



**Report Reference Number: A/21/20**

---

**To:** Audit and Governance Committee  
**Date:** 26 January 2022  
**Status:** Non Key Decision  
**Ward(s) Affected:** All  
**Author:** Karen Iveson; Chief Finance Officer (s151)  
**Lead Executive Member:** Cllr Cliff Lunn; Lead Member for Finance and Resources  
**Lead Officer:** Karen Iveson; Chief Finance Officer (s151)

---

**Title: Annual Governance Statement 2020/21 – Action Plan Review**

**Summary:**

To review progress on the Annual Governance Statement (AGS) 2020/21 Action Plan approved in September 2021.

**Recommendations:**

**It is recommended that progress against the Action Plan for the Annual Governance Statement for 2020/21 be noted.**

**Reasons for recommendation**

To ensure the necessary actions have been carried out in accordance with the approved Annual Governance Statement and action plan.

**1. Introduction and background**

- 1.1** Good governance is important to all involved in local government; however, it is a key responsibility of the Leader of the Council and of the Chief Executive.
- 1.2** The preparation and publication of an annual governance statement in accordance with the CIPFA/SOLACE Framework was necessary to meet the statutory requirements set out in Regulation 4(2) of the Accounts and Audit Regulations which requires authorities to “conduct a review at least once in a year of the effectiveness of its system of internal control” and to prepare a statement on internal control “in accordance with proper practices”.

**1.3** To meet the requirement to review the AGS an Action Plan has been agreed and is subject to half yearly review by the Audit and Governance Committee.

## **2. The Report**

**2.1** The present Action Plan for review is attached as Appendix A. Some progress against the approved action plan has been made although the actions are on-going due to a variety of circumstances and further revised deadlines have been agreed.

**2.2** Actions will be followed up by Leadership Team and Veritau to ensure that they are concluded without further delays.

## **3. Alternative Options Considered**

Not applicable.

## **4. Implications**

### **4.1 Legal Implications**

None as a direct result of this report.

### **4.2 Financial Implications**

None as a direct result of this report.

### **4.3 Policy and Risk Implications**

Significant control weaknesses present risk for the Council and therefore it is important that agreed actions are implemented.

### **4.4 Corporate Plan Implications**

Ensuring an effective governance and control framework supports the Council in delivery of its 'great value' priority.

### **4.5 Resource Implications**

Resources to deliver the agreed actions are within the approved budget and policy framework.

### **4.6 Other Implications**

There are no other notable implications beyond those set out in the report and associated action plan.

#### **4.7 Equalities Impact Assessment**

Not applicable.

#### **5. Conclusion**

- 5.1** The AGS and scrutiny of the Action Plan represents progress towards setting the highest Corporate Governance standards and meets the requirements of the Accounts and Audit Regulations.

#### **6. Background Documents**

None.

#### **7. Appendices**

Appendix A – AGS 2020/21 Action Plan Progress Update January 2022

***Contact Officer:***

**Karen Iveson, Chief Finance Officer (and s151);**  
**[kiveson@selby.gov.uk](mailto:kiveson@selby.gov.uk)**  
**01757 292056**

Issue Identified	Source of Evidence	Update/Summary of Action Taken & Proposed	By whom & By when	Current Position (January 2022)
Non-compliance with the Payment Card Industry Data Security Standard (PCI DSS)	Internal Audit report	New software purchased as old system ceased to be supported. Implementation of new software should resolve PCI DSS issues. Management responsibility has been defined. Responsibility for completing annual PCI DSS assessment to be assigned.	Head of Business Development and Improvement Further revised date <b>24 January 2022</b> (Previously revised to 5 October 2021 from 31 July 2021 and 31 December 2020).	A new income management system has been procured from Civica that will enable PCI DSS compliance. Implementation has been delayed for a number of reasons – the latest due to issues with Civica/Mastercard. Go-live is now on-track to meet the revised date of 24 January 2022.
Performance Management	Internal Audit report	<ul style="list-style-type: none"> <li>• PDR guidance to be reviewed and updated</li> <li>• HR to undertake QA review of sample of PDRs</li> <li>• Return rate of PDRs to be monitored &amp; all PDRs reviewed and returned to manager if not complete.</li> <li>• Training plan to be completed promptly following PDR process.</li> </ul>	Head of Business Development and Improvement  Further revised date <b>28 February 2022</b> (Previously revised to 30 September 2021 from 30 June 2021 and December 2020 )	<p>Decision taken to de-prioritise changes to PDR process due to LGR. Managers were reminded to prioritise PDRs in September/October 2021. HR had received around 50% of completed PDRs by Christmas 2021.</p> <p>Final reminder sent to Managers on 7 January with deadline of 24 January. Initial draft Training Plan produced. Discussions held with NYCC on best options for delivery to maximise the benefits for staff.</p> <p>In the meantime, significant corporate learning and development activity delivered in 2021 including: managers skills training programme; management development programme; aspiring managers programme; widened access to adult skills courses; Microsoft Teams/SharePoint training.</p>