieve?
- 49 Staff and management capacity to deliver service and corporate improvements is limited. Service management lacks consistency and contributes to anxieties within the changing services. There is evidence of silo working within the Council which impacts on its strategic focus. The loss of key posts through sickness or a failure to appoint have a direct impact on performance, for example, in planning and benefits. A number of staff are new and inexperienced limiting their immediate impact on service delivery. Insufficient staff capacity is preventing the Council from delivering its corporate objectives and achieving service improvements.
- Financial planning has improved considerably in recent years, but is still not yet supporting the delivery of corporate priorities or value for money effectively. The medium term financial strategy is not clearly linked to the Council priorities, nor does it provide a means of delivering those priorities. It does not seek to provide opportunities for disinvestment and does not look beyond three years. However, through the 2007/08 planning process the Council has begun to identify linkages and look for areas of disinvestment. The Council recognises that it cannot demonstrate value for money. It does not have sufficient management information to form a view about which services are not providing value for money. A more robust approach to strategic planning and the integration of financial and performance information during the recent planning cycle has improved the Council's ability to meet its stated priorities and deliver value for money.
- 51 Key issues relating to staff management have not been addressed effectively. There is no workforce planning and little progress with the development of a single status review. Consultation with unions over policy initiatives and single status is ineffective. The effective management of poor performance and sickness absence is not yet evident throughout the organisation. Long-term personnel issues are still to be resolved. A new performance development review system has been introduced but it is too early to identify changes as a result of this. This limits the capacity of the organisation to deliver its objectives.
- The Council does not manage its communications with the public effectively. Public, partners and Council staff report that frequent negative press reports and public bickering by councillors has a significant impact on the Council's already poor reputation. Poorly run Council meetings demonstrate a clear lack of understanding of the constitution and contribute to a poor perception from the public gallery. The Council is reactive to dealing with external communications with little investment in this area. The Council's poor reputation is having a negative impact on public confidence and detracting from its ability to deliver services effectively.

- The Council is investing extensively in its information and computing technology (ICT) infrastructure but benefits realisation is uncertain. It is currently investing £6 million in its spatial project which is designed to develop a single source of customer information and increase the efficiency of business processes. However, e-government targets for 2005 have still not been achieved. The spatial project is ambitious but it is not fully understood by councillors and officers. The achievement of benefit realisation such as significant cost savings remains uncertain.
- Senior management is increasingly providing positive leadership. Both staff and partners report that senior managers are providing a positive style of leadership with a clearer business focus and reporting lines. The Chief Executive is described as open and accessible and this is seen by staff to be contributing to improvements in morale. Recent back to floor visits and improved visibility of managers have been valued by staff and managers. There is a view amongst stakeholders that senior managers are ambitious to move the Council forward and that leadership has improved.
- 55 Effective action has been taken to improve political consensus and cross-party working but significant challenges remain. Senior councillors have had external support to change behaviour and engage in cross-party working. The Leader has introduced regular meetings with the leader of the Opposition which has contributed to an improved political consensus. Councillors, from all political groups, are being engaged in the work of non executive committees such as scrutiny, PMB and audit. However there is infrequent contact between the ruling and independent group due to a lack of trust and personal animosity and this is unlikely to improve in the immediate future, to the detriment of more effective working.
- The Council has invested effectively in training for staff. The Council has put in place realistic building blocks to improve staff capability and increased its annual training budget. All managers have signed up to the Council's own management charter; 'The Bromsgrove Way' which is underpinned by a management training programme designed to improve services and deliver corporate priorities. Staff acknowledge that there is improved access to both technical and corporate training such as Customer First training. Effective training is resulting in improvements in both staff capability and capacity.

20 Corporate Assessment | What is the capacity of the Council, including its work with partners, to deliver what it is trying to achieve?

Performance management

- 57 The Council is inadequate in this area. Performance management is not effectively driving sustained improvements in services with outcomes which can be recognised by the public. Target setting has not been SMART¹; this has been recognised by the Council and is being reviewed. Whilst there is increasingly effective monitoring of performance by senior managers and councillors, as part of an established performance framework, this is not embedded in the culture of the organisation. Corporate systems for the management of partnerships and complaints are not developed.
- Performance management is not leading to consistent and sustained improvements in service delivery. Whilst monitoring systems are identifying underperformance, the development of plans which lead to sustained performance improvements is inconsistent. The Performance Management Board is offering some challenge to poorly performing areas. The impact of the Board is mixed with issues such as complaints being raised repeatedly without resolution. Exception reports identify that actions to improve performance are not always implemented or have been ineffective.
- 59 Target setting is ineffective but improvements are planned for the 2007/08 business planning process. Action plans do not consistently include robust SMART¹ targets. Targets for 2006/07 are not clearly focused or linked to any priorities. A number of improvement plan targets have had to be reviewed because they are too challenging. Benchmarking is informing target setting in some areas such as planning but it is not embedded across the organisation. Targeted outcomes have been too ambitious and difficult to measure, for example, 'Develop councillors to be effective leaders'. This means that the way the Council sets targets is not leading to achievable improvements which focus on outcomes for local people.
- Performance management is not yet integrated with resource and risk management. The 2007/08 planning cycle has been the first time that the Council has sought to integrate financial and service planning. It does not routinely bring together information on financial performance, service indicator analysis and key improvement actions. Performance management is not integrated with risk management; although progress is being made. Risk management is weak but developing and there are appropriate strategies in place for bottom-up risk management. Until this approach is embedded the impact of risks and resources, on the performance of services, cannot be assessed effectively.

¹ SMART- Specific, Measurable, Achievable, Resourced, Timed.

- 61 Complaints management is ineffective. Complaints management is insufficiently robust to support performance improvement as there is no systematic means of managing the process. Whilst there is a complaints policy, departments are not keeping within the guidelines. There is a lack of leadership at both councillor and officer level to address this, although there has been a decision taken to purchase software which should enable better complaints monitoring and management in the future. Ineffective complaints management means that the Council is missing opportunities to improve services for local people.
- Performance management of partnerships is not in place. The Council acknowledges that it has had insufficient capacity to develop performance systems for partnerships. There is no evidence of a consistent approach to collective review of performance across partnerships. However, as part of the review of the LSP, there are plans to introduce performance systems. This means that the Council does not know how effectively and efficiently partners are contributing to the delivery of its corporate objectives.
- Performance management of corporate projects is inconsistent which contributes to slippage against published targets. A range of key developments and projects designed to support the recovery of the Council have been delayed over the last year. For example, the training needs analysis for councillors was delayed from August 2006 to February 2007 because forms were not returned. The sickness absence policy was delayed from September 2006 to December 2006. Councillors are not monitoring projects effectively, for example, a working group of three councillors is monitoring the implementation of the spatial project but it has no terms of reference or formal reporting lines.
- A corporate performance management framework has been developed and implemented across the Council. Performance improvement is identified as a key priority for development. Performance management systems have been revised to take into account the resources and capacity available in the Council to deliver them. The Performance Management framework links the Council plan, service business plans and individual staff plans. The corporate improvement plan links into the framework and is delivered through service business plans. The performance framework is leading to an increased focus on performance improvement across the organisation.
- 65 Extensive performance reporting and monitoring is in place. Progress against the Council's improvement plan is monitored both internally and externally by the Government monitoring Board. The Council has identified the top 45 performance indicators which are monitored on a quarterly basis by the executive cabinet and the performance management board where underperformance is challenged. Portfolio holders and officers work closely to monitor service delivery. Portfolio holders are briefed by heads of service and the corporate director services fortnightly.

- **22** Corporate Assessment | What is the capacity of the Council, including its work with partners, to deliver what it is trying to achieve?
- Performance is challenged at a senior level but this has yet to be embedded in the culture of the organisation. Effective performance monitoring at a corporate level has only recently been introduced and impact is variable. Action is being taken to raise awareness of performance management within departments but this has yet to be embedded and is contributing little to service improvement. Councillors are not consistently able to identify important performance issues and have the level of debate required to drive performance management. There remains a focus on past mismanagement with little reference to the priorities for improvement and how to interrogate these. The increased challenge to underperforming service areas is resulting in improvements in performance.

What has been achieved?

Achievement and improvement

- The Council is inadequate in this area. Performance in 2005/06 was poor in the majority of service areas. Achievements were predominantly internally focused and not about outcomes for local people. Performance improvement has been slow and in some areas there is insufficient evidence that improvements can be sustained. The Council is investing in improvement and over the last year improving senior management and corporate focus have resulted in tangible improvements in both corporate and service performance.
- The Council's overall performance in 2005/06 and first quarter of 2006/07 was poor. Forty three per cent of performance indicators were comparable to the worst performing district Council's in England. These included a poor performance in street cleaning, planning and benefits. Many achievements are internally focused and would not be noticed by the public. Achievements identified for 2005/06 in the 'Council Results' document frequently focus on internal processes such as agreeing a programme for future planning work. Other listed achievements reflect what might normally be expected of any council such as delivering training as required by legislation or delivering Statutory Accounts within deadline. Whilst these do reflect progress for the Council there are limited outcomes for the public.
- Performance improvements are slow and have not been sustained in key areas. In 2005/06, 57 per cent of performance indicators failed to achieve the Council's own target. Performance in 44 per cent of indicators declined compared to the previous year including key areas such as sickness absence. Planning performance fell and the Council has been designated as planning standards authority for 2007/08 in one area. The Council has been slow in addressing significant issues with performance in the benefits service. Performance with respect to corporate health is improving slowly but remains poor. The Council accepts that some of its original targets were too ambitious and that pace of change is being constrained by availability of resources.
- There is a lack of customer focus throughout the middle of the organisation. Whilst councillors, managers and frontline staff identify the importance of customer focus this is not embedded in the delivery of services. There has not been a strong customer focus culture across the whole Council since 2003. Low staff morale and reduced councillor and management capacity to focus on customer service have contributed to this. Local residents and partners report that Council departments are often unresponsive. The culture of the Council continues to be delivering services which it thinks customers need. Whilst a customer first strategy and training has been introduced its impact is limited and some staff dealing directly with the public have had no training in customer care. A lack of customer focus means that the Council does not have a clear view of how its services are regarded.

- The potential benefits of the customer service centre (CSC) have not been fully realised. The Customer Service Centre was established quickly creating some significant issues. In particular systems are still not in place to bring CSC and back office functions together effectively. Whilst customer feedback about the CSC is generally positive there is a lower degree of confidence about the service provided by the appropriate Council departments after initial contact. Some residents who did not live in Bromsgrove Town were unaware that the CSC existed. There is inconsistent support to fully realise the benefits of the CSC.
- The Council is achieving well in a small number of priority areas. The Council has improved its financial management which is now rated as adequate by external auditors. The Council is working effectively with partners to reduce some aspects of crime. There has been a 32 per cent decrease in headline crime figures over the last three years although vehicle crime remains high. The Council has put in place a recycling infrastructure that is allowing it to exceed government standards albeit at high cost. Recycling rates have increased significantly to 47 per cent. Improvements in financial management resulted in the closure of the 2005/06 accounts on time.
- The Council's overall performance is now improving, but from a very low base. The Council has also maintained a strong focus on its improvement activities, with 79 per cent of the actions in the Improvement Plan currently on target or less than one month behind. Unaudited data provided by the Council provides evidence of further improvements across a range of service areas. In the second and third quarters of 2006/07 there have been significant improvements in aspects of benefits performance and the current speed of dealing with minor and other planning applications is now assessed to be comparable to the best performing district councils in England. The Council has received external accreditations for aspects of service quality including QUEST accreditation for leisure facilities and ISO 9000 in Environmental Health.
- 74 Community events are well received but some residents feel that they are too focused on Bromsgrove Town. The Council is prioritising community events as a means of encouraging social cohesion. Local people praise the street theatre, the fireworks display and summer activities for children. However, it is noted that many of the events are based in Bromsgrove Town and residents from other parts of the district are not always aware of them. Some residents were unaware of the Artrix centre and the programme of entertainment it provides. Community events will not impact on social cohesion for the district if they are seen to be inaccessible to some residents.
- The Council is investing appropriately to improve performance in corporate functions. Robust and timely financial information is available to service managers. Managers are supported in the implementation of corporate policies such as the management of sickness absence. The implementation of consultation and communications strategies is being supported by additional staff appointments in order to deliver key improvements in customer services and reputation management.

The Council is investing in underperforming service areas. Capital funding is being allocated to further improve waste collection and recycling. There has been additional investment in new staff and vehicles for street cleaning. Capacity issues in strategic housing, planning and development control have been addressed through additional staff appointments. The Council is investing effectively in the building blocks in order to support its recovery and deliver service improvements.

Appendix 1 - Framework for Corporate Assessment

- 1 This corporate assessment was carried out under section 10 of the Local Government Act 1999, under which the Audit Commission has power to inspect local authorities' arrangements for securing continuous improvement. The results of the corporate assessment contribute to the determination of the overall CPA category for an authority, which the Audit Commission is required to assess and report on under section 99 of the Local Government Act 2003.
- 2 The Council's self assessment provided a key resource in focusing the assessment activity which included consideration of:
 - key documentation, including the Council's improvement plan;
 - updated performance indicators and performance data; and
 - interviews and meetings attended.
- 3 The assessment for Bromsgrove District Council was undertaken by a team from the Audit Commission and took place over the period from December 2006 to June 2007.
- 4 This report has been discussed with the Council, which has been given the opportunity to examine the Audit Commission's assessment. This report will be used as the basis for improvement planning by the Council.

Appendix 2 - Improvement Plan: 2007/08 Update

1	Expected Outcome	Regeneration of Bromsgrove Town Centre									
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources						
1.1	Public support for plans	Area Action plan (Issues and Options) Developed	31 March 08	PS	Project manager and Marketing manager 2007/2008 Budget						
1.2	Work Commenced	Public and Trader Consultation	31December 07	PS	Recruitment Consultar 2007/08 Budget.						
Progres	ss Update										
1.1											
1.2											
1.1											

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
1.1.	Public Support for Pl	ans													
1.1.1	Engage consultants to commence work on AAP	PS													
1.1.2	Commence process of identifying development partner	PS /PM													
1.1.3	Recruit expertise to support project management	PS													

Appendix 2 - Improvement Plan: 2007/08 Update

Ref.	Action	Lead	>			ı,	· ·	i	-		ے	٠	y	e	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
1.1.4	Arrange meetings of town centre project group	PS													
1.1.5	Set up officer project team	PS													
1.2.	Work Commenced	1							ı		l				
1.2.1	Undertake baseline study.	PS													
1.2.2	Consultation with community.	PS													
1.2.3	Prepare issues and options document.	PS													

2	Expected Outcome	Creation of Employment Opportunities, Housing and Communit facilities.													
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources										
2. 1	10,000 Jobs created [over a ten year period]	Agreement of Bromsgrove District Council Area Action Plan	31 May 2007	PS	Approved Budget Planning Team										
2.2	500 to 700 Houses (35% to be affordable).	Agreement of Bromsgrove District Council Area Action Plan	31 May 2007	PS	Approved Budget Planning Team										
2.3	Community Facilities providing a sense of	Agreement of Area Action Plans by both authorities.	31 March 2007	PS	Approved Budget										

Priori	ity: CP2 Longbridge				
2	Expected Outcome	Creation of Employm	ent Opportunities	, Housing	and Community
Ref.	Measures of Success	facilities. Actions Required	Timescales	Lead	Resources
- 1011	community for new residents.	, tottono i toquilou			Planning Team
Progres	ss Update	<u> </u>	<u> </u>		
2.1					
2.2					
2.3					

Ref.	Action	Lead	<u>></u>	0	ď	ڼپ	·	ن ن	ċ.	ъ.	Ë	۲.	>	Je	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
2.1, 2.2,	Creation of Employm Mixed Housing														
2.3,	Community Facilities	8													
2.1	Respond to Preferred options document	PS													
2.2	Submit Final Plan	PS													
2.3	Public Consultation on submission Plan	PS													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
2.4	Pre Examination Meeting	PS													
2.5	Examination of Final Plan	PS													
2.6	Receipt of Binding report	PS													

	Priorit	ty CP3: Housing				
Page	No.	Expected Outcome	Delivery of affordable	housing target [24	40 units]	
מַב	Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
108	3.1	Deliver 80 units of affordable housing. 240 total in three years	Support applications for affordable housing on Areas of Development Restraint.	2007-2008	AC/ DH	Planning Team Facilities Management Group Asset Management Strategy
	3.2	Modernised Strategic Housing Service 2 star with promising prospects for Improvement	Quarterly review of Strategic Housing Plan.	31 December 2007	AC/ DH	Strategic Housing Team
	Progres	s Update				
	3.1					

Priority CP3: Housing												
No.	Expected Outcome	Delivery of affordable	housing target [2	40 units]								
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources							
3.2												

	Ref.	Action	Lead													Corrective Action
				July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
י כ	3.1.	Deliver 80 units of aff	ordable	hous	ing a	yea	r				I		I			
100	3.1.1	Complete RSL Preferred Partner selection and achieve sign up to partnership agreement.	AC													
	3.1.2	Develop draft Affordable Housing Guidance for developers and RSL's in advance of LDF process.	AC													
	3.1.3	Support & encourage appropriate RSL bids to the Housing Corporation for the 2008 – 2011 allocation round.	AC													
	3.1.4	Undertake performance clinic on affordable housing policy.	AC													
	3.1.5	Fund and support Year 2 update of the SHMA Sub Regional Housing Market Assessment.	AC													

Ref.	Action	Lead													Corrective Action
	, touch		July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
			,	4	0,		_							ſ	
3.2.	Modernised Strategic	Housing	g Ser	vice											
3.2.1	Hold a Strategic Housing 'Ongoing Improvement' Team Away Day to undertake self- assessment and identify further improvement actions.	AC													Note: needs to include benchmarking for VFM purposes.
3.2.2	Complete full year schedule of customer satisfaction surveys.	AC													
3.2.3	Complete Equality and Diversity Impact Assessments scheduled for 07 / 08.	AC													
3.2.4	Implement contractor procurement framework for DFG's	AC													
3.2.5	Achieve a minimum of 3 Strategic Housing 'Raising Awareness' Roadshow events.	AC													
3.2.6	Implementation of Sub Regional Choice Based Lettings Scheme.	AC													
3.2.7	Support and progress implementation of Hostel De-Commissioning strategy with BDHT through completion of sale of Wythall hostel site.	AC													

Priority CP04: Customer Service 4. Expected Outcome Increase in overall customer satisfaction with the Council													
4.	Expected Outcome	Increase in overall cu	ıstomer satisfactioı	n with the	Council								
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources								
4.1	2010 Best Value survey to assess Customer	The Annual Customer Panel Survey.	Contract let	НВ	Approved Budget								
	Satisfaction with the Council.	Delivery of Customer Standards.	Service Business Plans										
		Improvements to performance indicators that drive customer perception.	Development of Corporate Indicators set.		Service Business Plans linked to Budget process								
4.2	Customer Satisfaction with the Customer Service	The Annual Customer Panel Survey.	Contract let	НВ	Approved Budget								
	centre	Quarterly Telephone survey A5 Feed back sheets	Every quarter 2007- 2010		Customer Service centre Staff								
		Improvements to performance indicators that	Every quarter 2007- 2010		Service Business plans linked to Budget process.								
		drive customer perception.	01 April 2007 and review each year										
4.3	Annual Satisfaction survey	Quarterly feedback from	31 march 2008 and	CF/HB	Equalities Assistant								
	of the equalities forum.	Equalities Forum [minutes to CMT]	each subsequent year.		Capacity Building Funding								
Progre	ss Update	1	<u></u>		"								
4.1													

Priority CP04: Customer Service												
4.	Expected Outcome	Increase in overall cu	stomer satisfaction	n with the C	Council							
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources							
4.2												
4.3												

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
4.1.	Overall Customer sa	tisfaction	<u> </u> 												
4.1.1	Agree customer survey	НВ													
4.1.2	Undertake survey	НВ													
4.1.3	Report survey	НВ													
4.1.4	Review customer standards in business plans	НВ													
4.1.5	Agree published set with CMT and Cabinet.	НВ													
4.1.6	Develop posters for internal display.	НВ													
4.1.7	Launch with press and Internet.	НВ													
4.1.8	Review corporate indicators for customer focus.	НВ													
4.1.3	Agree new set with Cabinet.	НВ													
4.1.4	Publish in Council Plan	НВ													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	along with Customer Standards.														
4.1.5	Customer Service Peer Review and Update of Customer First Strategy.	KD													
4.1.6	Establish Corporate Customer First Project Team and quarterly meetings thereafter.	НВ													
4.2	Customer Satisfactio	n with C	ustor	ner S	Servio	e Ce	entre								
4.2.1	Draw up suitable questions and conduct telephone survey	DP													
4.2.2	Review feedback to improve service delivery	DP													
4.2.3	Draw up suitable questions and establish timetable for using feedback sheets	DP													
4.2.4	Review feedback to improve service delivery	DP													
4.3	Annual Satisfaction of	of Equali	ties F	orun	n										
4.3.1	Training Needs Analysis (TNA) of forum members to identify training needs	CF HP				_		_	_						
4.3.2	Develop and deliver a training programme for forum members	CF HP													
4.3.3	Introduce impact assessment monitoring	CF													

Ref.	Action	Lead												(I)	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar	Apr.	Мау	June	
	and critical challenge roll to forum agenda														
4.3.4	Develop robust reporting mechanism between forum and management team	CF													
4.5.6	Prepare and undertake satisfaction survey within the Forum	CF													
4.5.6	Feed back analyse and improve in accordance with survey findings	CF													
4.5.7	Engage forum in participatory budgeting and feedback results	CF HB JP													

CP5 :	Reputation				
5	Expected Outcome	External Recognition	of the Council's In	nprovemer	nts
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
5.1	Fair CPA rating	Annual Direction of Travel Report by Audit Commission.	31 March 2009	НВ	Approved budget [£350,000 from Reserves].
5.2	Five charter marks	Five teams selected and Action plans developed.	31 March 2010	НВ	Customer First Officer
5.3	Positive Media Coverage.	Weekly report to CMT on Press Coverage	On-going	НВ	Communications and Customer First manager.
		Percentage of Positive Press Articles and reduction in	On-going	НВ	As above

CP5 :	Reputation												
5	Expected Outcome	External Recognition	External Recognition of the Council's Improvements										
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources								
		reactive press releases.											
		Percentage of residents who	On-going	НВ	As above								
		remember seeing Together Bromsgrove.	On-going	НВ	As above								
		Percentage of Press coverage that refers to Councils Priorities.	On-going	НВ	As above								
5.4	Brand Recognition % of residents who recognise the Council Brand	Brand Action Plan	2008/09		Graphic Designer Post [2008/09 Budget Bid]								

Progress Update	
5.1	
5.2	
5.3	
5.4	

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
5.1	Fair CPA Rating				l	1				I	I	I	II.		
5.1.1	Formally report CPA score to Cabinet and PMB.	НВ													
5.1.2	Formally report Improvement Plan to Cabinet.	НВ													
5.1.3	Link Improvement Plan to CPA recommendations.	НВ													
5.1.4	Link Improvement Plan to Council Plan.	НВ													
5.1.5	Review progress against Plan each month.	НВ													
5.1.6	Update Improvement Plan for 2008/09	НВ													
5.2	Three Charter Marks (original	ly five	e, bu	t red	uced	in n	umbe	er on	basi	s of e	exter	nal a	dvice).
5.2.1	Investigate "experience" of gaining Charter Marks.	НВ													
5.2.2	Report to CMT on requirements and teams to go forward for CM.	НВ													
5.2.3	Establish working group.	НВ													
5.2.4	Meet every month to drive progress.	НВ				_									
5.2.5	Progress report to CMT.	НВ													
5.3	Positive Media Covera	age	•		ı	•	•	•	•	•			•	•	
5.3.1	Comms Planner to CMT each week.	НВ			_										
5.3.2	Comms stats reported to	НВ													

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
				٩	0)		_			"	_	*		7	
	CMT, PMB, Cabinet each month.														
5.3.3	Weekly review meeting with Comms Manager and ACE.	НВ	_	_	_	_	_	_	_						
5.3.4	Customer survey results on reputation.	НВ													
5.3.5	Review of Communications Strategy reported to Cabinet with updated action plan.	НВ													
5.3.6	Regular and issue specific press briefings.	НВ													
5.4	Brand Recognition														
5.4.1	Framework contract established with single supplier for graphics.	НВ													
5.4.2	Action plan for delivery of style guide implemented.	НВ													
5.4.3	Budget bid for graphics support updated.	НВ													
5.4.4	Bid approval?	НВ													
5.4.5	Successful recruitment process.	НВ													

CP6:	Performance				
No.	Expected Outcome	Overall basket of Pl's	Comparable to an	Excellent	Rated Council
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources

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No.	Expected Outcome	Overall basket of Pl's Comparable to an Excellent Rated Council										
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources							
6.1	75% of PI's above the median	Annual Council Report	31 March 2009	НВ	Performance Plus Officers and Corporate performance Team.							
6.2	Fair CPA rating	Annual Direction of Travel Report by Audit Commission.	31 March 2009	НВ	Approved budget [£350,000 from Reserves].							
6.3	Improved Benefits Service to Level 3 Service	Quarterly reports on progress	31 March 2008	JP	Additional staff funded through Approved Budget.							
Progre	ss Update	,		-11								
6.1												

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
6.1	% of Pl's above the mo	edian													

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
6.1.1	Programme of performance clinics undertaken.	BR													
6.1.2	Budget bids for priority indicators that require resourcing.	HoS													
6.1.3	Monthly reporting of PIs to CMT, Leaders and Cabinet.	НВ													
6.1.4	Annual Report to Full Council.	НВ													
6.2	Fair CPA Rating (see	also CP	5)	1	•	•									
6.2.1	Audit Commission Direction of Travel statement in draft.	НВ													
6.2.2	Develop communications plan.	НВ													
6.2.3	Publish results and implement plan.	НВ													
6.2.4	Make appropriate changes to Improvement Plan.	НВ													
6.3	Improved Benefits		•	•		•									
	Service.														
6.3.1	Complete formal resource level agreement with CSC	JP													
6.3.2	Implement recovery action on overpayments in line with management recommendations	JP													

Ref.	Action	Lead			_		_							4)	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
6.3.3	Review secure post room operation	JP													
6.3.4	Commence monthly review meetings with ICT to develop support timetable for key periods of year	JP		_											
6.3.5	Achieve targets as set out in Business Plan	JP													
6.3.6	Further develop partnership working with 3 rd Age project	JP													
6.3.7	Develop mobile working to improve speed of turnaround for collection of information and enhance customer contact and accessibility to community	JP													

CP7 :	Community Influence	е			
7	Expected Outcome	Better neighbourhoods	through improved co	mmunity en	gagement
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
7.1	% Increase in the Publics ability to influence the Council	Area Committee Pilots and evaluation of two current pilot schemes.	30 September 2007	НВ	Approved Budget.
7.2	Senior Mgmt Attendance at PACT Meetings	CDRP Tasking meetings	Already In place with annual review.	НВ	Members, Senior Officers and the Community Safety team.
7.3	Neighbourhood Wardens	Review & Revise the service	On-going	JG	Mainstream Funding

7	Expected Outcome	Better neighbourhoods	through improved co	mmunity er	ngagement
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
		delivery to increase % of time walk the ward.			2008/09.
7.4	Percentage increase in the ability of minority groups to influence the	Achieve Local Government Equalities Standard [BV2a] at level 3.	30September 2007	CF/HB	Capacity Building Fund.
	Council.	Equalities Action Plan			
7.5	Percentage increase in the ability of Parish	Feedback at quarterly Parish Forum Meeting	30 September 2007	НВ	Corporate Communications Policy
	Councils to Influence the Council	Development of Council Guidance on Parish Plans and link to LSP Board.			and performance Team.
Progres	ss Update				
⁷ .1					
7.2					
7.3 7.4					
7.4 7.5					

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
7.1	Area Committee pilots	(probab	le exp	oansi	on of	two))								

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
7.1.1	Capacity Building evaluation.	НВ													
7.1.2	Budget bid for further expansion.	НВ													
7.1.3	Quarterly overview meeting with CEO, ACE, Leaders	НВ													
7.1.4	Develop delivery plan for further roll out.	НВ													
7.1.5	Deliver plan.	НВ													
7.2	PACT Meetings		•		•	•	•		•						
7.2.1	Continue with regular programme of meetings.	GR													
7.2.2	Complete annual review of PACT and report to PMB.	GR/HB													
7.2.3	Take corrective actions based on review.	GR/HB													
7.3	Neighbourhood Ward	ens						•							
7.3.1	Review the Current delivery of the Warden service across the district to establish current/future demand.	JG													
7.3.2	Produce a Committee report to advise on the future improvements/funding requirements for the service.	JG													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
7.3.3	Submit a PID form as part of the 08/09 budget process.	JG													
7.3.4	Agree a set of BVPI's (ASB) & local PI's for the warden service to monitor performance, service delivery and ASB levels with in the District.	JG													
7.3.5	If the Budget submission is successful, advertise the posts, implement the revised service delivery structure and commence Performance monitoring.	JG													
7.4	BME Influence		•	•											
7.4.1	Set up Disabled users group	CF													
7.4.2	Set up development workshop for top key managers across the Council to progress self assessment process and link this to the business planning and performance management process	CF													
7.4.3.	Deliver Local Labour Market Survey	CF													
7.4.4	Deliver Training to staff and members in accordance with the	CF													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	Equalities and Diversity training plan														
7.4.5	Review existing provision and re-draft an up to date Equal Opportunities Policy taking account of the law and the inclusive equalities scheme.	CF													
7.4.6	Train officers with responsibilities with the policy	CF													Will be completed in May.
7.4.7	Deliver in respect of the Level 3 Equalities Action Plan	CF													
7.5	Parish Council Influer	nce (and	Pari	sh Co	ounc	il Cha	arter)							
7.5.1	New consultation officer in post.	НВ													
7.5.2	Guidance for "adoption" of Parish Plans developed and approach to Charter.	НВ													
7.5.3	Consultation with Leader's Group.	НВ													
7.5.4	Consultation with Parish Councils.	НВ													
7.5.5	Formal adoption by Council.	НВ													

CP8 : (Community Events				
8.	Expected Outcome	Increased participation	on and satisfaction	with event	ts programme.
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources

CP8:	Community Events				
8.	Expected Outcome	Increased participation	on and satisfaction	with eve	nts programme.
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
8.1	Percentage satisfaction with overall cultural offer [2010 BV Satisfaction Survey]	The Annual Customer Panel Survey 2 % per annum growth in participation rates.	30 September 2007	НВ	2008/09 Budget [Possible Budget realigning]
8.2	Resident's satisfaction with the Artrix. Increased usage figures for the Artrix.	Increase influence eon the Artrix Board.	30 September 2007	НВ	Council funding of Artrix [review agreement]
8.3	Percentage increase in voluntary sector community events.	Baseline amount of Community Events through numbers of events packs requested.	In house review during 2007/08.	JG	Possible 2008/09 budget bid
8.4	Percentage satisfaction with overall Historical offer	Increase numbers viewing Bromsgrove Collection.	31 December 2007	JG	Culture and Communities Department
Progres	ss Updates	<u> </u>		<u> </u>	
8.1 8.2 8.3 8.4	•				

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
8.1	Cultural Offer														
8.1.1	Review and benchmark cultural offer and capacity to deliver.	JG													
8.1.2	Present report to CMT.	JG													
8.1.3	Put forward budget bid based on CMT discussions.	JG													
8.1.4	Implement if bid successful.	JG													
8.2	Satisfaction with Artr	ix.													
8.2.1	Develop SLA with Artrix.	JG													
8.2.2	Quarterly review of SLA.	JG													
8.3	Voluntary Sector Cor	nmunity	Eve	nts		•	•	•					•		
8.3.1	Review C&CS facilities, parks and open spaces to establish a full breakdown of these areas and what there usages could be for future events.	JG													
8.3.2	Develop a fees & charges structure for the above event locations including concession rates to promote usage and income generation.	JG													
8.3.3	Create an events facilitation/guidance pack to enable community	JG													

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
	groups/organisations to develop capacity, skills and knowledge. Leading to a sustainable community events programme.														
8.3.4	Promote the above pack via a launch event and implement advice service.	JG													
8.3.5	Agree performance monitoring arrangements and commence monitoring process.	JG													
8.4	Historical Offer (esta	blishme	nt of	Muse	eum	trust)								
8.4.1	Prepare transfer report.	PS													
8.4.2	Support the establishment of the trust.	PS													
8.4.3	Undertake transfer of museum.	PS													

9.	Expected Outcome	Reduced levels of un	acceptable detritus	S.	
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
9.1	Achieve top quartile BV199a-d.	Programmed clean in accordance with Environmental Protection Act	On-going	МВ	Approved Budget
		Develop team of fast response squad for detritus			

9.	Expected Outcome	Reduced levels of u	inacceptable detritus.	ı	
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
		issues	01 December 2007	MB	Approved Budget
		Gradual Increase in Enforcement Activity.	Start from 01 April 2008	МВ	2008/09 Budget bid
9.2	Percentage public satisfaction with	Annual Customer Panel Survey.	Contract Let	НВ	Approved Budget
	cleanliness of the District [BV Satisfaction Survey 2010]	Delivery of Customer Standards.	31 December 2007	MB	Service Business Plans
Progre	ess Update	•			
9.1					
9.2					

	Action	Lead				_			_			_		Ф	Corrective Action
			July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Мау	June	
9.1	Reduce levels of detri	itus													
9.1.1	Develop schedule	MB													

	cleaning programme for District										
9.1.	Ensure scheduling of street cleansing and grounds maintenance is co-ordinated.	МВ									
9.1.	Monitor Detritus levels through BVPI 199 syste on a 4 monthly cycle.	m MB									
9.1.	4 Ensure full compliment fully trained and permanently employed staff	of MB									
9.1.	Develop and Implement enforcement regime (dependent on budget bid).	MB									
9.1.	6 Develop fast response team.	MB									
9.1.	7 Develop litter awarenes amongst community through presentation an school visits.										
9.2	Measure Custome	r Perceptio	n of Clea	anlines	ss (se	e 4.1).				
9.2.	1										

10.	Expected Outcome	Improved Planning S	ervice and balance	d develop	ment of District
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
10.1	Maintain 90% of the of the Green Belt	Enforcement	On-going	DH	Not fully funded and staffing an issue.
		Number of Appeals upheld			

10.	Expected Outcome	Improved Planning S	ervice and balance	ed develo	oment of District
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
10.2	Speed of Planning Applications	Top Quartile BV109a-c	31 December 2007	DH	Loss of Panning delivery Grant [impact on budget?]
10.3	Rolling Vision of District	Local Development Scheme	As per timetable	DH	Development Control
Progres	ss Update	•	11.		"
10.1					
10.2					
10.3					

10.	Action	Lead	,											O	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
10.1	Maintain Greenbelt	<u>I</u>													
10.1.1	Agree brief for study of RSS2 implications for Redditch housing growth.	DH/MD	,												Completed May 07
10.1.2	Appoint Consultants	DH/MD													Completed May 07
10.1.3	Receive study Report	DH/MD													
10.1.4	Submit report to WMRA	DH/MD													

10.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
10.1.5	WMRA preferred options	DH/MD													
10.1.6	Examination in Public	DH/MD													
10.2	Processing Planning	Applicat	ions									•			
10.2.1	Monitor on a monthly basis, 109a – c identifying applications, which went overtime.	DH													
10.2.2	Consider if changes in process may address overtime applications.	DH													
10.2.3	Ensure registry understands importance of targets	DH													
10.3	Rolling Vision of the D	District										•			
10.3.1	Prepare Preferred options Core Strategy	MD													
10.3.2	Consult on Preferred options Core Strategy	MD													
10.3.3	Prepare Submission Version of Core Strategy	MD													
10.3.4	Submit Final Core Strategy	MD													
10.3.5	Consult on Final Core Strategy	MD													

FP1:	Value for Money				
11	Expected Outcomes	Delivery of agreed sa	avings.		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
11.1	Cashable savings as per Medium Term Financial Plan.	Quarterly Updates on VFM Action Plans.	31 March 2010	JP	Procurement Manager Additional resource may be required.
11.2	Fit for purpose management structure.	Savings/new arrangements reflected in Financial Strategy.	31 March 2009	JP	CMT and HR&OD Department
11.3	Alternative Methods of Service Delivery.	Cashable savings and improved services.	31 March 2010	JP	Procurement Manager. Additional resource maybe required.
11.1 11.2	ss Update				
11.3					

	Action	Lead													Corrective Action
Ref.			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
11.1	Realisation of cashable savings by alternative methods of service delivery						I		I	I	I	I			
11.1.1	Focus on areas of savings to be realised in 2007/08 & 2008/09 as detailed in financial plan	JP													
11.1.2	Action plan in place for transfer / provision of service for other authority /provider	JP													
11.1.3	Monitor provision through client reviews	JP													
11.1.4	Discuss with provider option to market test combined service delivery	JP													
11.1.5	Report to members cashable savings realised through integrated finance and performance monitoring report	JP													
11.2	Management Restruct	ture													
11.2.1	Develop new structure to meet service delivery of Council	KD													
11.2.2	Cost restructure proposals & present to members	KD/JP													
11.2.3	Implement revised structure to manage	KD/JPt													

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
	services														
11.3	Improvements in Use of resources scoring in relation to VFM														
11.3.1	Set up departmental working group to address VFM within the Council and to review action plans	JP													
11.3.2	Analyse statistical information in respect of BDC form Audit Commission for comparison purposes	JP													
11.3.3	Arrange review meetings with HOS to discuss action plans for achievement of VFM	JP													
11.3.4	Evaluate scoring of VFM template with HOS	JP													
11.3.5	Identify services for detailed benchmarking & cost analysis to be undertaken	JP													
11.3.6	Survey customer need for identified services	JP													

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
11.3.7	Obtain information in relation to VFM PIs in use on OLAs to monitor against. Include PIs in relation to achieving improvements in service delivery to diverse community.	JP													
11.3.8	Plan service delivery to achieve savings for 2008/09-2009/10	JP													
11.3.9	Report VFM actions to CMT and member group	JP													
11.3.10	Extend implementation of GPC cards to realise efficiencies in purchasing	JP													

12.	Expected Outcome	Improved Financial M	anagement		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
12.1	Budget to profile throughout year.	Quarterly reporting of budget to actual to Cabinet.	On-going (monthly)	JP	Service Accountants
12.2	Improved Cost Centre Management.	Budget to profile throughout the year. Quarterly reporting of Budget to	2008/09	JP	Head of Financial Services and Assistant Chief Executive

Budget to profile throughout year. Actual to Cabinet Cabinet	12.	Expected Outcome	Improved Financial Ma	anagement		
throughout year. Actual to Cabinet Development of Property Register Stock Assessed against corporate priorities. Actual to Cabinet Table 12.3 Actual to Cabinet Stock Assessed against corporate priorities. Asset management Plan on	Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
12.3 Improved asset management through reconfigured property stock that matches Council priorities Development of Property Register Stock Assessed against corporate priorities. Asset management Plan on Stock Assessed against corporate priorities. Asset management Plan on	12.1			On-going (monthly)	JP	Service Accountants
management through re- configured property stock that matches Council priorities Register Stock Assessed against corporate priorities. Asset management Plan on			Actual to Cabinet			
Asset management Plan on	12.3	management through re- configured property stock	Register Stock Assessed against	31.03.08	CF/JP	Facilities Management Group.
rarget		priorities	·			

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
12.1	Improved Financial Management by budget holders		(this	is is 12	1 2.1 ar	nd 12	.2 coi	mbin	ed)						
12.1.1	Implementation of the POP project to account for	JP													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
	commitments & accruals on the Agresso system														
12.1.2	Further develop integration of financial and performance management reports to Members.	JP													
12.1.3	Train all managers to use web access for Agresso reporting	JP							_						
12.1.4	Commence pilot of relaunch of CIPFA FM model to enable diagnostic of areas of weakness to be developed	JP													
12.1.5	Using diagnostic develop plan for improvements in financial management	JP													
12.1.6	Report robust action plans to members in relation to financial management (under & overspends)	JP													
12.1.7	Undertake financial training for all budget holders	JP													
12.3	Improved asset management			l	l				l	l		l			
12.3.1	Review and update register of assets	CF													
12.3.2	Carry out valuations in accordance with timescales	CF													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
12.3.3	Carry out stock condition surveys in accordance with timescales	CF													
12.3.4	Carry out a suitability assessment in respect of building from which we deliver our services	CF													
12.3.5	Deliver Scope improvements in accordance with BVPI 156	CF													

	FP3 Financial Strat	tegy			
13.	Expected Outcome	Improved Financial St	trategy		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
13.1	Percentage return on investment.	Quarterly monitoring	On-going (quarterly report)	JP	Procurement team
13.2	External Funding	Investigate other Councils approach.	2008/09	JP	2008/2009 Business case required.
13.3	Financial Strategy	Clear business model for Council			
13.4	Risk Management	Risks successfully managed			
_	ss Updates				- 0
13.1					
13.2 13.3					
13.4					

Ref.	Action	Lead	>			ند		ı;			٠	٠	>	Ð	Corrective Action
IXCI.			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
13.1	ROI				l			l		l		l			
13.1.1	Review effectiveness of Treasury management principles with external fund managers.	JP													
13.1.2	Calculate risk of maintaining investments with external fund managers v in house team	JP													
13.1.3	Report to members on investment income received as part of quarterly financial and performance monitoring reports	JP													
13.1.4	Report to Members on levels of debt and the recovery effectiveness of material income	JP													
13.2	External Funding														
13.2.1	Discuss with financial network the options available for external funding streams	JP													
13.2.2	Identify priority areas where external funding could be sought	JP													

	Action	Lead													Corrective Action
Ref.			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
13.2.3	Make bids for funding where appropriate to fund priority areas within the Council objectives	JP													
13.3	Financial Strategy														
13.3.1	Council Plan and financial strategy to be linked by demonstrating funding aligned to priorities of the Council	JP/HB													
13.3.2	Non-priorities to be identified as part of the financial planning process	JP/HB													
13.3.3	Medium term financial plan to include financial implications of joint plans agreed with partners.	JP/HB													
13.3.4	Medium term financial plan to be extended to 5 year period	JP/HB													
13.4	Risk Management														
13.4.1	Revised risk implications to be included in all reports to members	JP													
13.4.2	Complete all risk registers in revised format	JP													
13.4.3	Review risk registers at DMT meetings for update	JP													

	Action	Lead													Corrective Action
Ref.			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	and exception reporting														
13.4.4	Report to Audit Board on exceptions and action plans to address concerns	JP													
13.4.5	Risk management Training to be delivered to staff and members	JP													

14.	Financial Reporting Expected Outcome	Increase in residents	understanding of	Council's	finances
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
14.1	Percentage of residents who understand the choices the Council has to make.	Annual Customer Panel questions Hits on web site Letters received	31 December 2007	НВ	Financial Services Corporate Communications and Customer First Manager
14.2	Percentage of residents who remember receiving the Councils Annual Report	Production of a single annual report. Condensed version produced for July Together Bromsgrove. Verbal report to July LSP Stakeholder meeting	30 June 2007 31 July 2007 31 July 2007	НВ	Financial Services Corporate Communications and Customer First Manager
Progres	ss Update		.1		

14.1	1	
14.2	2	

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
14.1	Budget Consultation						l		l				l		
14.1.1	Customer Panel results available on Council's priorities.	НВ													
14.1.2	List of budget bids and savings developed.	НВ													
14.1.3	"Simalto" focus group exercise.	НВ													
14.1.4	Community Strategy agreed by Full Council after 8-week consultation period.	НВ													
14.1.5	Equalities Forum develops budget bids.	НВ													
14.1.6	Staff Champion budget bids developed.	НВ													
14.1.7	Budget bids developed by Area Committees.	НВ													
14.1.9	Feedback to public and partners on consultation.	НВ													
14.2	Integrated Annual Rep	oorts													
14.2.1	Publication of "Together	НВ													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	Bromsgrove" including Annual Report.														
14.2.2	Publication of Annual Report 2006/07	НВ													
14.2.3	Quarterly Integrated reported to CMT, Leader's and Cabinet.	НВ													
14.2.4	"Town Hall" meeting.	НВ													

15	Expected Outcome	Improved Customer P	rocesses		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
15.1	Percentage of Complaints referred to Ombudsman	Percentage of complaints resolved	31 March 2007	НВ	Approved Budget
		Implementation of Customer feedback system	31 March 2007	HB/DP	E government and Customer Services Department
		Evaluation of system	31 March 2008	НВ	·
15.2	Reduced demand through improved service.	Increased website usage	31 March 2008	НВ	E –government and Customer Services

Increased automated

PR1:	Customer Process				
15	Expected Outcome	Improved Customer	Processes		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
		payments			Department.
		Speed of answering customer calls			
15.3	Switching of Voicemail	Development of staff rotas	31 December 2007	DP	E government, Customer
	(re-programmed to 08/09 subject to Cabinet approval).				Services Department and Legal and democratic Department
Progres	ss Update		.ll .		
15.1					
15.2					
15.3					

Ref.	Action	Lead	July	Aug	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
15.1	Ombudsman Complair	nts (Cust	omer	Feed	dback	< Sys	tem)								
15.1.2	Set up Customer complaints system project team, develop project plan	DP													

Ref.	Action	Lead	July	Aug	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
	and acceptance criteria.														
15.1.3	Setup pilot implementation	DP													
15.1.4	Draw up training plan	DP													
15.1.5	Draw up rollout plan and implement	DP													
15.1.6	Conduct system evaluation against business case	DP													
15.2	Reduced Demand			l			l	l							
15.2.1	Develop corporate Customer Access Strategy as part of Customer First Strategy Review	DP													
15.2.2	Conduct promotion of website and automated payment systems	DP													
15.2.3	Arrange monthly meetings with back office services to discuss CSC statistics and service delivery issues.	DP													
15.3	Switch Off Voicemail?	(Suspe	nded	sub	ject t	o Ca	binet	арр	roval).					
15.3.1															
15.3.2															
15.3.3															
15.3.4															
15.3.5															

Ref.	Action	Lead	July	Aug	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
15.3.5															

	PR2: I	mproved Governand	ce			
	16.	Expected Outcome	Improved Governanc	е		
	Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
Daa	16.1	Policy changes as a result of Scrutiny.	Better Reports	31 March 2008	CF	Legal and Democratic Services
0 1/6	16.2	Member Standards reduction in cases reported	Issuing of Guidance and training based on identified issues	31 March 2008	CF	Legal and Democratic Services
	16.3	Percentage of Members who feel that the climate is appropriate.	Annual Member /Officer survey	30 April 2007 (now post election)	CF	Approved Budget
	Progres 16.1	s Update		•		
	16.2 16.3					

Ref.	Action	Lead		_	_		_							4	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
16.1	Policy changes result	ing from	ı scrı	utiny											
16.1.1	Reduce size of Scrutiny Steering Board to 7 members with specific rolls and responsibilities	CF													
16.1.2	Deliver training to scrutiny steering board	CF													
16.1.3	Deliver overview and scrutiny training to Cabinet members	CF													
16.1.4	Develop process where CMT and Scrutiny Champions can influence the SSB work programme in line with Corporate Objectives and Priorities	CF													
16.1.5	Train elected members to sit as SSB Chairman	CF													
16.2	Member standards														
16.2.1	Member Induction Session delivered to all members	CF													
16.2.2	Code of conduct/Declaration of Interest/Hat wearing training delivered to all members	CF													

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
16.2.3	Structured Member induction Programme with defined rolls and responsibilities developed in accordance with results from TNAs	CF													
16.2.4	Adoption of New Code Of Conduct	CF													
16.2.5 16.3	Training and support for all members on Full Council Procedure Rules and Protocols	CF													
16.3	Improved Member rela	ations													
16.3.1	Quarterly meetings between the Chairman of SSB Audit Board and Performance Management Board	CF													
16.3.2	Set up protocol for managing the Full Council Meeting	CF													
16.3.3	Member training delivered in accordance with Member Development Programme	CF													
16.3.4	Develop the roll of the Leader of the Opposition	CF													
16.3.4	Weekly meeting between Leader and Chief Executive.	KD													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
16.3.5	Monthly meeting between Leader of Opposition and Chief Executive.	KD													

PR3:	Spatial Business Pr	oject											
17	Expected Outcome	Accurate and integrated customer data											
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources								
17.1	New and better Customer Standards Less complaints caused by poor data	Delivery of the Implementation plan	30 April 2008	DP	Approved Budget Contract with MDA								
Progres	ss Update												

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
17.1	Accurate and integrated customer data (Spatial)				l	l	l	l							
17.1.1	Implement Electronic Document Management system	DP													
17.1.2	Conduct BPM exercise and produce 'as is'	DP													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	statements														
17.1.3	Implement new planning system.	DP													
17.1.4	Implement new licensing module.	DP													
17.1.5	Identify savings for 2008/09 onwards from new systems and BPR and feed into budget.	HoS													
17.1.6	Implement new business processes.	HoS													

PR4:	PR4: Improved Partnership Working												
15.	Expected Outcome	Introduce co- mingle	d recycling										
Ref.	Measures of Success	Actions Required	Actions Required Timescales Lead Resources										
18.1	£0.5m Annual Saving Reduced number of Operator accidents	New collection starts March 2009	31 March 2009	MB	Worcester County Council County Council Approved Budget								
18.2	35 Outcome Measures	Six monthly reporting by Worcestershire LSP	31 March 2007	НВ	Bromsgrove Partnership								
18.3	% satisfaction with leisure centre offer	Usage numbers. Surveys of users	31 October 2007	JG	Culture and Communities, Human Resources & Organisation								

15.	Expected Outcome	Introduce co- mingled	troduce co- mingled recycling												
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources										
		Leisure transfer			Development and external legal support.										
Progres	ss Update			-1											
18.1															
18.2															
18.3															

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
18.1	£0.5m annual saving	•			ı								ı		
18.1.1	Attendance at Worcestershire Waste Management Partnership.														
18.2	Delivery of District co	ntributio	n to	LAA	targ	ets									
18.2.1	Consultation on Bromsgrove Partnership Community Strategy	НВ													
	Agreement of Community Strategy by Full Council	НВ													
18.2.2	Endorsement of County contribution to Strategy by County Cabinet.	НВ													
18.2.3	Development of performance framework	НВ													

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
	documents for partnership														
18.2.4	Commence quarterly reporting.	НВ													
18.3	Satisfaction with leisu	ire centi	e off	er											
18.3.1	Review and revise the sports centres programmes to met customer requirements and increase usage.	JG													
18.3.2	Review and revise the marketing schedules to increase market penetration.	JG													
18.3.3	Review the customer consultation systems and implement a revised annual satisfaction survey. To Include reprofiled budgets to meet issues identified following the survey/ongoing feedback.	JG													
18.3.4	Submit a committee report for the implementation of a leisure trust for the delivery of the Council's Sports Centres.	JG													
18.3.5	Develop the phase 2 proposals for Health & Fitness Provision at the	JG				_	_	_		_					

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	Dolphin centre and complete the works.														
18.3.6	Implement a Leisure Trust for the delivery of the Sports Centres. To include agreed performance monitoring, user satisfaction ratings and maintenance of Quest quality assurance	JG													

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HK&C	טעז: Learning and D	evelopment			
19	Expected Outcome	Modern Councillors			
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
19.1	CMT survey of Member Competence	Completion of Modern Councillor Programme	31 July 2007	HP/JP	Member Training Budget Approved
	Evaluation of Modern Councillor Programme				
19.2	Improvements in five Determinants of Job Satisfaction [Employee Survey]	Completion Of Mandatory element of training All Mangers have personal and skills development plans in place.	On Going	HP/JP	All Managers
19.3	liP re accreditation	liP Action Plan on target	30 September 2007	JP/HP	Named individuals in plan

HR&OD1: Learning and Development												
19	Expected Outcome	Modern Councillors										
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources							
	achieved											
Progres	ss Update											
19.1												
19.2												
19.3												

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
19.1	Member Developmen	t													
19.1.1	Training Needs Analysis	CF													
19.1.2	Delivery of Member Development Programme in accordance with timescales	CF													
19.1.3	Training aligned with Constitutional Reform	CF													
19.1.4	Evaluation of Programme through Member Satisfaction Survey and Ethical Standards Review														
19.2	Management Develop	ment St	rateg	y (se	e 20.	.)									
19.2.1															
19.2.2															

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
19.2.3															
19.2.4															
19.2.5															
19.3	Investors In People A	ccredita	tion (see	20.3 a	and 2	20.4)								
19.3.1															
19.3.2															
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19.3.4															
19.3.5															

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HR&	OD 2: Modernisation				
20	Expected Outcome	Workforce Planning			
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
20.1	The alignment of People to service objectives.	Service workforce Plans reviewed by HR&OD	30 September 2007	JP/HP	Approved Corporate budget
					Service managers
20.2	Equal pay for equal work	Proposed new pay structure and terms and conditions developed	30 April 2008	JP/HP	Approved single status budget.
					WMLGA
20.3	Consistency in people management [Employee survey]	Fewer grievances Fewer complaints	31 March 2008	JP/HP	HR&OD Department

HR&	OD 2: Modernisation	1									
20	Expected Outcome	Workforce Planning									
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources						
Progre	ss Update										
20.1											
20.2											
20.3											
20.4											
20.5											

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
20.1	Workforce Planning (s	suspend	led u	ntil S	ingle	Stat	us d	elive	red, s	subje	ct to	Cab	inet a	ppro	val).
20.1.1	Pre-planning	JP													Re-programme to 08/09.
20.1.2	Data collection	JP													Re-programme to 08/09.
20.1.3	Assessment of Current position	JP													Re-programme to 08/09.
20.1.4	Future needs and scenario planning	JP													Re-programme to 08/09.
20.1.5	Gap Analysis	JP													Re-programme to 08/09.
20.1.6	Strategy and Action Plan	JP													Re-programme to 08/09.
20.1.7	Evaluation	JP													Re-programme to 08/09.
20 2	Single Status			•	•	•	•				•		•		

Ref.	Action	Lead													Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	
20.2.1	Undertake and Complete Job Evaluation (JE) programme	JP													
20.2.2	Audit JE outcomes.	JP													
20.2.3	Translate into Pay Structure/Pay Modelling.	JP													
20.2.4	Terms and Conditions Negotiations (including Pay Protection).	JP													
20.2.5	Communicate results.	JP													
20.2.6	Ballot of Staff	Trade Unions													
20.2.7	Implement.	JP													
20.3	Policy Development	1	l	l	l				l						
20.3.1	Review, develop, consult, train and Implement on all HR policies and procedures as detailed in the People Strategy	JP/DS/ LS													
20.4.	Management Develop	ment St	rateg	У											
20.4.1	Evaluate PDR Process	JP/HP													
20.4.2	Evaluate Modern Manager Framework	JP/HP													
20.4.3	Evaluate Manager Induction	JP/HP													
20.4.4	Deliver Management	JP/HP													

Ref.	Action	Lead								_				Ø	Corrective Action
			July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	
	Conferences														
20.5	Investors In People A	ccredita	tion				•								
20.5.1	April 2007 mid term management review	JP/HP													
20.5.2	Report and result on mid term review	JP/HP													
20.5.3	Revise Organisational Development (OD) Action Plan	JP/HP													
19.3.4	Implement OD Action Plan April 2007 – April 2008	JP/HP													
20.5.5	Monitor OD Action Plan at CMT monthly	JP/HP													
20.5.6	Final Re-inspection April 2008	JP/HP													

HR&C	&OD 3: Positive Employee Climate									
21	Expected Outcome	Employee Satisfaction	on.							
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources					
21.1	Improvements in five determinants of job satisfaction [Employee	IiP Re accreditation	31 July 2007 30 April 2007	JP/ HP	HR&OD					

21	Expected Outcome	Employee Satisfactio	n.		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
	Survey]	Staff Forums			
	liP report				
21.2	Increase in successful recruited at first attempt	Increase in applications	In place	JP/HP	Human Resources and Organisational Development team
	Work force more representative of the population	Increase in applications	In place		
	Reduced turnover of staff	Percentage of staff who have applied for a job outside the Council in the last year [Employee Survey].	31.March 2008 31.March 2009		
21.3	No industrial action	Climate questionnaire sent to union Liaison group	On going	JP/HP	Human Resources and Organisational Development team
Progres	ss Update	<u> </u>	<u> </u>	<u>II</u>	
21.1					
21.2 21.3					

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
21.1	Employee satisfaction	<u> </u> ໄ													
21.1.1	Survey Employees	JP/HP													Undertaken in May 2007.
21.1.2	Analyse Results	JP/HP													Undertaken in June 2007
21.1.3	Report findings	JP/HP													
21.1.4	Determine Action Plan	JP/HP													
21.1.5	Communicate results	JP/HP													
21.5.6	Implement Action Plan	JP													
21.5.7	Undertake 2008/09 Survey														
21.2	Recruitment and Rete	ntion		1	I	I	1	I	I			I			
21.2.1	Monthly analysis of turnover and vacancies	JP/DS/ LS	_	_			_								
21.3	Industrial Relations														
21.3.1	Monthly Union Liaison Meetings	JP/DS/ LS													
21.3.2	Seek feedback from trade unions as part of customer survey for HR&OD Department	JP													

22	Expected Outcome	Performance Culture	е		
Ref.	Measures of Success	Actions Required	Timescales	Lead	Resources
22.1	Percentage of staff who understand what they are contributing to the Councils objectives	100% of PDRs completed	30 April 2007	JP/HB	HR&OD Department and Corporate Communications, Policy and Performance Team
22.2	Reduction in the number of Industrial tribunals	Percentage of staff in Capability Procedure	On –going	JP/HB	HR&OD Department and Corporate
	Percentage of staff in Capability Procedure	Requests for advice and support from managers.	2008/2009		Communications, Policy and Performance Team
22.3	Percentage of staff who understand what their team's contribution is to	100% Team action plans completed.	31 October 2007	JP/HB	HR&OD Department and Corporate Communications, Policy
	the Councils Objectives		31 July 2007		and Performance Team
Progres	ss Update		<u>"</u>	-1	
22.1					
22.2					
22.3					

Ref.	Action	Lead	July	Aug.	Sep.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	Мау	June	Corrective Action
22.1	Personal Developme	nt review p	roces	SS		I									
22.1.1	Review 2007/08 PDR process.	JP/HP													
22.1.2	Agree and communicate 2008/09 changes.														
22.2.2	Complete 2008/09 PDRs.	JP/HP													
22.2	Correct use of capab	ility proced	dure			•									
22.2.1	12 monthly review from implementation of revised policy	JP/DS/LS													
22.3	Performance Culture														
22.3.1	Link review of PDR process to business planning process.	JP													
22.3.2	Agree forms for team action planning making link to COs and priorities.	JP													

It is important that the Council addresses the recommendations made in the Audit Commission's CPA report. The Council wrote a self aware self assessment. As a result, the key deliverables in the Council Plan 2007/2010 address the Audit Commission's recommendations. The Audit Commission's recommendations and the relevant part of the 2007/08 Improvement Plan are cross referenced below.

CPA Ref.	Recommendation	Imp Plan Ref.	Response
13.1	Base service planning and delivery on the outcomes of both evidence based needs assessment and inclusive consultation.	14.1	The Council is currently undertaking a Customer Panel survey on its priorities and those of the draft Community Strategy. A second survey will be conducted in November.
			The Equalities Forum, two pilot Area Committees and Staff Champions group are all part of a participatory budget exercise. Together Bromsgrove will include a budget consultation exercise. Further budget focus groups will be undertaken in the Autumn. The Community Strategy will go out to an 8 week public consultation period.
13.2	Make customer satisfaction a key deliverable for all managers and staff, and take robust and timely action to address satisfaction.	4./17.1	Review of customer standards in business plans as part of Customer First Part 2 training and 2008/09 business planning.

			Publication of customer standards (internal and external). Implementation of Customer Complaints
		5.2	System. Further improvements between "back office" and Customer Service Centre.
			Identification teams to go forward for Charter Marks and development of action plans to gain accreditation.
14.1	Develop the knowledge and strategic leadership skills of all councillors by establishing their training needs and implementing a comprehensive training plan. This should include opportunities for individual and group mentoring, exposure to how other councils do things and participation in leadership programmes.	16/19	Training Needs Analysis. Delivery of Member Development Programme in accordance with timescales (Claire may want to add more here on planned content e.g. mock Full Council). Training aligned with Constitutional Reform Evaluation of Programme through Member Satisfaction Survey and Ethical Standards Review.
14.2	Require professional working relationships between political groups and between councillors and officers.	16.2 16.3	Member Induction Session delivered to all Members. Code of conduct/Declaration of Interest/Hat

			wearing training delivered to all members. Structured Member induction Programme with defined rolls and responsibilities developed in accordance with results from training needs analysis. Adoption of New Code Of Conduct. Training and support for all members on Full Council Procedure Rules and Protocols. Quarterly meetings between the Chairman of SSB Audit Board and Performance Management Board. Set up protocol for managing the Full Council Meeting. Member training delivered in accordance with Member Development Programme.
15.1	Establish the management capacity and skills to deliver the requirements of both corporate recovery and operational service improvements.	11.2 20.1	Senior management restructure. Implementation of work force planning.
		20.4	Management Development Strategy evaluation and continued rollout (PDR process and modern manager framework).

		20.5	Investors in People Accreditation.
15.2	Integrate value for money into the culture of the Council and its partnerships enabling resources	11.1 11.2	Review of departmental VFM action plans.
	to be saved and redirected to support corporate priorities.	11.3	Transfer of services as a result of market testing.
			Monitoring of VFM achieved (cost and quality). Regular reporting to Members.
			Exploration of combined service market testing.
			Analysis of statistical information and further challenge of departments.
15.3	Use partnership working to enhance capacity and delivery shared priorities efficiently and effectively.	See 16.3 below.	See 16.3 below.
16.1	Integrate performance management with both resource and risk management.	14.1	Comprehensive approach to budget priorities consultation.
		14.2	Integrated timetable for production of Council Plan/MTFS and Annual Reports (separate report to CMT 05 June).
			Head of Financial Services and Assistant Chief Executive now meet each month to review integrated timetable.

		13.4	Corporate risk register and departmental risk registers regularly reviewed and based on Council's priorities and departmental key deliverables.
16.2	Use the scrutiny function to effectively hold the Executive to account particularly relating to major investments such as the spatial project.	16.1	Audit of Overview and Scrutiny. Constitution update. Identification of scrutiny officer champions. Reduction in Scrutiny Steering Board (SSB) numbers. Training for SSB and Cabinet Members. Appointment of Leader of Opposition to Chair SSB. Develop process for CMT/champions to influence programme in line with COs and priorities.
16.3	Manage the performance of partnerships in delivery shared ambitions and priorities (and enhance capacity).	18.2	Delivery of contribution to LAA targets (including agreeing a new SMART Community Strategy and establishing a project and performance management framework to support the interface between the LSP Board and project/theme groups).

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	18.3	Leisure provision transfer to a trust.
	7.3	Potential expansion of neighbourhood wardens.
	7.2	Continued work with Police on PACT and evaluation of approach through Capacity Building money.
	4.2	Continued work with County Council on Customer Service Centre.
	3	Continued work with RSLs on affordable housing target.
	2. and 1.	Continued work with partners on AAP for Lonbgridge and town centre.

Additions to Improvement Plan (Cabinet 10/07/07)

- 1. Section 4.1 and 14.1 <u>Streamline</u> Customer survey arrangements for the Annual Business Planning process and service Questionnaires
- 2. Section 7.1 Determine Extent and Hierarchy of public influence arrangements
- 3. Section 10.1 Review Planning moratorium
- 4. Section 11.1 Determine Value for Money Strategy and Action Plan for 2007/8 by September 2007
- 5. Section 12.1 Engrain Business Planning approach and Annual timetable with all members and senior managers and above
- 6. Section 15.1 Create small resource (staff) to tackle hotspots
- 7. Section 16.3 Add Peer support to political groups; visits to and from Other Local Authorities and lead officers for each Committee/Board
- 8. Section 17.1 Review overall progress of Spatial project
- 9. Section 20 Develop tomorrows stars
- 10. Section 22 Re-enforce performance driven culture
- 11. Firm action to seek improved working with the County
- 12. Firm up overall reporting arrangements for key projects

(List Submitted by Mr. W. Roots, Improvement Director, in relation to minute 26/07 of Cabinet held on 10th July 2007)

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EXECUTIVE CABINET

10th July 2007

<u>HEALTH AND SAFETY AT WORK – REVISION OF LONE WORKING AND RISK</u> ASSESSMENT PROCEDURES

Responsible Portfolio Holder	Councillor R. D. Smith
Responsible Head of Service	Ms. J. Pitman

1. SUMMARY

1.1 Bromsgrove District Council has a legal duty to determine, produce, implement and revise it's Health and Safety at work policy, including the arrangements that it must have in place to manage specific activities and hazards.

The Council's Lone Working and Risk Assessment Policy and Procedures form part of the specific arrangements, have been revised and the documentation amended.

2. **RECOMMENDATION**

2.1 The recommendation is that the revised Lone Working and Risk Assessment Policy and Procedures are approved in order that they can become part of the arrangements for health and safety at work within the Council's Health and Safety at work Policy.

3. BACKGROUND

- 3.1 The Health And Safety At Work Act 1974 require any organisation that employs five people or more to determine, produce, implement and revise a written Health and Safety Policy which should contain
 - 1) A Statement of intent
 - 2) The organisation of health and safety at work people and duties
 - 3) The Arrangements (Policy's and Procedures) for health and safety at work

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The management of health and safety at work framework, as detailed in the HSE document 'Successful Health and Safety Management' –HSG65, includes the same requirement and details how an organisations

management systems and procedures should include health and safety at work.

The Council's Lone Working and Risk Assessment Policy and Procedures form part of the specific arrangements that the Council has to have in place as part of its health and safety at work management system.

4. FINANCIAL IMPLICATIONS

4.1 The revision of the two Policy and Procedure documents has been made by the Council's Health and Safety Advisor.

The only other cost will be in copying and distributing the revised documents. Any questions regarding the practical implications of the revisions can be dealt with by the Council's Health and Safety Advisor and the new documents will form part of the resources that will be examined at future relevant health and safety training courses.

5. **LEGAL IMPLICATIONS**

- 5.1 By undertaking the revision of the two documents we have met our legal requirements under
 - The Health and Safety At Work Act 1974
 - The Management of Health and Safety At Work Regulations 1999 (revised) as detailed in the HSE publication HSG 65.

In addition, by undertaking the revisions and updating our documentation where necessary, the Council will be able to demonstrate that it is managing health and safety at work competently to the HSE, who are currently evaluating our health and safety management provision as part of the Chancellor's and Deputy Prime Minister's initiatives and targets to reduce work related accidents and ill health costs.

6. CORPORATE OBJECTIVES

6.1 The Council's corporate objectives of continuous improvement of our service provision and quality of our procedures and policy's have been met by the revision of these two very important documents.

The revision identified and defined the specific health and safety at work arrangements that we required to meet our legal requirements, as previously outlined, and incorporated them in the new documentation.

7. RISK MANAGEMENT

7.1 The failure to manage health and safety at work effectively and to meet our legal requirements increases the risk of financial penalties being imposed by the courts because of a failure to comply with Statute law. The Council would have to meet any penalties imposed from within its own financial resources.

In addition, the threat of civil action against the Council is greater than in the past because of the 'claim culture' that has developed since the introduction of the new Civil Procedure rules. We have in place the required insurance to deal with any claims but the cost of this provision could rise substantially in line with the number of claims that are made by the council.

By revising and updating these two documents we will have met our legal requirements, reduced the risk of injury to the Council's employees and satisfied the HSE, who monitor our health and safety at work provision.

8. CUSTOMER IMPLICATIONS

8.1 Once the Policy is approved, staff will be briefed. The Policies will assist Managers in completing Risk Assessments and Safe Systems of Work.

9. OTHER IMPLICATIONS

Following the approval of the meeting, staff will be briefed. The Policies will assist Managers in carrying out risk assessments and safe systems of work and produce local policies for their Service.

Procurement Issues None		
Personnel Implications See body of report		
Governance/Performance Management Improved Staff Health & Safety		
Community Safety including Section 17 of Crime and Disorder Act 1998 None		
Policy These are the Corporate Policies in which individual Service Policies can be drawn as required		
Environmental None		
Equalities and Diversity No impact		

10. OTHERS CONSULTED ON THE REPORT

Portfolio Holder	YES
Acting Chief Executive	YES
Corporate Director (Services)	YES
Assistant Chief Executive	YES
Head of Service	YES
Head of Financial Services	YES
Head of Legal & Democratic Services	YES
Head of Organisational Development & HR	YES
Corporate Procurement Team	YES

11. APPENDICES

Appendix 1 Lone Working Policy and Procedures
Appendix 2 Risk Assessment Policy and Procedures

12. BACKGROUND PAPERS

Health & Safety at Work Act 1974. Management of Health & Safety at Work Regulations 1999

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Lone Working Policy and Procedures



HEALTH AND SAFETY AT WORK

Lone Working Policy and Procedures

JUNE 2007

For further information on this policy please contact:

Telephone: (01527) 881399

HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT SERVICES
HEALTH AND SAFETY DEPARTMENT
THE COUNCIL HOUSE
BURCOT LANE
BROMSGROVE
WORCESTERSHIRE
B60 1AA

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Lone Working Policy and Procedures

1. Introduction -

1.1 So far as is reasonably practicable, the Council will ensure that employees and self employed Contractors who are required to work alone or unsupervised for significant periods of time, are protected from risks to their health and safety.

Solitary working may expose employees and others to certain hazards. Where complete elimination is not possible the risks must be reduced to an acceptable level.

This Policy and procedures have been developed to help managers and supervisors to deal with the health and safety issues surrounding lone working. It sets out what they should do to ensure that employees are not put at an unacceptable level of risk when they work alone. The procedures include steps which managers must take to check that they have done or need to do to assess and prevent risks to lone workers.

2. Working Alone

- 2.1 Working alone is not illegal but it can bring additional risks to a work activity. The Council has developed policies and procedures to control risks and protect employees, and employers should be aware of and follow them. Apart from employees being sure that they are capable of doing the job on their own, the three most important things to be certain of are that:-
 - The lone worker has full knowledge of the hazards and risks to which he or she is being exposed.
 - A colleague or supervisor knows the whereabouts of a lone worker and what he or she is doing.
 - The lone worker knows what to do if something goes wrong.

3. Arrangements for securing the Health and Safety of Employees risk

- 3.1 The Council will carry out the assessment of risks of working alone carried out under the Management of Health and Safety at Work Regulations. The assessments will confirm whether work can actually be done safely by one unaccompanied person. The assessment will include the identification of hazards from, for example, means of access and/or egress, plant, machinery, goods, substances, environment and atmosphere ect. Particular consideration will be given to:-
 - The remoteness or isolation of workplaces.
 - Any problems of communication.
 - The possibility of interference, including violence or criminal activity from other persons.
 - The nature of injury or damage to health and the anticipated "worst case" scenario.

Lone Working Policy and Procedures

4. Information and Training

4.1 Employers and others will be given all necessary information, instruction, training and supervision to enable them to recognise the hazards and appreciate the risks involved in working alone. Employees will be required to follow predetermined safe working practices and procedures which will include the provision of first aid facilities, communication procedures, and an awareness of such emergency procedures as appropriate. All employees are required to co-operate with these efforts to ensure safe working and report any concerns to management. A suggested Training List can be found in Appendix 1.

5. Safe Systems of Work

5.1 Rules and instructions will be developed to cover, for example:-

Required ability of employees, eg,
 Professional Training
 Qualifications and Experience

Medical Fitness.

Medicai Filhess

• Suitability of equipment, eg, - Quality of Tools

Insulation of Electrical Appliances

Means of communication, eg,
 Two way radio

Telephone

Remote manual or automatic alarm Regular visits by competent person

Provision of treatment for injuries, eg, - Portable first aid kit

Availability of first aiders

Emergency and accident

Presedures a grant accident

Output

Description

Desc

Procedures, e,g,

 Means of summoning help Means of raising the alarm Rescue plans and equipment Fire fighting equipment

- Maintaining contact with work colleagues who are aware of employees work commitments (i.e office, work diary) by way of phone calls/radio (periodic into office) and regular contact between Lone worker and Supervisor
- Training, e.g., for safe use of specialist equipment and processes ect.
- Suitable Personal Protective Equipment (PPE) must be issued to any
 employees where the risk assessment has shown it to be necessary for
 personal safety. (For example, a personal attack alarm as well as a mobile
 phone may be identified as necessary PPE for an employee carrying out
 lone worker duties).

Lone Working Policy and Procedures

- All accidents, dangerous occurrences or violence to an employee working away from the office must be reported to the Line Manager immediately. A form "Report of an injury or dangerous occurrence" must be completed by the Line Manager, in conjunction with the injured/affected employee. This form should be referred to the Corporate Health and Safety Advisor for inclusion in the Accident book and for investigation.
- Direct accompanied supervision, e,g, for trainees, young people or new recruits, who must be confirmed as competent to work alone before supervision is relaxed to the level of unaccompanied visits.

6. Defined Working Limits

- 6.1 Managers must establish clear procedures, setting limits of what can and what cannot be done whilst working alone. Clearly, this is impossible to define in general terms, but the general precautionary principle of "if in doubt, ask " should be advocated.
- 6.2 In certain circumstances, particularly when the risk rating(s) is considered high or where specific legal requirements exist, some, or all, of the above procedures may be contained within a written permit to work, without which the activity may not take place.

7. Who is a lone worker? -

- 7.1 Lone workers are simply those people who work by themselves, without close or direct supervision. This situation can occur in fixed establishments, where one person works in an area separate from others, or works outside normal hours.
- 7.2 More frequently it is staff working away from their fixed base. This includes Health & Safety Advisors, Planning Officers, Environmental Health Officers, Car Park Attendants, Neighbourhood Wardens and Revenues & Benefits Visiting and Investigative Officers, SSWM Supervisors, Home Workers and Public Convenience Attendants.
- 7.3 People will generally know when they are working alone, but there are situations where even when an office is normally crowded, people can be working in isolation for long or short periods. Managers should have procedures in place, relevant to the work activities, that recognise lone workers and ensure that they can work safely.
- 7.4 The Health and Safety Executive (HSE) defines lone working as "those who work by themselves without close or direct supervision".

Lone Working Policy and Procedures

8. Hazards of lone working -

- 8.1 People who work alone face the same hazards in their daily work as other workers. However, for lone workers the risk of harm is often greater. So it is essential that the risks of lone working are taken into account when risk assessments are carried out.
- 8.2 Hazards which lone workers may face may include -
 - Accidents /Illness
 - Emergencies arising out of the work
 - The lack of first aid provision or someone to administer it
 - Fire
 - Inadequate provision of welfare facilities
 - Violence from members of the public /physical attack/threatening behaviour/verbal abuse/attack by dogs/harassment
 - Manual handling
 - Stress arising from working in isolation
 - Vehicle breakdown/road traffic accident/vehicle damage

9. Employers' legal duties -

- 9.1 There is no legislation that specifically prohibits working alone. However, the Health and Safety at Work Act 1974 places a duty to ensure the health, safety and welfare of their employees, so far as is reasonably practicable.
- 9.2 In addition, the Management of Health and Safety at Work Regulations 1999, place a legal duty on employers to assess all risks to health and safety, including the risk of lone working. If the risk assessment shows that it is not possible for the work to be done safely by a lone worker, then other arrangements must be put in place. A General Guide to the Risk Assessment process can be seen in Appendix 2. A complete Risk Assessment guide can be obtained, and training arranged, by the Health & Safety Advisor.
- 9.3 Employers are also under a duty to provide -
 - Facilities for first aid under the Health and Safety (First Aid) Regulations 1981
 - Adequate welfare facilities and arrangements under the Workplace (Health Safety and Welfare) Regulations 1992
 - Suitable equipment and training in their use under the Provision and Use of Work Equipment Regulations (PUWER) 1998 and the Lifting Operations and Lifting Equipment Regulations 1998
 - Suitable and sufficient Personal Protective Equipment (PPE) Personal Protective Equipment at Work Regulations 1992

Lone Working Policy and Procedures

9.4 All Accidents, Injuries and Dangerous Occurrences, including violent incidents, must be reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR). See fig. 5.1

All threats of aggression or violence must be taken seriously, as should the production of a weapon or potential weapon. Where there has been an incident considered serious by the person affected, the Police should always be contacted by the '999' number prior to a call to the relevant Line Manager.

Where Officers are the target of equality and diversity issues themselves, e.g. Black Minority Ethnic or disabled staff, might suffer harassment or lack of cooperation on these grounds from members of the public, this would need to be reported to the Line Manager, who will monitor and deal with the Equality Impact Monitoring and Assessment.

9.5 In certain high risk activities there may be specific prohibitions on working alone, for example, work in confined spaces, excessive noise, electrical work near live conductors and working out of normal office hours.

But for most Council staff, their managers will need to ensure that in complying with their general legal duties to carry out risk assessment, they take full account of the risks of work carried out alone and make sure that these risks are avoided or reduced to a low level so far as is reasonably practicable.

A List of main activities, not exhaustive, undertaken by outside officers is shown in Appendix 3.

10. Risk assessment -

10.1 Assessing and preventing the risks of working alone - what does it involve?

- 10.2 To address the risks associated with lone working, a risk assessment must be carried out by a 'competent person'. Risk assessment is a process of identifying what hazards exist in the workplace and how likely it is that they will cause harm to employees and others and how severe is the harm likely to be. It is the first step in deciding what prevention or control measures that employers, such as the Council, may need to take to protect their employees and people who come into contact with the employees carrying out their duties, from harm.
- 10.3The need to assess the risks associated with any activity also applies to employees who work alone. The risk assessment process is the responsibility of the Manager and they should ensure that the hazards are identified and measures are put into place to avoid or control the risks. All available

Lone Working Policy and Procedures

information including details from previous accidents/injuries/incidents, and consultation with Safety Representatives should be considered.

- 10.4 Control measures may include instruction, training, supervision, or protective equipment. Managers should ensure that control measures are used and a periodic review of the risk assessment takes place to ensure that it is still relevant.
- 10.5 It is important that employees are consulted on the risk assessment as they will be a valuable source of information and advice. Where risk assessment shows that it is not possible for the work to be done safely by a lone worker, alternative arrangements should be considered (i.e additional employees).
- 10.6 Where a lone worker is working at another employer's workplace, that employer should inform the lone workers manager of any risks and control measures that should be taken. This will help the manager of the lone worker to properly assess the risks.
- 10.7 Risk assessment will decide on the level of supervision required. Where a high risk activity has been identified additional employees/resources must be considered before activities commence.
- 10.8 When carrying out risk assessments for lone workers, the Council provide General Risk Assessment Guidance, Policy and Procedures and Training as necessary.

11. Risks associated with lone working -

- 1.1 Establishing safe working practices for lone workers is no different from organising the safety of other employees. Managers will need to have an understanding of relevant legislation and standards that apply to their work activities and then assess whether those requirements can be met safely by lone workers.
- 11.2 Lone workers face particular problems. Some of the issues which need special attention when planning safe working arrangements are covered by answering the questions below -
- 12 Can the risks be adequately controlled by one person? –
- 12.1 Lone workers should not be at any more risk than other employees. This may require additional risk control measures. Any precautions should take account of normal work and foreseeable emergencies, e.g. fire, equipment failure, illness and accidents. Managers should identify situations where people work alone and consider the following –

Environment –

Lone Working Policy and Procedures

- a. Does the workplace present a special risk to lone workers?
- b. Is there a safe way in and out for one person

Personal Safety –

- a. Is there a risk of violence? Obtain as much information about the likelihood of violence as possible, either about the location or service users.
- b. Take advice from other staff members, agencies or others involved. In the absence of evidence assume a worst case scenario.
- c. Are women especially at risk if they work alone?
- d. Are young workers especially at risk if they work alone?

Equipment and manual handling operations – for example –

- a. Can any temporary access equipment, such as ladders or trestles, be safely handled by one person?
- b. Can all of the plant, substances and goods involved in the work be safely handled by one person? Consider if the work involves lifting objects too large for one person, or whether more than one person is needed to operate essential controls for the safe running of equipment.

13.1 Is the person medically fit and suitable to work alone? -

Check that lone workers do not have a medical conditions that makes them unsuitable for working alone (seek occupational medical advice if necessary). Consider both normal and foreseeable emergencies that may affect individual employees.

14 What training is required? -

14.1 Training is particularly important where there is limited supervision to control, guide and help, in situations that may be beyond the experience of staff members. Training will be critical in avoiding panic reactions in unusual or emergency situations. It is important that lone workers are trained in how to assess situations that are likely to escalate beyond their control and how to control the situation until it is resolved or assistance arrives. Lone workers need to be sufficiently experienced and able to understand the risks and control measures fully. Managers should set the limits as to what can and cannot be done whilst working alone. They should ensure that employees are competent to deal with circumstances which are new, unusual or beyond the scope of training, such as when to stop work and seek advice from a supervisor, and how to handle aggression.

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15 How will the person be supervised? -

15.1 Lone workers cannot be subject to constant supervision but it is still necessary to provide a level of supervision necessary for the lone worker to work safely.

The extent of the supervision required will depend on the risks involved and the ability of the lone worker to identify and handle these risks. Lone workers new to a job, undergoing training, doing a job that presents special risks, or dealing with new situations may need to be accompanied at first. The level of supervision required is a decision for managers and should be based on the findings of a risk assessment, the higher the risk, the greater the level of supervision required. It should never be left to individuals to decide whether they require assistance.

16 How will staff be monitored? -

16.1 Procedures will need to be put into place, by Managers/Supervisors, that monitor lone workers in a suitable manner to ensure their safety. These may include

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- Supervisors periodically visiting and observing people working alone.
- Confirmation of diary visits.
- Regular contact between lone worker and supervisor using either telephone or radio.
- Automatic warning devices that operate if specific signals are not received periodically from the lone worker.
- Other devices designed to raise the alarm in the event of an emergency and which are operated manually or automatically by the absence of activity.
- Checks that the lone worker has returned to their base or home on completion of a task.
- It is important that if a warning is received or lone workers do not report on schedule that there is a procedure in place to locate and provide help to the lone worker if that is necessary.
- It is essential to cover out of hours working in any of these arrangements.

17 What happens in an emergency? -

- Lone workers should be capable of responding correctly to emergencies.
- Risk assessment should identify foreseeable events.
- Emergency procedures should be established and employees trained in how to follow them.
- Information about emergency procedures and danger areas should be given to lone workers who visit premises you control.

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- Lone workers should have access to adequate first aid facilities and mobile workers should carry a first aid kit for treating minor injuries. Occasionally risk assessment may indicate that lone workers need to be trained in basic first aid.
- Home working a specific checklist has been produced for home working and should be used in conjunction with the above. The checklist can be obtained from the Health and Safety Advisor within the HR & OD Service.

18 Further assistance and advice -

18.1 Further advice, information and assistance is available from the Corporate Health and Safety Advisor.

Tel: 01527 881399

Email: m.Cartwright@bromsgrove.gov.uk

Lone Working Policy and Procedures

Appendix 1

Suggested Training

- Managing Safely (Managers & Supervisors)
- Risk Assessment (Managers & Supervisors)
- Dealing with Violence and Aggression
- Customer Care
- Equality and Diversity
- Manual Handling
- Health and Safety Awareness
- Violence at Work
- Home Working

Lone Working Policy and Procedures

Appendix 2

Establishing Level of Risk

- 1. Identify hazards.
- 2. Identify who is at risk (Employee, Public).
- 3. Assess the level of risk.

Risk Assessment chart

Severity

Geventy							
Likelihood	No Injury or	Minor Injury	Absence from	Major Injury	Fatality or		
	Damage		work (3days+)		Severe		
					Disability		
Very Unlikely		LOW	LOW	LOW	LOW		
Unlikely		LOW	LOW	MEDUIM	MEDUIM		
Possible		LOW	MEDUIM	HIGH	HIGH		
Likely		MEDUIM	HIGH	HIGH	HIGH		
Highly Likely		MEDUIM	HIGH	HIGH	HIGH		

- 4. Enable control measures to be sought and implemented to remove the risks, or minimise the risks so they are adequately controlled.
- 5. When planning to introduce lone working, employees <u>must</u> be consulted. This is a requirement of the Health and Safety (Consultation with Employees) Regulations 1996, and Safety Representatives and Safety Committee Regulations 1977, in workplaces with a recognised Trade Union.

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6. Review Risk Assessment periodically.

Appendix 3

ACTIVITIES/TASKS UNDERTAKEN BY OUTSIDE OFFICERS

- Home Visits
- Travelling to site
- Transporting equipment etc..
- Use of ladders/steps/equipment
- Industrial site/premises visits
- Working out of normal office hours
- Working in remote and isolated areas
- Working from home
- Building site visits
- Carrying out enforcement / surveillance duties
- Carrying loads in and out of vehicles
- Setting up equipment/seating etc.. for meetings at local village halls
- Caretakers securing buildings
- Handling money
- Maintenance work
- Working out in extreme weather conditions
- Working in kiosks/shops
- Monitoring Car parks

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HEALTH AND SAFETY AT WORK

RISK ASSESSMENT

POLICY AND PROCEDURES

MAY 2007

Human Resources and Organisational Development Bromsgrove District Council Burcot Lane Bromsgrove Worcs. B60 1AA

Health and Safety Advisor: 01527 881399

RISK ASSESSMENT PROCEDURE

1. <u>Introduction</u>

It is the duty of the Council to identify all hazards, evaluate the risks and implement suitable control measures associated with its undertaking.

The risk assessments must be documented and its findings communicated to all relevant employees.

The aim of this procedure is to support managers and employees in their roles and responsibilities in relation to risk assessments. It will assist in identifying areas where further controls are required and set an action plan aimed at reducing the risks.

2. <u>Legal Requirements/Reference Documents</u>

- Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- Bromsgrove District Council Health and Safety Policy

The Council must make a suitable and sufficient assessment of:

- (1) the risks to the health and safety of its employees to which they are exposed whilst they are at work; and
- (2) the risk to the health and safety of persons not in its employment arising out of or in connection with the conduct of our undertaking.

The Council must record the risk assessment, identifying the group of people who are identified by it as being at risk.

The following definitions have been taken from the documents listed above:

<u>"The assessment"</u> means risk assessment to comply with the legal requirements laid out as above.

"New or expectant mother" means an employee who is pregnant, who has given birth within the previous 6 months, or who is breastfeeding.

<u>"Young person"</u> means a person who is over the minimum school leaving age but under the age of 18.

<u>"Managers"</u> refers to anyone who is responsible for employees or is a person with a designated responsibility for carrying out risk assessments.

3. Scope of the Procedure

The risk assessment procedure shall apply to all tasks, activities, locations and work equipment that are associated with Bromsgrove District Council's undertaking. All foreseeable risks to employees or non-employees must be assessed in line with "The Management of Health and Safety at Work Regulations 1999".

4. Arrangements for Securing the Health and Safety of Employees

4.1 General Principles of risk assessment

It is recognised that managers already carry out de facto risk assessments on a daily basis during the course of their work; they will note changes in working practice, recognise faults as they develop and they will take necessary corrective actions.

The "Management of Health and Safety at Work Regulations 1999" requires employers to undertake a systematic examination of the hazards associated with their work activity and record the findings.

A risk assessment should involve identifying the hazards present in any undertaking (whether it arises from work activities or from other factors, e.g., layout of the premises, inclement weather etc.), and then evaluating the extent of the risks involved, taking into account whatever precautions are already being taken.

4.2 Purpose of risk assessment

The purpose of risk assessments is to enable the Council to determine what measures are required to protect employees and non-employees from hazards.

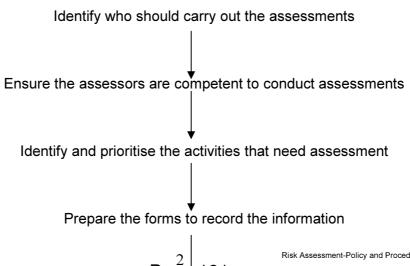
It should ensure employees are safe whilst carrying out work activities, and that a safe place of work is maintained at all times.

The risk assessment should also protect non-employees by considering what controls are required to ensure they are free from hazards caused by the Council's undertaking.

In addition, a risk assessment will ensure that the Council complies with duties placed under relevant statutory provisions.

4.3 Key steps to carrying out risk assessments

The basic approach to the management of risks can be summed up in the following steps, which are reflected in the requirements of the Management Regulations:



Enlist/inform employees required for the assessment

Carry out the assessment by:

- 1) Identifying the hazards
- 2) Deciding who is at risk and how
- 3) Ensuring that the controls are suitable
- 4) Identifying the risks and drawing up an action plan
- 5) Implementing the action plan

Monitor and Review the assessment

4.4 Risk Assessors

Risk assessors should be familiar with the Regulations and have received the relevant training to ensure they are competent to conduct assessments. The Council's Risk Assessment in the Workplace Course has been designed to do this and covers the following:-

- The legal duties relating to risk assessment
- The process of risk assessment
- How to use the forms
- Opportunities to conduct assessments
- Problem solving

In complex situations they may need to enlist the expertise of others, e.g., the Health and Safety Advisor or a specialist in a particular field.

4.5 Using the Council's risk assessment process and form

To comply with the Management of Health and Safety at Work Regulations 1999 the Council has devised a standard risk assessment form. The format ensures the Council complies with relevant legislation. All risk assessments should be completed using the Council's risk assessment format.

A management guidance note is available from the Health and Safety Advisor for this procedure for reference as to how to complete the risk assessment form. An action plan summary form is used in conjunction with the risk assessment form.

4.6 Training

Training will be provided to ensure that relevant employees are competent to complete suitable and sufficient risk assessments. This training should be updated on a regular basis to ensure that good practice is maintained throughout the organisation.

All new employees, under their induction, shall be informed of their role and responsibilities in relation to risk assessments and the Council's procedures. The training is also available to all employees and should be considered by managers when conducting annual training plans/performance reviews.

4.7 Young persons' risk assessment

Managers who employ young persons (including volunteers, work experience and casual employees) must complete a young persons' risk assessment before engaging them in employment.

The assessment must consider the young persons lack of experience, the absence of awareness of existing or potential risks, the fact that they may not have fully matured as well as the level of additional supervision required.

In addition, the Council must not employ a young person for work:

- (a) that is beyond their physical or psychological capacity;
- (b) that involves harmful exposure to agents that are toxic, cancer causing, cause heritable genetic damage or harm to an unborn child, or which in any other way chronically affect human health;
- (c) involving harmful exposure to radiation;
- (d) involving the risk of accidents which may be reasonably be assumed cannot be recognised or avoided by young persons owing to their insufficient attention to safety, or lack of experience, or training;
- (e) in which there is a risk from extreme close, heat, noise or vibration;
- (f) where they may come into contact with dangerous machinery.

4.8 New or expectant mother risk assessment

The regulations require a risk assessment to be carried out when an employer employs a woman of childbearing age even before she is pregnant. The assessment is designed to ascertain whether the work could be a risk to her health, or the health of her child should she become pregnant.

The most common 'hazards' within the Council's activities will be associated with manual handling, slips, trips and falls, or shift working. However, other issues could involve being subjected to violence, chemical or biological agents, noise and fatigue.

When conducting a new or expectant mother risk assessment managers should consider what provisions are required to secure the health, safety and welfare of employees. Provisions may for example include altering working conditions or hours of work, changing roles and responsibilities or suspending her from work to secure her safety for the duration of her pregnancy.

4.9 Records

Risk assessments must be stored at the workplace at which they are relevant. They should be in a place that can be accessed by employees at all reasonable times.

Risk assessments may be required as evidence following an accident and/or a visit by the Health and Safety Executive. Risk assessments must be retained at the site of origin for at least 3 years from when they are no longer valid.

5. Responsibilities

5.1 <u>All employees' responsibilities</u>

- 1. Employees are responsible for ensuring their own safety and that of others when conducting their tasks. They should report to management any concerns immediately so that appropriate action can be considered.
- 2. Employees must comply with the system of work prescribed following a formal risk assessment. It is the individual's responsibility to have read and understood the formal risk assessments.
- 3. If any employee is unsure about safety relating to any task or equipment they must not undertake that task or use the equipment without further instruction and advice.
- 4. Where equipment is provided for a task, employees must make full and proper use of it in accordance with the training and instruction given and the systems of work defined by their line manager.
- 5. Employees must inform their manager of any concerns or health conditions affecting their capabilities.
- 6. Employees must inform their manager if they are pregnant or have a medical condition likely to render them unfit to safely carry out their duties
- 7. All accidents and incidents must be reported to the line manager immediately, following the Council procedures.
- 8. Employees must attend and participate in the agreed level of training, and demonstrate the appropriate knowledge and skill to the agreed level of competence.

Employees should be aware that failure to comply with this procedure may result in action under the Council's Disciplinary Procedure.

5.2 <u>Managers' responsibilities</u>

- 1. Managers must be aware and have an understanding of the Council's risk assessment procedure.
- 2. Managers must, in accordance with the Health and Safety at Work etc. Act 1974, and the Management of Health and Safety Regulations 1999, ensure that employees are not exposed to any foreseeable risk or injury or ill health as far as is reasonable practicable.
- 3. Managers must, in accordance with the Health and Safety at Work etc. Act 1974, and the Management of Health and Safety Regulations 1999, ensure that non-employees (members of the public, contractors, etc.) are not exposed to any foreseeable risk of injury or ill health as far as is reasonably practicable.
- Managers are required to systematically assess and record the risk of injury to their employees. To assist in this process managers have access to Risk Assessment training.
- 5. Managers must consult with employees when completing risk assessments, and thus detail a system of work for minimum risk at all times. All sections of the risk assessment form must be completed. Risk assessments must be stored in a place where employees can access it at any reasonable time.
- 6. Managers are responsible for ensuring that the outcome of risk assessment is available for employees to view.

- 7. All managers must ensure that every employee within their sphere of control, including relief, agency cover, work experience etc., is made aware of the prescribed safe systems of work.
- 8. Managers must ensure that this procedure has been brought to the attention of all employees within their responsibility and that records are available to demonstrate they have undertaken this task.
- 9. Managers are responsible for ensuring that employees understand the risks associated with their work and the safe procedures to be followed so that accidents and injuries can be prevented.
- 10. Managers have a responsibility to ensure (so far as is reasonable practicable) that staff are fit to perform the tasks assigned, and where appropriate, arrange a referral (through Human Resources) to the Occupational Health Service.
- 11. Managers must ensure that risk assessments are reviewed and stored appropriately.
- 12. Managers should be aware that failure to comply with this procedure may result in action under the Council's Disciplinary Procedure.

6. **Guidance for Risk Assessors**

This guide is intended to provide assistance to assessors, in general risk assessment. It is not intended as a replacement for the proper training of assessors.

Risk assessment is nothing more than thinking about what is being done, what can go wrong and deciding what, if anything else, needs to be done to prevent harm to people. It is formal, systematic and recorded. The purpose of risk assessment is to reduce the numbers and severity of accidents and ill health at work.

A risk assessment involves identifying the hazards present, whether arising from work activities or from other factors, such as the layout of the premises where the work activity is taking place. Then evaluating the extent of the risks involved and taking into account whatever precautions are already being taken. Then deciding if these are sufficient to reduce the risk to the lowest level possible and, if not, what extra precautions need to be taken. A risk assessment does not need to be perfect, it needs to be suitable and sufficient.

The principles outlined in this document apply to all assessments and not just general risk assessment. Where specific assessments are required further information and training on the specific requirements is needed. The way in which the general risk assessment process is related to more specific assessments is detailed in the flowchart in Appendix 1.

7. Definitions

7.1 <u>Hazard</u> A hazard is anything with the potential to cause harm (this can include substances, machines, methods of work and a range of other aspects or work organisation.

Risk The risk is the likelihood that the harm from a particular hazard will be realised. The term risk covers both the likelihood that harm will occur and its severity. The extent of the risk covers the people who may be affected by a risk, e.g., the number of people who might be exposed and the consequences or severity for them. The risk assessment chart detailed below (paragraph 7) will assist in making these judgements.

- 7.3 <u>Harm</u> An injury caused by the risk, which may be physical, mental or financial.
- 7.4 <u>A suitable and sufficient risk assessment</u> To be suitable and sufficient the assessment must:
 - Identify the significant risks arising out of the work, this means
 focusing on those risks that are liable to arise because of the work
 activity. Trivial risks can usually be ignored, as can risks arising from
 routine activities associated with life in general, unless the work
 activity compounds those risks.
 - Enable the employer to identify and prioritise the measures that need to be taken to comply with current legislation and best working practices. The general duty imposed on all employers is to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all their employees.
 - Be appropriate to the nature of the work and as such should remain valid for a reasonable period of time. This will enable the significant findings to be used positively by management, e.g., to change working procedures or to introduce medium to long term controls. The Council's risk assessment form will lead you through the process systematically.

8. Practicable Risk Assessment

There are no fixed rules about how a risk assessment should be carried out. Each assessment will depend upon the specific work activity and the type and extent of the hazards and risks. Consideration should also be given to what would happen if something went wrong with the activity. Above all the assessment needs to be practical with careful consideration given to working arrangements and the individuals involved.

It is important that a structured approach to risk assessment is adopted, and a risk assessment should:

• Ensure that all relevant risks or hazards are addressed. The aim is to identify the significant risks in the workplace. Do not obscure those risks with excess information or by concentrating the trivial risks that occur in normal life. By systematic in looking at hazards and risks. For example, in each operational area, it may be easier to look at all electrical or manual handling hazards together. In some cases, the most effective approach will be to look at specific work activities task by task. Decide which approach or combination is most suitable for you. Also consider the consequences that happen when the risk identified actually occurs and the steps to be taken to reduce the impact.

- Address what actually happens in the workplace. Actual practice may differ from written procedures, and is often a route whereby risks creep in unnoticed. Think about non-routine operations, e.g., maintenance or deliveries or any interruption to the usual work activity. Investigate why any written procedures are not followed, they may be impractical, or the type of training or information provided may be inadequate. Any training or information given must be sufficient to enable staff to work safely.
- Ensure all groups of people that might be affected are considered. Employees, contractors, residents, pupils, members of the public. It is important not to forget 'out of hours' activities, cleaners, visitors or extra curricular activities.
- Identify groups of people who might be particularly at risk. For example young or inexperienced workers those who work alone, home workers, any disabled staff, new or expectant mothers, or staff on a phased return to work.
- Take account of existing preventative or precautionary measures.
 They may already reduce the risk sufficiently, but consider if they are working properly. Does action need to be taken to ensure that the control measures are maintained?

9. Assessments under any other specific regulations

Where assessments have already been carried out under more specific regulations, e.g., working with chemicals under the Control of Substances Hazardous to Health Regulations, it is not necessary to repeat the assessment as long as they remain valid, but it is essential to ensure that all significant risks are covered. Review these assessments and ensure that all training is up to date and that any relevant changes have been made to the documentation. If something needs improving note this on the general risk assessment form for incorporation in the managers' action plan.

In other cases, tasks will be identified that need assessment under specific regulations, e.g., use of display screen equipment or excessive noise, where no action has been taken. It should be noted on the general risk assessment that an assessment under more specific regulations is required.

10. Recording

It will be necessary to record details of the assessment itself, in addition to the significant findings. It may be necessary to demonstrate to the Service Head, the Council's Health and Safety Adviser, Safety Representatives or an HSE Inspector, that risk assessments have been undertaken for each operational area. Records will also ensure that if circumstances change the assessment can be reviewed and any necessary changes recorded. The Risk Assessment Form and the form guide are designed to ensure that a systematic approach is followed and a proper record kept.

Risk assessments previously undertaken and recorded on previous forms remain valid until a review is carried out or for some other reason become invalid. The form should be used for all new assessments and when reviewing existing risk assessments.

11. Review of the Assessment

Every assessment should be reviewed at regular frequencies based on the residual risk after the present control measures that are in place. The chart (in Section 2) is a guide to when the assessment should be reviewed. The higher the residual risk, the more often a review be carried out. As a guide:

High Risk - Weekly

Medium Risk - Monthly

Low Risk - Annually

The review time can be changed from the above if the assessor has concerns about the risk involved.

12. Risk Assessment Chart

To assist in quantifying the risk, the chart below should be used. Assess the risk; consider the likelihood of the hazard occurring and the severity of the consequences. To determine the degree of risk, find the point in the table below where the likelihood and the severity meet.

SEVERITY

LIKELIHOOD	No Injury or Damage	Minor Injury	Absence from work (3 days +)	Major Injury	Fatality or Sever Disability
Very Unlikely		LOW	LOW	LOW	LOW
Unlikely		LOW	LOW	MEDIUM	MEDIUM
Possible		LOW	MEDIUM	HIGH	HIGH
Likely		MEDIUM	HIGH	HIGH	HIGH
Highly Likely		MEDIUM	HIGH	HIGH	HIGH

DEGREE OF RISK – ACTION REQUIRED

HIGH - Work must not be started until the risk has been reduced. Considerable resources may have to be allocated to reduce the risk to an acceptable level. Where the risk involves work in progress, urgent action should be taken.

 Work must not be started or continued until the risk has been reduced. If it is not possible to reduce the risk even with unlimited resources, work has to remain prohibited. **MEDIUM** - Efforts **must** be made to reduce the risk, but the cost of the prevention should be carefully measured and limited. Risk reduction measures should be

implemented within a defined time period.

LOW - No additional controls are required. Consideration may

be given to a more cost – effective solution or improvement that imposes no additional cost burden. Monitoring is required to ensure that controls are

maintained.

TRIVIAL - No action is required and no documentary records need

to be kept.

NOTE: 'LOW' here means that risk has been reduced to the lowest level that

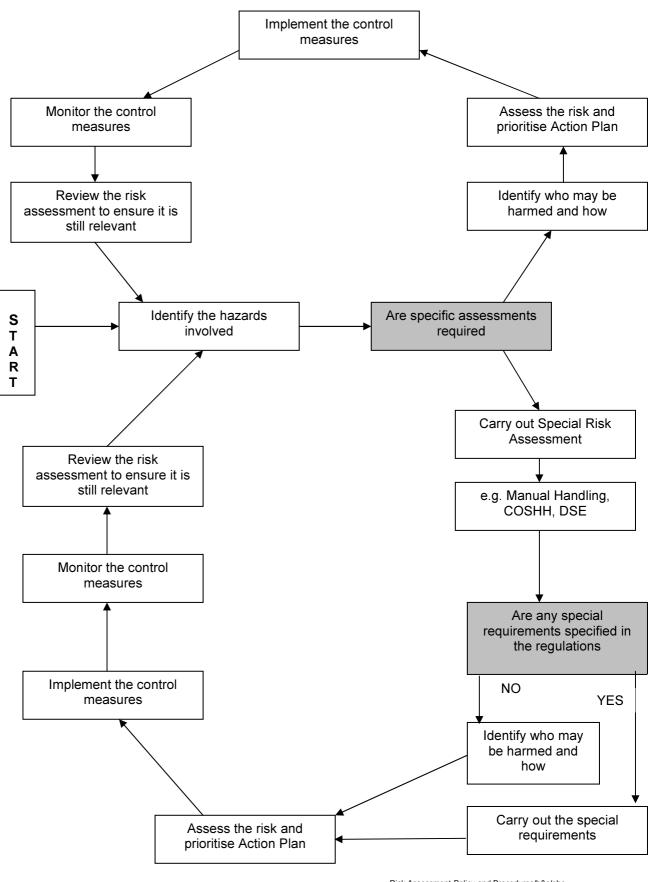
is reasonably practicable

13. Further assistance

Information regarding control measures to eliminate or reduce risks can be found in the Council's guidance and codes of safe working. If you experience any problems, please talk to your line manager. Advice and information is available from the Council's Health and Safety Advisor.

APPENDIX 1

General Risk Flowchart



Page 200

Risk Assessment-Policy and Procedures/h&s/eho

14. GENERAL RISK ASSESSMENT FORM COMPLETION GUIDE

This is a step by step guide to assist with the completion of the Corporate General Risk Assessment Form (see blank risk assessment form in Appendix 2 and completed example lines of two separate activities in Appendix 2A).

14.1 General Assessment Details:

Allocate a number to the assessment sheet to assist in record keeping. Enter the name of the service, the section and the workplace address or location where the assessment is being carried out. The name of the person carrying out the assessment should be entered, and signed when the assessment has been completed.

- **1. Serial Number:** Allocate a number to the work task/activity.
- **2. Work Task/Activity:** Identify the hazards associated with each work task.
- **3. Hazards Identified:** List the identified hazards associated with each work task.
- 4. **Person(s) at Risk:** List the categories of people that are or may be at risk from each of the identified hazards, for example:
 - Employees
 - Particularly vulnerable staff (new and expectant mothers, young persons under 18 years, staff with disabilities)
 - Service users/clients
 - Contractors
 - Members of the public
- 5. Existing Controls:

State any existing controls in use, associated with each identified hazards, for example:

- Have any safe working instructions been given?
- Have staff had relevant training?
- Has personal protective equipment been provided?
- 6. Degree of Risk:

Assess the risk; consider the likelihood of the hazard occurring and the severity of the consequences. To determine the degree of risk, find the point in the table below where the likelihood and the severity meet, (LOW/MEDIUM/HIGH) and state this on the form.

SEVERITY

LIKELIHOOD	No Injury or Damage	Minor Injury	Absence from work (3 days +)	Major Injury	Fatality or Sever Disability
Very Unlikely		LOW	LOW	LOW	LOW
Unlikely		LOW	LOW	MEDIUM	MEDIUM
Possible		LOW	MEDIUM	HIGH	HIGH
Likely		MEDIUM	HIGH	HIGH	HIGH
Highly Likely		MEDIUM	HIGH	HIGH	HIGH

14.2 <u>DEGREE OF RISK – ACTION REQUIRED</u>

HIGH - As described in Section 12, Pages 9 and 10.

MEDIUM - As described in Section 12, Pages 9 and 10.

LOW - As described in Section 12, Pages 9 and 10.

The degree of risk should be eliminated or reduced to the lowest level possible, with proper control measures maintained.

7. Remedial Action: Consider the degree of risk and the

existing controls, then state any remedial action(s) that may need to be taken to eliminate or reduce the risk. An action plan will need to be determined based on the degree of risk (as described in 6

above).

8. Action Plan: Remedial action(s) will need to be

progressed and completed. These should be recorded by the Assessor on the form shown in Appendix 3 – Managers' and Assessors' Action Plan, and passed to the appropriate manager

for completion.

9. Residual Risk: Use the table in 5 above to assess the

residual risk. Do this by considering the existing controls and any remedial action

taken.

10. Other Assessment: If the general risk assessment has

identified that a more specific assessment is required under other Regulations, enter the type of assessment that is needed, e.g., Manual

Handling. If no other assessment is needed make no entry in this column.

11. Review Date Due:

Reviews of work task/activity assessment should take place periodically to keep the assessment live. A review should be carried out of work tasks/activities, following changes such as new staff, new equipment, working methods etc. If any of these are due to take place then a review date should be established.

12. Hazard Checklist:

Suggested hazards by type can be found in Appendix 4 to assist in hazard identification. The hazard checklist is arranged as follows:

- Hazards associated with plant and equipment (including non-powered plant and hand tools).
- Hazards associated with materials and substances.
- Hazards associated with the workplace.
- Hazards associated with the work environment.
- Hazards associated with the work methods.
- Hazards associated with the work organisation.
- Other types of hazard.

Assessment Sheet No.		
Service	Section	
Workplace Address or Location		
Assessment Date	Review Date Due	
Name of Assessor	Assessors Signature	

	Serial Number	Work Task/Activity	Hazard Identified	Person(s) at Risk	Degree of Risk	Existing Controls	Remedial Action Required	Residual Risk	Other Assessment
Ū									
Dage 9									
700									

EXAMPLE

General Risk Assessment Form

Assessment Sheet No.	SM0001
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Service (1) Planning and Environmental Services (2) Street Scene and Waste Managment | Section (1) Reception / (2) Recycling

Workplace Address or Location (1) The Council House / (2) Depot Services

Assessment Date	1 January 2003	Review Date Due	1 January 2004
Name of Assessor	Ann Other	Assessors Signature	AO

	Serial Number	Work Task/Activity	Hazard Identified	Person(s) at Risk	Degree of Risk	Existing Controls	Remedial Action Required	Residual Risk	Other Assessment
Page 205	1.	Dealing with public enquiries at reception	1. Assault from public	Employees, Public	MEDIUM	Reception area designed to separate staff from public. Panic button fitted. Two staff on duty at all times.	 Staff to be given training in dealing with aggressive behaviour Review written safe working instructions. 	LOW	
	2.	Emptying boxes of glass into cages	1 Noise from dropping. Bottles into cages.	Recycling Operatives. Public.	MEDIUM	 Appropriate type of ear defenders to be used at all times when sorting glass. Noise assessment to be carried out. Soundproofing of cage. 	 Arrange staff refresher training. Arrange work rotation where possible. Review written safe working instructions. Review risk assessment 	LOW	Manual Handling

ACTION PLAN - MANAGER'S SUMMARY

Date			
Risk Level	By Who	Target Date	Date Completed

HAZARD CHECKLIST

The hazard checklist is arranged as follows:

- Hazards associated with plant and equipment (including non-powered plant and hand tools).
- Hazards associated with materials and substances.
- Hazards associated with the workplace.
- Hazards associated with the work environment.
- Hazards associated with the work methods.
- Hazards associated with the work organisation.
- Other types of hazard.

Hazards associated with plant and equipment

(including non-powered plant and hand tools

	Mechanical Hazards						
Trapping Hazards	Impact Hazards (includes puncture)	Contact Hazards (cutting, friction or abrasion)	Entanglement Hazards (rotating parts)	Ejection Hazards (e.g. of work piece or part of tool)			
Two moving parts or one moving parts or one moving part and a fixed surface Conveyor belt and drive Vee belt and pulley Power press Mangle Guillotine Scissors Stapler	Something that may strike or stab someone or can be struck against Moving vehicle Robot arm Sewing machine Drill Hypodermic needle Pendulum Crane hook	Something sharp or with a rough surface Knife, chisel, saw etc. Blender blade Circular saw blade Sanding belt Abrasive wheel Hover mower Blade	 Drill chuck and bit Power take off shaft Pipe threading machine Abrasive wheel 	Cartridge tool Thickness machine Using hammer and chisel Abrasive wheel			
Using hammer							

Electrical, Pressure, Stored Energy, Stability, Overloading					
Electrical Hazards	Pressure Hazards	Stored Energy Hazards	Stability Hazards	Overload/defective due to mechanical failure	
Electricity	 Compressed air Compressed gas Steam boiler Vacuum Hydraulic system 	 Springs under tension Springs under compression Hoist platform/lift cage Conveyor tension weight Raised tipper lorry body Counterweight Load carried by 	 Inadequate crane base Forklift truck on slope Machine not bolted down Mobile scaffold too high Scaffold not tied 	 Crane overload Chain sling Eye-bolt overload Scaffold overload Hopper overfill 	

Radiation, Noise, Vibration and Thermal Hazards						
Radiation Hazards	Noise Hazards	Vibration Hazards	Thermal Hazards			
Ionising Radiation: • X Rays	pneumatic drill operation of plant	pneumatic drill operation of plant	hot surfaceusing blow lampwelding flame/arc			
α or β radiationneutrons			refrigerant steam			
Non-ionising radiation:						
microwave radio frequency						
• laser						
ultraviolet						
• infra-red						

Hazards Associated with Materials and Substances

Fire/Explosion Hazards			
Combustion Hazards	Flammable Substances (including highly and extremely flammable – see also explosive below)	Oxidising Substances	Dust Explosion Hazards
timber stack	• petrol	organic peroxide	• coal dust
coal store	propane gas	potassium permanganate	• wood dust
paper store	methane	• nitric acid	aluminium powder
magnesium	carbon monoxide	explosive material	• flour
•]straw	methanol	• fireworks	
plastic foam	paraffin	proprietary explosives	
oxygen enrichment	• acetone	• detonators	
Cilioninent	• toluene	• some oxidising agents	
		highly flammable gas	

Hazardous Substances				
Corrosive/Irritating Materials	Dust Explosion Hazards	Fumes	Vapours	Gases
sulphuric acid caustic soda man-made mineral fibre	 asbestos fibres silica dust dust mite faeces pigeon droppings coal dust grain dust wood dust 	lead fumerubber fumeasphalt fumes	 acetone 1,1,1 trichloroethane dichloromethane benzene isocyanates 	 carbon monoxide hydrogen sulphide sulphur dioxide carbon disulphide

Mists	Asphyziants	Ingestion Hazards	Contact Hazards
• oil mist	• nitrogen	toxic, harmful, corrosive and irritant liquids	• swarf
printing ink	carbondioxide	,	• rough timber
mist		 poisons, e.g. all harmful aerosols, polluted water, 	
• water-	• argon	contaminated food and	concrete blocks
legionella		drink	molten metal
			for any formal
			frozen food

Hazards Associated with the Workplace				
Access	Work at Heights	Obstruction	Stacking/Storing Hazards	Work Over/Near Liquids, Dust, Grain etc.
Trips/Slips:	fragile roof	low headroom	high stacks	• grain silo
damaged floors	edge of roof	• sharp	insecure stacks	• tank
trailing cables	edge of mezzanine floor	projections	inadequate racking	• reservoir
• oil spills	work on ladder		stacking at	• sump
water on floor	• erecting		heights	work over river
• debris	scaffold			work near canal
• wet grass	hole in floor			
sloping surface				
• uneven steps				
changes in floor level				
Access:				
locked exits				
obstructed egresses				
long exit route				

Hazards Associated with the Work Environment			
Light	Temperature	Confined Spaces	Ventilation
• glare	Indoor Work:	•work in tank	• fumes
poor lighting	work in furnace	• chimney	• odours
stroboscopic effect	• cold room	• pit	• tobacco smoke
	Outdoor Work:	• basement	
arc welding molten metal	hot weather	• unventilated room	
• moiten metal	• cold weather	• vessel	
	wind chill factor	• silo	
	work in ran, snow etc.		

Hazards Associated with Work Methods		
Manual Handling	Repetitive Movements	Posture
• lifting	keyboard work	seated work
lowering	using screwdriver	work above head height
carrying	using hammer and chisel	work at floor level
• pushing	bricklaying	
• pulling	plucking chickens	
hot/cold loads	production line tasks	
• rough loads		
• live loads, i.e., person or animal		

Hazards Associated with Work Organisation		
Contractors	Organisation of Work	Work in Public Areas
work above employees	monotonous work	trailing cables
use of harmful substances	• stress	traffic/plant movement
contractors' welding	too much work	obstruction to blind person
• process fumes	lack of control of job	obstruction to prams, etc.
services (e.g., underground electricity cables	work too demanding	work above public
stored hazardous materials		

Other Types of Hazard		
Attack by Animals	Attack by People	Natural Hazards
• bees	criminal attack	• lightning
• dog	angry customer	flash flood
• bull	angry student	• trees
• fleas	drunken person	
• snake	drug abuser	
	mentally ill person	

EXECUTIVE CABINET

4th JULY 2007

CAPITAL PROGRAMME INCREASE - OAKALLS PLAY FACILITY

Responsible Portfolio Holder	Councillor June Griffiths
Responsible Head of Service	Culture & Community Services

1. **SUMMARY**

1.1 This report requests Members to agree an increase in the Section 106 grant payment of £25,000 for the provision of play facilities on the Oakalls Estate, Bromsgrove.

2. RECOMMENDATION

- 2.1 The Executive Cabinet is recommended to:
 - 2.1.1 Agree the payment of an additional £25,000 in respect of the play facilities at Oakalls from Section 106 monies.
 - 2.1.2 Request the Council to amend its capital programme for 2007 /2008 accordingly.

3. BACKGROUND

- 3.1 Members agreed to the installation of new play facilities at the Oakalls estate as part of the 2006/07 capital programme. This was included in the Section 106 schemes approved by Executive Cabinet in July 2005 and ratified at Council in September 2005.
- 3.2 At the time the capital programme was agreed the Council had received £40,000 from the developer under section 106 funding and this budget was apportioned to the scheme. However there was an additional payment of £25,000 that was outstanding.
- 3.3 Due to internal capacity issues with in the department the 2006/07 budget was rolled over into the revised capital programme fro this year as authorised by members in February.
- 3.4 Following ongoing discussion between the developer and the Council, we are now nearing a position to draw down the additional £25,000. As per the initial sum received this funding relates to the provision of play facilities in the local area under a section 106 agreement.
- 3.5 As part of the development of this scheme the Council has carried out an in depth consultation exercise with residents to establish the local requirements and

preferred locations for the facilities. It is apparent that the local expectation for play provision exceeds the current funding available (40K).

3.6 The reasons for this are:

- A desire to have a minimum of a least 2 play facilities due to the size of the development.
- The age ranges that the facilities need to be provided for, including teenage provision.
- Additional infrastructure requirements to support the play areas including bins, benches and improved access (pathways).
- 3.7 In light of this information and the knowledge in some areas that there is an additional payment of £25,000 outstanding. Members are being asked to give approval to increase the capital programme for the development to ensure that play areas installed met the local requirements as identified above and take account of future changes in demand.

4. FINANCIAL IMPLICATIONS

4.1 The additional amount requested can be met from existing Section 106 agreement, once the funding has been received from the developers, with no workers orders will be placed until the funds are drawn down from the developer.

5. **LEGAL IMPLICATIONS**

5.1 There are no legal implications from this report.

6. CORPORATE OBJECTIVES

6.1 The additional funding and enhanced play facilities will lead to a sense of community and well being and contribute to advancing the reputation and community influence of the Council.

7. RISK MANAGEMENT

- 7.1 The principal risk is that should the increased budget not be agreed, the play area provided will not meet the residents desires as expressed during the consultation and this will impact upon the Corporate Objective 02 Improvement and its priorities of customer service, reputation & performance.
- 7.2 A further risk associated with the project is should member not agree to the increased budget we will lose the flexibility with in the project to address residents needs and the economies of scale that can be gained from building two play facilities at one time.
- 7.3 Should the project be need to be delivered separately this will subject the area to two separate periods of disturbance from the building projects, specifically relating to ground works. This may impact on the Council reputation.

8. CUSTOMER IMPLICATIONS

8.1 There are no direct customer service implications, other than those highlighted in the Risk Management section.

9. OTHER IMPLICATIONS

Procurement Issues: The award of the contract for this work will be via the frame work contract.

Personnel Implications: None

Governance/Performance Management: None

Community Safety including Section 17 of Crime and Disorder Act 1998: None

Policy Implementing Section 106 policies associated with Executive Cabinet decision in July 2005

Environmental: None

Equalities and Diversity: The proposal will ensure that all ages in the local area are provided for at one time.

10. OTHERS CONSULTED ON THE REPORT

Portfolio Holder	Yes
Acting Chief Executive	Yes
Corporate Director (Services)	Yes
Assistant Chief Executive	Yes
Head of Service	Yes
Head of Financial Services	Yes
Head of Legal & Democratic Services	Yes
Head of Organisational Development & HR	Yes
Corporate Procurement Team	No

11. APPENDICES

No appendices

12. BACKGROUND PAPERS

Documentation surrounding Section 106 can be obtained regarding each project from the Legal and Democratic Services.

Oakalls Development – Residents consultation can be obtained from the Culture & Community Services department.

CONTACT OFFICER

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AGENDA ITEM 13

BROMSGROVE DISTRICT COUNCIL

EXECUTIVE CABINET

10th July 2007

TOWN CENTRE REGENERATION

Responsible Portfolio Holder	Councillor Roger Hollingworth
Responsible Head of Service	Phil Street – Corporate Director - Services

1. SUMMARY

1.1. The Report outlines the approach being proposed to regenerate the town centre taking account of planning and the pressure from residents and local businesses for redevelopment.

2. RECOMMENDATION

- 2.1. It is recommended that Executive Cabinet agree:
 - 2.1.1. the overall project plan as detailed in the report;
 - 2.1.2. to follow the OJEU route to obtaining a development partner; and
 - 2.1.3. to the need for obtaining specialist expertise to assist in the project management of the regeneration of the town centre until the end of March 2008 and that this is funded from town centre budget.

3. BACKGROUND

- 3.1. The issue of town centre development has been a feature of the Council's considerations for several years. It now forms a central priority of the District Council's plans.
- 3.2. Initial work was undertaken in 2005 primarily on the redevelopment of the market hall site and the bus station however some continuity has been lost around this. In part this was due to Council restructuring and legislative change, but also by the need to give further consideration to outcomes of the work undertaken in 2005.
- 3.3. The current momentum behind town centre redevelopment could not be greater. Therefore, the Council recognises it has to make progress as quickly as laws and regulations will permit. There has been an underlying conflict between the need to plan properly and ensure the redevelopment of the town centre conforms to law and regulation and a desire to act to address both the reputation of the high street and the cynicism amongst residents and traders which is leading to a decline in retail activity in the town centre.
- 3.4. Possessing a clear vision and plan for the town centre is crucial. The Council needs to be clear about what people want and define its own perspectives on the future redevelopment of the town based on this consultation. Furthermore, the

- redevelopment of the town centre needs to be coherent and avoid taking a piece meal approach. Land use needs to be carefully planned and the allocation of land for retail, housing, employment and leisure needs to be thoroughly considered.
- 3.5. However, it is important to recognise that commercial life and redevelopment cannot be put on hold until plans are perfected or even finalised. The current atmosphere in the town centre is deflated and businesses are leaving as there are no apparent signs of regenerative activity. Plans and words will not be enough to restore confidence, actions are critical.
- 3.6. Officers have taken substantial amounts of advice and have been to see a wide range of developments. This process of data collecting and investigation has revealed the conclusion that there is not a single accepted or agreed way to regenerate town centres. Therefore, Bromsgrove has to take its own view and plan its own way forward,

4. Area Action Plan

- 4.1. The following approach to the redevelopment of Bromsgrove town centre is being proposed. Bromsgrove needs to take a balanced approach between planning and development. To this end the Council will pursue two parallel tracks. One will be the pursuit of an Area Action Plan (AAP). This will involve consultation and evidence collection to formulate ideas for the planning of the redevelopment of the town centre. The AAP will provide the parameters for development and it will indicate land use and will shape the regeneration of the town centre. It will contain a vision for the town centre and determine how the land in the town centre will be developed in-keeping with that vision.
- 4.2. Work on the preparation of the AAP will commence in July and resources have been allocated for this purpose. The AAP process will include the preparation of an issues and options stage where a number of options formulated through consultation will be presented for comment and response. The target for the issues and options consultation is January 2008.
- 4.3. The outcome derived from an analysis of the issue and options stage will be a preferred option. This should indicate the form that town centre should assume. This preferred option will also be subject to further consultation and once this has been concluded the AAP will be submitted to Government Office.

5. Preferred Partner

5.1. The second track of the regeneration of the town centre is related to the identification of a developer. The process is that the Council will voluntarily use the Official Journal of the European Union. This will entail undertaking the necessary work to prepare an advert for the Official Journal (OJEU) and the pre-qualification questions. It will necessitate certain legal preparatory work and analysis of the responses. The process will result in presentations around set questions for a selected number of companies that have indicated an interest in the town centre redevelopment.

- 5.2. The process of using the OJEU is that it allows for a structured and transparent process. It will allow the Council to filter out those who do not have the finance, technical ability or track record for a town centre redevelopment project. The process that will be pursued is known as competitive dialogue and has to be conducted in a statutory time frame. It allows for companies to express an interest and the open nature of the approach will limit risk and any challenge from companies not invited to participate.
- 5.3. It is anticipated that an advert could appear in the OJEU by August and selection for presentation by developers in November with a developer identified by January 2008.
- 5.4. This timeframe would permit the developer to contribute to the preparation of the AAP.

6. Project Management

- 6.1. There is a considerable amount of work and specialist expertise required in pushing forward a project of this nature. The work associated with the AAP and the identification of a developer is extremely complex and involved and given the magnitude of this project it is essential that it is well managed. Presently the Council does not posses this expertise.
- 6.2. This is a major piece of work that will influence the shape of the town centre for many years. The Council needs to consider the level of resource it wants to devote to the redevelopment of the town centre. The council has already identified resource to support development of the AAP.
- 6.3. It is being recommended that specialist expertise should be obtained to assist and support the project management of the town centre regeneration. The current situation is that the complexity and detail of redevelopment has to be managed with both experience and knowledge. The Council does not possess this experience and it cannot afford to fail or follow approaches that prove inappropriate.
- 6.4. This is a complicated piece of work and is the Council's primary priority. The scale and detail of the project needs dedicated time and attention. The project has to be closely managed so that processes and procedures are pursued. This will mean working on a day to day basis with specialists preparing the Area Action Plan and liaising with other Council officers in legal and finance.
- 6.5. There is need for personnel with a knowledge and experience in town centre redevelopment. They will need to possess a track record in regeneration activities of this kind. The Council needs a project team that is stable and contains the right people. They have to be capable of working effectively with the commercial sector and technical advisers.
- 6.6. It is suggested that a project adviser would be required for some six days per month for some eight months at a cost of not more than £25,000.

6.7. Therefore, Members are being asked to support a recommendation that expertise is obtained to support the work associated with the town centre redevelopment and that this is funded from town centre budget.

7. FINANCIAL IMPLICATIONS

7.1. The principal financial implication is obtaining the time of expertise to assist in the project management of the regeneration of the town centre.

8. **LEGAL IMPLICATIONS**

8.1. The pursuit of a development partner will be a voluntary decision to use the European Union Official Journal. It is anticipated that the development partner would be recruited to work with the District Council on a long term basis. The reason for adopting a voluntary approach to OJEU is that it is likely in the process of regenerating the town centre financial transactions may occur. Therefore, it is regarded as prudent to pursue an OJEU approach to avoid challenge and disgruntlement at a later stage in the regeneration process.

9. CORPORATE OBJECTIVES

9.1. The redevelopment of the town centre is an objective of the District Council. The redevelopment is mentioned by all customer surveys and is a source of general concern amongst traders and residents.

10. RISK MANAGEMENT

- 10.1. There is major risk that failure to regenerate the town centre will result in the loss of further businesses and a growing feeling of disappointment amongst residents about the Council's inability to improve conditions in the town centre.
- 10.2. This is a complicated process and a project of this scale requires appropriate experienced expertise. This is a project that will affect the shape and appearance of the town centre for many years. Therefore, it is essential that the management of the process is adequately informed and resourced.

11. CUSTOMER IMPLICATIONS

- 11.1. The Council is aware that at most focus groups and through various forums customers express concern and disappointment with the condition of the town centre. Businesses and traders confidence is limited in the Council's response to the issues facing the town centre.
- 11.2. Many local residents do not use the town centre for either leisure or retail and the local economy is failing to attract consumers and inward investment.

12. 9. OTHER IMPLICATIONS

Procurement Issues: Use of OJEU discussed with procurement officer

Personnel Implications: A requirement to engage expert assistance to project advise.

Governance/Performance - Management Project plan to be devised to establish time frames and targets

Community Safety including Section 17 of Crime and Disorder Act 1998

Policy – N/A

Environmental – Environmental baseline study will form a key dimension of the AAP. Issue of sustainability will strongly inform the process of planning and development

Equalities and Diversity – Issues of access and mobility will significantly inform the redevelopment of the town centre.

13. OFFICERS CONSULTED ON THE REPORT

Chief Executive	Yes
Corporate Director (Services)	Yes
Assistant Chief Executive	Yes
Head of Service	Yes
Head of Financial Services	Yes
Head of Legal & Democratic Services	Yes
Head of Organisational Development & HR	Yes
Corporate Procurement Team	Yes

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Agenda Item 16

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

Agenda Item 17

By virtue of paragraph(s) 1 of Part 1 of Schedule 12A of the Local Government Act 1972.