## 1. <u>Scope of R esponsibility</u>

The Authority is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used econom ically, efficiently and effectively. The Authority also has a duty under the Local G overnm ent Act 1999 to make arrangements to secure continuous im provement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

In discharging this overall responsibility, the Authority is also responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, and which includes arrangements for the management of risk.

## 2. <u>The Purpose of the Governance Fram ew ork</u>

Corporate Governance is the system by which local authorities direct and control their functions and relate to their communities. The framework for corporate governance recommended by the Chartered Institute of Public Finance and Accountancy (CIPFA) and the Society of Local Authority Chief Executives (SOLACE) identifies three underlying principles of good governance, namely:

- 0 penness and Inclusivity
- Integrity
- Accountability

The principles of corporate governance should be embedded into the culture of each local authority. Furtherm ore each local authority has to be able to demonstrate that it is complying with these principles. To achieve this, the fram ework document recommends that all local authorities should develop a local code of corporate governance, comprising the following elements:

- Community Focus
- Service D elivery Arrangem ents
- Structures and Processes
- Risk M anagement and Internal Control
- Standards of C onduct

The Authority has form ally adopted a local code of corporate governance, consequently the principles and standards contained in the fram ework docum ent are recognised as good working practice, and hence are supported and follow ed. To this end both O fficers and M embers have had externally provided training to ensure governance arrangem ents are understood and embedded. This Statem ent form s part of the overall process within the Authority for monitoring and reporting on the adequacy and effectiveness of the corporate governance arrangem ents, particularly those in respect of risk managem ent and internal control.

The system of internal control is designed to manage risk to a reasonable level rather than to elim inate all risk of failure to achieve policies, aim s and objectives; it can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on a continuous process designed to identify and prioritise the risks to the

achievem ent of the Authority's policies, aim s and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to m anage them efficiently, effectively and econom ically. This has been in place within the Authority for the year ended 31 M arch 2012 and up to the date of approval of the Statem ent of Accounts.

## 3. The Governance Fram ew ork

The requirement to have a governance framework, incorporating a sound system of internal control covers all of the Authority's activities. The internal control environment within the Authority consists of a number of different key elements, which taken together contribute to the overall corporate governance framework. The key elements of internal control within the Authority consist of

Policies and Guidance:

Specific policies and written guidance exist to support the corporate governance arrangements and include:

- The Council's Constitution, including Financial Regulations, Procurement Regulations and Contract Standing Orders
- Codes of Conduct for M em bers and O fficers
- The Corporate Plan
- Medium Term Financial Plan
- M em ber and O fficer Schem es of de legation
- Registers of interests, gifts and hospitality
- Corporate policies, for example those relating to W histleblowing and Counter Fraud and Corruption
- Asset M anagem ent Plan/C apital Strategy Statem ent
- Strategic R isk R egister
- Council Procurem ent Strategy

## Political and Managerial Structures and Processes

The Authority is responsible for agreeing overall policies and setting the budget. The Policy and Resources Comm ittee and Comm issioning Board are responsible for decision making within the policy and budget framework set by the Council. The Authority's Corporate M anagement Team has responsibility for im plementing Authority's policies and decisions, providing advice to M embers and for co-ordinating the use of resources. The Corporate M anagement Team meet regularly and the Committees usually every two months. Both the Committees and the Corporate M anagement Team meet regularly and the Committees usually every two Authority activity to ensure corporate compliance with governance, legal and financial requirements. In addition, the Authority has scrutiny arrangements, through the O verview and Scrutiny Committee that include the review of policies, budgets and service delivery to ensure that they remain appropriate. This Committee is also form ally designated as the Authority's Audit Committee. A forward plan detailing the main work of Committees over the next year has been devised to ensure decisions are taken in a timely manner. U rgent item s will be debated as appropriate.

The Authority has developed a process that is intended to reflect political and com m unity objectives as expressed in the C om m unity Strategy ("Im agine Ryedale") and acts as a basis for corporate prioritisation. The process has identified the Authority's corporate aim s together with a num ber of associated objectives. These will be reviewed at appropriate intervals to ensure that they continue to m eet the needs of the com m unity. The Authority has linked the perform ance m anagement process across all service areas to provide an integrated perform ance m anagement system. Each service has developed a perform ance improvement plan as part of their Service Delivery Plan showing how that service will work to achieve the Authority's objectives.

FinancialM anagem ent

The Corporate Director (s.1510 fficer) has the overall statutory responsibility for the proper administration of the Authority's financial affairs, including making arrangements for appropriate systems of financial control. The Authority operates within a system of financial regulations, comprehensive budgetary control, regular management information, administrative procedures (including the segregation of duties) and management supervision.

The Corporate Director (s1510 fficer) is a member of the Authority's Corporate M anagement Team, and is directly responsible to the Chief Executive. The Authority is therefore fully compliant with the requirements of the 2010 CIPFA/SOLACE Application N ote to D elivering G ood G overnance.

## Compliance Arrangem ents

M onitoring and review of the Authority's activities is undertaken by a num ber of O fficers and external regulators to ensure compliance with relevant policies, procedures, laws and regulations. They include:

- The Chief Executive Officer
- The Corporate Director (s151) who is the s151 Officer of the Authority and the ChiefFinance Officer (CFO)
- The Monitoring Officer
- The External Auditor and various other external inspection agencies
- Internal Audit (provided by the North Yorkshire Audit Partnership up to 31 March 2012 and Veritau North Yorkshire Lim ited from 1 April 2012)
- Finance Officers and other relevant service m anagers

## Value For M oney

Through reviews by external auditors, external agencies, internal audit, the transform ation team, and the Financial Services M anager the Authority constantly seeks ways of ensuring the economic, effective and efficient use of resources, and securing continuous improvement in the way in which its functions are exercised.

#### Risk Management

The Authority has adopted a form al system of Risk Management. This is effectively

delivered through widespread use of Covalent, the Authority's Performance and Risk M anagement software. Although responsibility for the identification and m anagement of risks rests with service m anagers, corporate arrangements are co-ordinated by the H eads of Service G roup. The process serves to ensure that:

- The Authority identifies, prioritises and takes appropriate m itigation for those risks it identifies as potentially preventing achievem ent of the Corporate and Community Plan
- The Authority's assets are adequately protected
- Losses resulting from hazards and claims against the Authority are mitigated through the effective use of risk controlm easures
- Service managers are adequately supported in the discharge of their responsibilities in respect of R isk M anagement

The system of R isk M anagement requires the inclusion of risk evaluation assessments in all C om m ittee reports and the maintenance of a corporate risk register. Relevant staff w ithin the Authority have received training and guidance in R isk M anagement principles.

## InternalAudit & Fraud

The Authority operates internal audit and internal (non Housing Benefit) fraud investigation functions. In 2011/12 these services were provided by the North Yorkshire Audit Partnership. From 1 April 2012 internal audit and counter fraud services have been provided by Veritau North Yorkshire Lim ited – a company partly owned by the Authority. Internal audit services are provided in accordance with the Accounts and Audit Regulations 2011 and the CIPFA Code of Practice for InternalAudit in LocalG overnment. An annual programme of reviews covering financial and operational systems is undertaken, to give assurance to M embers and managers on the effectiveness of the control environment operating within the Council. The work of internal audit com pliments and supports the work of the external auditors (Deloitte LLP for 2011/12). In addition, internal audit provides assurance to the Corporate D irector (s151) as the Authority's s.151 O fficer in discharging his statutory review and reporting responsibilities. The Authority also undertakes an annual review of the effectiveness of its internal audit arrangements as required by the Accounts and Audit Regulations. The results of the review are reported to the O verview & Scrutiny (Audit) C om mittee.

Internal audit also has an advisory role that provides:

- Advice and assistance to m anagers in the design, im plem entation and operation of controls
- Support to managers in the prevention and detection of fraud, corruption and other irregularities

Housing Benefit Counter Fraud work is undertaken within the Benefits Office through contractual arrangements with Veritau. A pro-active approach is taken to supplement referrals, both internal and external, with any leads arising from participation in the National Fraud Initiative, the Housing Benefits Matching Service, and internal data matching.

Perform ance M anagem ent

The Authority has established effective perform ance m anagement arrangements. The ChiefExecutive has overall responsibility for the function and the Corporate M anagement Team undertakes an ongoing monitoring role. Heads of Service and their Service Unit M anagers are expected to deliver improvements or maintain performance standards where appropriate. The Covalent performance management system is used to record and monitor performance.

## 4. <u>Review of Effectiveness</u>

The Authority has responsibility for conducting, at least annually, a review of the effectiveness of its systems of internal control. In preparing this Statem ent a review of corporate governance arrangements and the effectiveness of the Authority's systems of internal control has been undertaken, by the Corporate M anagement Team. This review has included consideration of:

- Reports received from the Authority's external auditors and other inspection agencies
- The results of internal audit and fraud investigation work
- The view s of senior m anagers, including Chief Executive, the s151 O fficer and the M onitoring O fficer
- The work of the Heads of Service Group in compiling the Authority's Strategic Risk Register.
- Outcomes of service improvement reviews and performance management processes
- Compliance with the CIPFA Statem ent on the role of the CFO

In addition, the Authority through its C om m ittees especially the O verview and Scrutiny (Audit) C om m ittee considers corporate governance issues as they arise throughout the year and agree recom m endations for im provem ent as necessary.

A comprehensive review has been undertaken to support the preparation of this AGS docum ent as required by the Accounts and Audit Regulations 2011. The Authority has produced a detailed statem ent along with a targeted action plan to ensure that full compliance is achieved. This has follow ed the best practice fram ework suggested by CIPFA and adopted by the Authority. An action plan schedule has been produced to ensure compliance and a list of those O fficers having responsibility is available.

An Action Plan is appended which identifies and notes progress with previous year's matters of concern, and includes those arising from this year's review. The Annual G overnance Statem ent for 2011/12 will provide details of the work com pleted against this Plan.

We have been advised on the implications of the results of the review of the effectiveness of the system of internal control by the Overview & Scrutiny (Audit) Committee, and a plan to address weaknesses and ensure continuous improvement of the system is in place.

## 5. <u>SIGNIFICANT INTERNAL CONTROL ISSUES</u>

A review of the internal control arrangements in place within the Authority has identified areas where improvements could be made. Specific actions are proposed to address the issues identified. Attached is the action plan for 2011/2012 incorporating those issues

brought forw ard from the previous plan, which are still outstanding.

The Authority will continue to seek to improve performance and take action on agreed recommendations by both internal and external agencies.

Signed:	Dated:XX
JanetW aggott	
ChiefExecutive	

Signed:	Dated:XX
C llr K eith K naggs	
Leader of the Council.	

					CURRENT
STATU S	CONTROL ISSUE	ACTION PROPOSED	RESPONSIBILI TY	TARGET DATE	POSITION & COMMENT S
Brought Forward	C orporate Business C ontinuity P lan (BCP) requires testing for resilience and further training m ay be required.	U se consultancy days from our insurers and specialist to ensure the plan is fit for purpose and appropriate staff have currency of know ledge.	Corporate Director (s151)	Complete d	Ongoing updating and training.
B rought Forw ard	R isk of com prom ise and w eaknesses in operational system s as a consequence of continuing reductions in staffing as G overnm ent funding cuts m ade.	W here changes in staffing occur, that changes in operating arrangem ents are review ed prior to reducing the controls. Internal audit w ill be included in w orking groups review ing operating system s and arrangem ents , including com m ission in g, partnersh ip arrangem ents etc.	Corporate Director (s151)	Continui ng	This will be a continuing issue in 2012/2013
N ew 2011/12	Internal changes within the C ouncil including the establishm ent of the H ub and im plem entation of the new FM S weaken the	Project and R isk M anagem ent applied to changes C hanges to subject to audit review	Corporate Director (s151)	Ongoing	N ew control Issue