

Improvement Success Criteria

1. Improvement in assurance and audit

- a. Independent expertise and auditing are used to test strength in governance and systems to provide assurance of increasing rigour and capability in the internal operating environment.
- b. Internal audit functions are challenging, robust, valued and contribute to the efficient delivery of public services.
- c. The Annual Governance Statement, prepared in accordance with the CIPFA/ SOLACE Good Governance Framework, is the culmination of a meaningful review designed to stress-test both the governance framework and the health of the control environment.

2. Improvement in collaboration between officers and between Members and officers

- a. Improved communications between officers and Members with constructive challenge welcomed.
- b. Members provide quality leadership by setting a clearly articulated, achievable and prioritised vision for officers to follow that puts place and local people at its heart. Senior officers have the capacity and capability to provide the authority with effective strategic direction.
- c. The authority's corporate plan and Performance Management and Assurance Framework is evidence based, current, realistic and enables the whole organisation's performance to be measured and held to account. The authority's financial strategy and delivery arrangements are aligned with priorities in the corporate plan, and respond appropriately to local need, including the plans of partners and stakeholders.
- d. A culture of cooperation, respect and trust between members and officers, and between departments exists, along with a commitment to transparent decision-making.
- e. Demonstrable steps to engage openly and honestly with staff.

3. Improvement in Member and officer confidence

- a. Mutual trust and confidence between Members and officers.
- b. Belief that there has been a meaningful and sustained change in the approach to openness and transparency.
- c. Member forums and meetings are conducted in a respectful way.
- d. Effective procedures are in place and followed to ensure members and all officers comply with the Nolan Principles, relevant codes of conduct and policies, including procurement. This includes adequate protections and support for whistle-blowers and adherence to Contract Procedure Rules.
- e. Respect for a councillor's need to know and enquire.
- f. Civil working relationships (and communication) between Group Leaders despite political disagreements.

4. Improvement in responsiveness to the public

- a. Protocols and metrics for public responsiveness are agreed and implemented as part of the new Contact Centre.
- b. Complaints are monitored corporately and at Audit Committee for trends or teams and corrective actions plans are developed and implemented, including the requirements of the Code of Conduct from the Local Government and Social Care Ombudsman.
- c. There is early and meaningful engagement and effective collaboration with communities to identify and understand local needs and assets, and in decisions that affect the planning and delivery of services. In some cases, this involves the co-design and/or co-production of services.

d. Users are satisfied with the level and quality of services provided.

5. Improvement in public and partner confidence in the Council

- a. Residents, partners and stakeholders have access to more information, and customer service because of implementing the new operating model, and the specialisation of functions.
- b. Business planning options place a requirement to engage with relevant partners and stakeholders and to capture any insights and report on any risks.
- c. Members and senior officers maintain constructive relationships and engage effectively with external stakeholders and the wider local community.

6. Improvement in risk management

- a. Risk Management has a clear escalation route, and this is actively managed and tested in every team.
- b. Risk Champions trained across the organisation.
- c. Robust systems are in place throughout the organisation and owned by members for identifying, reporting, mitigating and regularly reviewing risk.
- d. Risk awareness and management informs every decision.
- e. Proper member oversight (as shareholders) of companies and partnership bodies, in accordance with the Local Authority Company Review Guidance, and their existence is regularly and independently reviewed.

7. Improvement in the quality of decision making

- a. Options are internally scrutinised to assess impact on resourcing.
- b. Reports to decision-makers forward-planned sufficiently in advance, are of a high quality and clarity, containing clear options analysis, risk analysis, assessment of financial and legal implications of the decision.
- c. The authority's scrutiny function is challenging, robust and contributes to the efficient delivery of services.
- d. Decision-making is taken at the right level, with staff empowered to do their jobs consistent with the scheme of delegation.
- e. Service plans are clearly linked to a local authority's priorities, strategic plans and longer-term planning – a golden thread that runs through to individual objectives and accountability.
- f. The Audit Committee has the knowledge, skills and independent expertise to provide robust challenge and ensures effective controls are in place and issues addressed.
- g. Full Council, alongside the Audit Committee, reviews governance arrangements and takes an effective overview of the systems of control, audit and governance.
- h. A culture of compliance with legislation, strategies, policies and procedures throughout the organisation.

8. Improvement in the transparency of performance information

- a. Performance management and quality assurance information effectively measures outcomes and is frequently interrogated.
- b. Effective project management of projects to enhance governance and effective use of resources.
- c. There are clear and effective mechanisms for scrutinising performance across all service areas. Performance is regularly reported to the public to ensure that citizens are informed of the quality of services being delivered.
- d. A commitment to promoting transparency and sharing performance information with the public.

9. Improvement in value for money

- a. Business plans are in place for savings opportunities and for the new operating model implementation.

- b. Strong financial management and reporting, in accordance with the CIPFA Financial Management Code, runs throughout the whole organisation.
- c. The financial strategy and budgets are clearly aligned with strategic priorities and there is a robust process for reviewing and setting the budget.
- d. A robust system of financial controls and reporting exists, which provide clear accountability and ensure compliance with statutory requirements and accounting standards.
- e. Compliance with the Prudential Framework, a clearly presented Investment Strategy, Capital Strategy and Minimum Revenue Provision (MRP) policy exists.
- f. There is collective accountability for the budget and medium-term financial plan, rather than a siloed approach to management.
- g. There are regular financial reports to Cabinet and training is available for all members and officers on finance.
- h. There is a culture of collective effort and responsibility to address the financial issues the Council faces.
- i. Outputs and outcomes are consistently delivered to best value.

10. Improvement in responsiveness to poor performance

- a. Through governance arrangements and improved reporting performance issues are escalated and a clear action plan agreed.
- b. 360-degree appraisals are used where appropriate.
- c. Performance improvement and capability deficit processes for officers are developed, well understood, and monitored.
- d. Performance management policies and processes are redefined and managers and officers aware of compliance requirements and target dates for action planning improvement.
- e. Effective and timely responses to issues with accountability for the need to make changes and without a culture of blame.

11. Improvement in policy and practice through the use of external expertise

- a. Support, networking and alignment with professional bodies as a means of shaping policy and practice is encouraged and benefits to individuals and the teams reviewed as part of the Personal Development Review process.
- b. The existence of a proactive and welcoming attitude to external challenge and scrutiny.
- c. Use of independents in Committees, as advisors or mentors to improve capability if required.
- d. The authority arranges a corporate or finance peer challenge at least every five years, acts promptly on any recommendations given, and publishes the report of that review and progress updates.
- e. The authority will work collaboratively with the external auditor and Local Government and Social Care Ombudsman to proactively identify areas for improvement and responds promptly and effectively to recommendations.

12. Improvement in corporate capability

- a. Recruitment and selection strategies test the capabilities needed, through use of alternatives to just interview, probation targets and standards are set, and managers actively manage.
- b. Professional development and appraisal at all staff levels is built into day-to-day work, with poor performance identified, monitored and effectively addressed, and good performance recognised.
- c. The local authority takes an innovative approach when considering how services will be designed and delivered in the future.
- d. A demonstrable commitment to leadership and member development, including specialist training for key roles.