

# Improvement and Recovery Plan

## Second Report on Outcomes and Success Criteria

### Purpose

This report presents the Council's position on progress made to date on the delivery of the agreed improvement outcomes and success criteria.

It provides a RAG rating and narrative assessment against each of the success criteria provided by the service leads responsible for the improvements being undertaken.

### Summary

Overall, progress has remained consistent with the 1st report considered by Cabinet in December 2024. Much of the activity continues and is beginning to be embedded within the organisation.

Areas of improvement since the last report include an element of risk management relating to companies and outside bodies, where processes have been put in place relating to decision making on Thames Freeport, and improvements in overall financial management throughout the council.

Improvements in responsiveness to poor performance have seen a positive direction of travel, where the new Assistant Director of HR and OD has embarked on a review of performance management which, subject to approval, will be rolled out during 2025/26.

The impact of the English Devolution White Paper has not had a significant impact on the progress made during this period. However, there is one indicator which has moved from green to amber relating to corporate and financial peer challenges being conducted at least every 5 years. This reflects the relative uncertainty of the future rather than any lack of progress within services.

	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
<b>1. Improvement in assurance and audit</b>			
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.	A	A	A
b. Scrutiny and internal audit functions are challenging, robust, valued and contribute to the efficient delivery of public services.	A	A	A
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.	A	A	G
<b>2. Improvement in collaboration between officers and between Members and officers</b>	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Improved communications between officers and Members with constructive challenge welcomed.	A	A	A
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.	G	G	G

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.	A	A	A
d. A culture of cooperation, respect and trust between members and officers, and between departments exists, along with a commitment to transparent decision-making.	A	A	A
e. Demonstrable steps to engage openly and honestly with staff.	G	G	G
<b>3. Improvement in Member and officer confidence</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Mutual trust and confidence between Members and officers.	A	A	A
b. Belief that there has been a meaningful and sustained change in the approach to openness and transparency.	A	A	A
c. Member forums and meetings are conducted in a respectful way	G	G	G
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.	G	G	G
e. Respect for a councillor's need to know and enquire.	G	G	G
f. Civil working relationships (and communication) between Group Leaders despite political disagreements.	G	G	G
<b>4. Improvement in responsiveness to the public</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Protocols and metrics for public responsiveness are agreed and implemented as part of the new Contact Centre.	G	G	G
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.	G	G	G
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.	G	G	G
d. Users are satisfied with the level and quality of services provided.	G	G	G
<b>5. Improvement in public and partner confidence in the Council</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
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.	G	G	G
b. Business planning options place a requirement to engage with relevant partners and stakeholders and to capture any insights and report on any risks.	A	A	A
c. Members and senior officers maintain constructive relationships and engage effectively with external stakeholders and the wider local community.	G	G	G
<b>6. Improvement in risk management</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Risk Management has a clear escalation route, and this is actively managed and tested in every team.	A	A	A
b. Risk Champions trained across the organisation.	A	A	A
c. Robust systems are in place throughout the organisation and owned by members for identifying, reporting, mitigating and regularly reviewing risk.	R	R	R
d. Risk awareness and management informs every decision.	A	A	A
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.	A	A	G

<b>7. Improvement in the quality of decision making</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Options are internally scrutinised to assess impact on resourcing.	A	A	A
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.	A	A	G
c. The authority's scrutiny function is challenging, robust and contributes to the efficient delivery of services.	A	A	A
d. Decision-making is taken at the right level, with staff empowered to do their jobs consistent with the scheme of delegation.	A	A	A
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.	A	A	A
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	G	G
g. Full Council, alongside the Audit Committee, reviews governance arrangements and takes an effective overview of the systems of control, audit and governance.	G	G	G
h. A culture of compliance with legislation, strategies, policies and procedures throughout the organisation.	A	A	A
<b>8. Improvement in the transparency of performance information</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Performance management and quality assurance information effectively measures outcomes and is frequently interrogated.	A	A	A
b. Effective project management of projects to enhance governance and effective use of resources.	A	A	A
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.	A	A	A
d. A commitment to promoting transparency and sharing performance information with the public.	G	G	G
<b>9. Improvement in value for money</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Business plans are in place for savings opportunities and for the new operating model implementation.	A	A	A
b. Strong financial management and reporting, in accordance with the CIPFA Financial Management Code, runs throughout the whole organisation.	A	A	A
c. The financial strategy and budgets are clearly aligned with strategic priorities and there is a robust process for reviewing and setting the budget.	G	G	G
d. A robust system of financial controls and reporting exists, which provide clear accountability and ensure compliance with statutory requirements and accounting standards.	A	A	A
e. Compliance with the Prudential Framework, a clearly presented Investment Strategy, Capital Strategy and Minimum Revenue Provision (MRP) policy exists.	G	G	G
f. There is collective accountability for the budget and medium-term financial plan, rather than a siloed approach to management.	A	A	G
g. There are regular financial reports to Cabinet and training is available for all members and officers on finance.	G	G	G
h. There is a culture of collective effort and responsibility to address the financial issues the Council faces.	A	A	G
i. Outputs and outcomes are consistently delivered to best value.	A	A	A
<b>10. Improvement in responsiveness to poor performance</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
a. Through governance arrangements and improved reporting performance issues are escalated and a clear action plan agreed.	A	A	A
b. 360-degree appraisals are used where appropriate.	A	A	A

c. Performance improvement and capability deficit processes for officers are developed, well understood, and monitored.	A	A	A
d. Performance management policies and processes are redefined and managers and officers aware of compliance requirements and target dates for action planning improvement.	A	A	A
e. Effective and timely responses to issues with accountability of the need to make changes and without a culture of blame.	A	A	A
<b>11. Improvement in policy and practice through the use of external expertise</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
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.	A	A	A
b. The existence of a proactive and welcoming attitude to external challenge and scrutiny.	A	A	G
c. Use of independents in Committees, as advisors or mentors to improve capability if required.	G	G	G
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.	G	G	A
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.	G	G	G
<b>12. Improvement in corporate capability</b>	<b>RAG – Baseline (Sept 24)</b>	<b>RAG – last period (Sept 24)</b>	<b>RAG – this period (Dec 24)</b>
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.	A	A	G
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.	A	A	G
c. The local authority takes an innovative approach when considering how services will be designed and delivered in the future.	A	A	A
d. A demonstrable commitment to leadership and member development, including specialist training for key roles.	G	G	G

#### Note on definitions:

- Red indicates that progress is not assured to be on track at this stage, and additional steps are required beyond those currently in train.
- Amber indicates that progress is being made, but with some risks or uncertainties which are still to be resolved before we have confidence the Council is fully on track.
- Green does not yet indicate high performance, but signifies that good progress is being made and the Council is on track to meet the expectations required by the intervention.

1. Improvement in assurance and audit	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
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.	A	A	A
b. Internal audit functions are challenging, robust, valued and contribute to the efficient delivery of public services.	A	A	A
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.	A	A	A

**Lead Director Summary**

The Council’s newly appointed Head of Internal Audit (HOIA) unfortunately left and this has had a slight pause on the Internal Audit function and the delivery of the audit plan. However an excellent interim candidate has been sourced whilst the permanent post is being recruited to. An immediate priority for the interim Head of Internal Audit is to continue the work to strengthen the internal audit function, ensure delivery of the internal audit plan and to support addressing the recruitment challenges within the team.

The 2024/25 Audit Plan is progressing but is slightly behind schedule and a focus for the interim HOIA will be to focus on accelerating progress to ensure an Internal Audit opinion can be provided on assurance for 2024/25. A pragmatic approach was adopted to producing back dated Annual Governance statements but a comprehensive, and pan organisation, approach has been adopted for the 2023/24 AGS which has been completed and pending approval by the Audit Committee.

The Internal Audit function is aware that, whilst good progress is being made, it remains on a journey. The skills gap analysis, customer satisfaction survey and a self-assessment against the Public Sector Internal Audit Standards will need to be completed to further enhance the service. These will be a target for early 2025/26 to ensure the focus remains on delivery of the internal audit plan in 2024/25.

**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.**

**Assessment of Progress**

Audit plan for 2024/25 in progress. Of 28 audits agreed, 2 have been completed with substantial assurance. Tracking and monitoring of the implementation of audit recommendations has commenced. There were no audit recommendations due for implementation during quarter 3.

**b. Scrutiny and internal audit functions are challenging, robust, valued and contribute to the efficient delivery of public services.**

**Assessment of Progress**

2024/25 audit plan in progress with ongoing reporting to Audit Committee.

**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.**

**Assessment of Progress**

2023/24 AGS has been drafted in accordance with guidance and provides a self assessment of performance against the Council's local code of governance, in accordance with guidance. The finalisation is progressing in line with completion of final accounts.

2. Improvement in collaboration between officers and between Members and officers	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Improved communications between officers and Members with constructive challenge welcomed.	A	A	A
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.	G	G	G
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.	A	A	A
d. A culture of cooperation, respect and trust between members and officers, and between departments exists, along with a commitment to transparent decision-making.	A	A	A
e. Demonstrable steps to engage openly and honestly with staff.	G	G	G

**Lead Director Summary**

Since the first report, there has been a continuous improvement in these areas. Building on the co-design of the Corporate Plan and Performance Management and Assurance Framework, Members and officers are now engaging constructively in the detail beneath these overarching strategies, to the benefit of the organisation. There remains more to do but it is reassuring that as we enter additional phases of maturity in our approach this be being met with the working practices and behaviours necessary for a well-run authority.

In the last report, a concern was raised about O&S not reporting into Cabinet but since then a steady and reasonable number of scrutiny reports have provided recommendations on decision making particularly from the corporate O&S committee, including on the budget, as well as a call in of a housing decision. Issues with relationships are now focussed on individual councillors rather than the culture of overview and scrutiny overall, which is positive.

**a. Improved communications between officers and Members with constructive challenge welcomed.**

**Assessment of Progress**

Update is largely similar to 1<sup>st</sup> Report - on the whole collaboration and communication between Members and officers is positive and constructive. There is a very small number of Members who do not conduct themselves in this way in communication with officers. In the 1<sup>st</sup> Report it was noted that the Monitoring Officer has set up a Group Whips meeting as a forum to discuss any issues arising that may cross cut the groups. The first meeting took place in January discussing members development. With regard to the link between Overview and Scrutiny, during 2<sup>nd</sup> Report period there was a call in of a Cabinet decision to the Place Overview and Scrutiny Committee. Further, there was the all-

committees budget scrutiny meeting on 20 November, and the Chair of Corporate O&C attended at Cabinet to then present the recommendations of the committee to Cabinet when they were considering the draft budget.

**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.**

**Assessment of Progress**

All Members have engaged positively with the corporate performance data for Q2 2024/25, which is the first reporting of the new Performance Management and Assurance Framework. The feedback we have received from the Cabinet and Corporate O&S will allow us to evolve this work, ensuring that are targets and tolerances are robust and clear.

**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.**

**Assessment of Progress**

The publication of our corporate performance data for Q2 2024/25 marks a step change in our approach to performance monitoring. Having a full set of metrics and milestones has allowed for meaningful discussions about performance in services, at SLT, Cabinet and Corporate O&S.

Members have rightly challenged us to further develop our targets and tolerance as our work matures. Following delays due to capacity, we will launch a service planning process in January 2025 that links our financial planning more closely to our delivery.

**d. A culture of cooperation, respect and trust between members and officers, and between departments exists, along with a commitment to transparent decision-making.**

**Assessment of Progress**

Local Code of Corporate Governance was approved by Council on 30 October 2024. Work on the Annual Governance Statements (AGS) for 20/21, 21/22, 22/23 has completed and reported to Audit Committee. These reports were truncated due to a lack of contemporaneous evidence but the draft 23/24 AGS fully follows the CIPFA / SOLACE guidance and relies on a full evidence base of compliance and is awaiting approval by Audit Committee. The preparation of the AGS required significant cross-departmental working. Constitution review work is ongoing with new sections of the constitution completed so far to be presented to General Services Committee and Standards Committee (with regard to the procedure for dealing with complaints under the member's code of conduct) in February 2025. Proposals with regard to Cabinet and Council will be brought before members in February. With regard to transparent decision making there is a commitment to include as much information in the public domain as possible, with only appendices being exempt to public reports where possible. To supplement this, over 90% of information governance requests are responded to within 20 working days, which complies with the ICO's expected standards.



**e. Demonstrable steps to engage openly and honestly with staff.**

**Assessment of Progress**

We continue to engage staff with relevant current issues, through our monthly all staff briefing with the Chief Executive, and our weekly staff e-newsletter. Given the significance for our staff of the Government's white paper on devolution and local government reorganisation, we published a simple explainer about the key elements before Christmas and are now planning a comprehensive communications plan for staff around this issue. We are seeing new energy going into our staff networks with a new Disability Network launched, and exciting plans from the Women's Network. These networks are key to supporting and engaging staff, and Comms are working with Organisational Development to ensure we have a consistent plan and approach to, and senior support for, networks across the council in light of devolution and local government reorganisation.

3. Improvement in Member and officer confidence	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Mutual trust and confidence between Members and officers.	A	A	A
b. Belief that there has been a meaningful and sustained change in the approach to openness and transparency.	A	A	A
c. Member forums and meetings are conducted in a respectful way.	G	G	G
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.	G	G	G
e. Respect for a councillor’s need to know and enquire.	G	G	G
f. Civil working relationships (and communication) between Group Leaders despite political disagreements.	G	G	G

**Lead Director Summary**

There is significant progress towards functioning relationships and confidence between the vast majority of councillors and officers. As stated above, key committees and cabinet are working well with full engagement from members and officers and the quality of reports and information has improved. The Standards Committee has been provided with a proactive work programme to ensure it understands and is committed to improving the ethical health and culture of the council. The constitution review will place greater emphasis on transparency and rights of access by giving statutory and common law rights greater prominence. There is engagement by the vast majority of councillors and the two main political groups but there remain isolated cases where this improvement is not felt by members and officers, however, and this remains an issue to watch regarding the council’s ability to sustain its improvement without commissioner involvement. As noted, there are plans in place following consultation with commissioners to address conduct by the minority of members and between those members and officers.

**a. Mutual trust and confidence between Members and officers.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics).

*Please see comments above, which address member officer relations. There is growing evidence of trust and confidence between the administration and the vast majority of councillors and officers as evidenced in the approach and conduct of committees and scrutiny committees. Effective working relations exist with the administration and larger opposition group. As stated, a very small minority of members continue to take a different view and do not demonstrate they have trust and confidence in officers and expressly this regularly in correspondence and meetings. Comments made above in relation to this issue are relevant to this measure also.*

**b. Belief that there has been a meaningful and sustained change in the approach to openness and transparency.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics). The latest reporting period continues the direction of travel in meetings and sharing information with members, e.g. all member briefings and the decision making in respect of the government's proposals on devolution and local government reorganisation. In addition, the council continues to maintain, as set out above, very good performance in respect of information requests and to hold direct public q and a sessions with residents.

*Recent surveys indicate there is considerable progress is still needed on this indicator, but this is unsurprising.*

*Measuring belief is subjective and inherently long term but the following evidence can be proposed that shows, anecdotally, the direction of travel is more positive. Members in committee meetings, including audit and the standards committee, have expressed gratitude for greater openness in reports and information presented to them. For example, following presentation from officers on both the digital update and member enquiries process, the Chair of Corporate Overview and Scrutiny Committee commented at the meeting on 17 September 2024 that it was refreshing that officers had acknowledged where there were challenges or where processes were not working as they should, as it increased transparency. Officers had also been clear in these acknowledgements what steps were being proposed to address those challenges.*

**c. Member forums and meetings are conducted in a respectful way.**

**Assessment of Progress**

As set out above and in the 1<sup>st</sup> Report reporting the conduct of councillors in meetings is generally of a high standard with a few notable exceptions usually when decisions go against a particular viewpoint or where procedural rulings go against individual councillors. Most notably, there was an issue at the extraordinary council meeting at the end November 2024 when the Mayor's determination on a constitutional point was challenged and business had to be adjourned for a period with discussions becoming heated on this point. The work on the constitution review continues as well as progressing the plan for member training for 2025/26 including engaging an external team. The Managing Director Commissioner in consultation with the commissioners and the monitoring officers has agreed a plan to address poor behaviour including the engagement of political groups in discussing and determining the standards they wish to uphold (beyond the requirements of the Code of Conduct)

**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.**

**Assessment of Progress**

The situation is assessed as being the same as during 1<sup>st</sup> Report. In the English Devolution White Paper, the government has included proposals for strengthening the local authority standards regime, including a power of suspension for the most serious breaches of the code of

conduct. Consultation on the proposals started in December, to close at the end February 2025. A report is being taken to Standards Committee on 11 February 2025 for Member input to shape the council's response to the consultation.

#### **e. Respect for a councillor's need to know and enquire.**

##### **Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics). Work on the constitution review continues and updated rules on open governance and access to information are being taken to the council's general services committee this month, which will also bring all the relevant rules together into a single part of the constitution on Scrutiny and Open Governance (as more fully described below)

*The current constitution sets out in a number of parts the rights of access to information afforded to Councillors:*

- *The right of access to information pursuant to section 100A – K Local Government Act 1972*
- *The additional rights to information of Overview and Scrutiny Committee members*
- *Paragraph 4.1, Chapter 2 that councillors will have such rights of access to such documents necessary for the proper discharge of their duties.*
- *Paragraph 9.1, Part 5 Chapter 7 of the Constitution which provides that information and documents should be made available on request by officers to members unless there is a clear justifiable reason for declining/ the councillor cannot establish a legal interest to the document.*

*As stated above, the Monitoring Officer and Deputy Monitoring Officer will ensure the constitution review gives greater prominence to members rights to information including:*

- *Part 3 will be expressly focused on Scrutiny and Open Governance drawing together all relevant rules and will ensure that member's right for access to documents, and the need to know and enquire is addressed and respected in the revised document.*
- *A specific part will set out members rights of access, including need to know and statutory rights bringing together all of their rights in a single document in the Constitution.*
- *The citizen's rights section will be reviewed and included in the new Part 3*

*It is important that the Council's approach should not be reduced to statutory rights and there is evidence above regarding increased focus on openness and transparency and also the current review of the enquiry process. It is noted that member experience of the current process was both positive and negative (as expressed at Corporate Overview and Scrutiny) but also the issue of finite resources will need to be considered. The quality of responses to queries is a noticeable theme, e.g. not providing reasons for decisions.*

*Members training and induction will include how to access information.*

*Conversely, as the Council is now increasingly at the “sharp end” of litigation to recover monies from various parties, including Liam Kavanagh, through formal legal proceedings, it is important to review how information is circulated. It is critical that legally privileged information about the council’s claim and litigation strategy remains confidential to avoid risk of prejudicing the recovery of significant sums.*

**f. Civil working relationships (and communication) between Group Leaders despite political disagreements.**

**Assessment of Progress**

As with the 1<sup>st</sup> Report, the assessment is that on the whole relationships between group leaders is civil, although there is of course political disagreement at times. The first fully attended whips meeting took place and discussed members development and training and group related issues. At present there has been broadly consensus regarding the council's response to proposals on devolution and local government reorganisation. The initial proposal is for a cross party working group to be established.

4. Improvement in responsiveness to the public	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Protocols and metrics for public responsiveness are agreed and implemented as part of the new Contact Centre.	G	G	G
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.	G	G	G
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.	G	G	G
d. Users are satisfied with the level and quality of services provided.	G	G	G
<p><b>Lead Director Summary</b></p> <p>Significant progress continues in this workstream with the defining, designing and implementing of a new customer contact model for dealing with interaction with residents and the wider public. Customer contact services are due to be consolidated to create resilience alongside progress towards the automation of over 130 end to end customer journeys so that queries can be addressed and resolved 24/7 and not within “opening hours”. This programme sits within the wider corporate digital programme which has been designed in the past six months. The lead member and officers reported to Corporate Overview and Scrutiny on customer service and complaints (including LGSHO) and a task group has been established to look at member enquiries. The Council has launched “Aimee” an AI generated customer service with its pilot functionality to assist residents with CT and benefits queries.</p>			

**a. Protocols and metrics for public responsiveness are agreed and implemented as part of the new Contact Centre.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics).

*Protocols and metrics continue to be in place for the contact centre including demand data, quality, responsiveness, and customer satisfaction. Further metrics will become available following Voice AI and CRM technology implementation enabling us to measure the effectiveness of this technology.*

**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.**

**Assessment of Progress**

As with the 1<sup>st</sup> Report, the assessment is that on the whole relationships between group leaders is civil, although there is of course political disagreement at times. There has been limited uptake in the group whips meeting thus far. At present there has been broadly consensus regarding the council's response to proposals on devolution and local government reorganisation.

**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.**

**Assessment of Progress**

Work on our Communities in Action pilot in Chadwell St Mary continued in earnest through the autumn and winter, offering residents many different opportunities to get involved in our consultation and engagement. The pilot will result in a plan for Chadwell, co-designed with residents, and a Cabinet paper setting out our learning to inform future work across the borough to engage residents in the issues that matter most to them, and to ensure they can influence local decision-making.

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

**Assessment of Progress**

complaint volumes, and the highest number of compliments across the organisation.

- Customer satisfaction score contact centre Apr - Dec 24 is 98.58% - this is based on the automatic survey scoring from residents, only 1,020 expressed dissatisfaction, in any way from 71,910 survey calls.
- Only 5 upheld complaints for whole of Customer Services Dept for Apr - Dec 24 this includes Contact Centre, Meet, and Greet Reception, Registrars and Careline and this is from 249,383 contacts.
- Customer Services Dept compliments Apr-Dec 24 are 1,608, from overall council compliments of 1,986.

5. Improvement in public and partner confidence in the Council	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
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.	G	G	G
b. Business planning options place a requirement to engage with relevant partners and stakeholders and to capture any insights and report on any risks.	A	A	A
c. Members and senior officers maintain constructive relationships and engage effectively with external stakeholders and the wider local community.	G	G	G
<p><b>Lead Director Summary</b>  This period has seen significant further development of the approaches and initiatives to improve public and partner confidence, including additional events within the community and consolidation of customer service functions into Corporate Services. The next period will be focussed on embedding these improvements to ensure they, along with the new approach to service planning, can have a drive the changes required to make a meaningful improvement in confidence.</p>			

<p><b>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></p> <p><b>Assessment of Progress</b>  Report with findings and recommendations presented to SLT in Dec 24. All recommendations agreed. Next step is to communicate changes to impacted teams, notify unions and complete transition of resources and budgets. Following the movement of these activities it will enable work to begin to ensure the levels of service are consistent with the current customer services department and identify opportunities to streamline processes and enable further automation. This will support improving the overall customer service for residents, partners, and stakeholder across all services</p>
<p><b>b. Business planning options place a requirement to engage with relevant partners and stakeholders and to capture any insights and report on any risks.</b></p> <p><b>Assessment of Progress</b>  We are continuing our work to implement a new service planning process and senior leaders have been proactive in strengthening our relationships with our partners and stakeholders. Following the announcement of Government plans for devolution and local government reorganisation, we are considering our most effective partners for service planning.</p>



**c. Members and senior officers maintain constructive relationships and engage effectively with external stakeholders and the wider local community.**

**Assessment of Progress**

In mid-November we held our first 'Ask the council' public question time in Grays where we invited residents to ask questions of our panel of SLT and Cabinet Members. We had a good turnout, and gave residents a brief update from the council, covering progress over the previous few months, the corporate plan, and our budget process and priorities. We answered as many questions from residents as we could on the night, with answers to all submitted questions published on our website.

The next public question time event will be held in Ockendon on 25 February. We have also continued with our programme of local visits, with senior leaders attending each of the Thurrock Cares roadshows to meet residents, understand their concerns and challenges, and answer their questions. We held two roadshows in November and December, with two more planned for January and February, offering residents a range of cost of living advice and support from council officers and partner organisations, as well as practical help in the form of winter coats donated by council staff, and warm packs sponsored by one of our housing contractors.

6. Improvement in risk management	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Risk Management has a clear escalation route, and this is actively managed and tested in every team.	A	A	A
b. Risk Champions trained across the organisation.	A	A	A
c. Robust systems are in place throughout the organisation and owned by members for identifying, reporting, mitigating and regularly reviewing risk.	R	R	R
d. Risk awareness and management informs every decision.	A	A	A
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.	A	A	G

**Lead Director Summary**

As with Internal Audit, the Risk Management function is improving but remains on a journey to ensure that risk management is fully embedded across the organisation and underpins all decision making. Both permanent risk roles in the Risk Management function are vacant, one is being covered by an internal secondment due to end at the end of March 2025. A priority for the Interim Head of Internal Audit will be the recruitment challenges. The Risk Management Strategy 2024/27 has been approved but the detail of roles and responsibilities is a work in progress.

The JCAD system is being implemented to streamline the approach to refreshing and strengthening directorate and corporate risk registers. Once refreshed and agreed the corporate risk register will be reported to the Audit Committee quarterly. The refreshed Corporate Risk Register is a work in progress and anticipated to be completed and reported to Cabinet and the Audit Committee early in the financial year 2025/26. Moving forward, it will be reviewed quarterly and reported to the Audit Committee who hold scrutiny responsibility for the Corporate Risk Register. A comprehensive table is now in Cabinet reports to fully explain risk implications and this will be extended and included in all reports to the council’s three scrutiny committees. The Risk Manager is supporting report authors with the risk implications section, but the risk table will bring more of a spotlight to risks associated with the content/recommendations of the report, mitigating actions and residual risks.

Risk management training has started for Members but there needs to be a programme to roll out across the organisation and ensure it is embedded.

**a. Risk Management has a clear escalation route, and this is actively managed and tested in every team.**

**Assessment of Progress**

The escalation and de-escalation route for Risk Management has been detailed at a high level in the recently adopted Risk Management Strategy 2024-2027. Roles and responsibilities for Risk Management have been clearly defined in the Risk Management Strategy 2024-2027.

The escalation route will be further laid out / defined in the Risk Management toolkit. This will be prepared and rolled out during Q4 2024/25. Embedding the escalation of risk management into the Council's business-as-usual activity will be a priority from April 2025.

The introduction of the Risk Champion network / group will be pivotal in embedding the escalation of risk management from services / operations to Directorate Management Team's, Senior Leadership Team and Members. this has been established and training has been provided. The number of Champions will remain under review to ensure all services are represented.

The Corporate Risk Register is currently being drafted and is due to be reported to SLT by the end of the financial year and then onto Cabinet and the Audit Committee.

#### **b. Risk Champions trained across the organisation.**

##### **Assessment of Progress**

Risk Management training has been given for Risk Champions. But further risk champions are needed throughout the services

#### **c. Robust systems are in place throughout the organisation and owned by members for identifying, reporting, mitigating and regularly reviewing risk.**

##### **Assessment of Progress**

The Risk Management Strategy 2024-2027 has now been formally adopted by the Council, following Cabinet decision on 11 September 2024.

The Risk Management system (JCAD) has been procured to enable the recording, assessment, review and reporting of risks. the test system was completed in November 2024, we await the agreement of the corporate risk register to enter onto the system and relevant officers have been provided with training once this has been agreed.

Risk Management training, which will include the identification, assessment, review and reporting of risks is being arranged for relevant Members and Risk Champions was successful, a second training session for members was provided and further are required to ensure all Members have received the initial training. Options for training becoming 'business as usual' are being considered.

#### **d. Risk awareness and management informs every decision.**

##### **Assessment of Progress**

A risk implication section has been added to report templates within ModGov and a specific step has been introduced to the reporting process to ensure all risk implications are reviewed and verified by the Risk Manager in advance of the papers being published for Informal Cabinet. Plans are in place to ensure a risk implications section is also included in reports to the council's three scrutiny committees.

**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.**

**Assessment of Progress**

In addition to the information provided in the 1<sup>st</sup> Report, a paper on the Freeport was taking to Cabinet as reported and the Leader and PFH have been sighted on any key and non-key decisions being taken with regard to funding of the Freeport under delegations.

7. Improvement in the quality of decision making	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Options are internally scrutinised to assess impact on resourcing.	A	A	A
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.	A	A	A
c. The authority’s scrutiny function is challenging, robust and contributes to the efficient delivery of services.	A	A	A
d. Decision-making is taken at the right level, with staff empowered to do their jobs consistent with the scheme of delegation.	A	A	A
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.	A	A	A
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	G	G
g. Full Council, alongside the Audit Committee, reviews governance arrangements and takes an effective overview of the systems of control, audit and governance.	G	G	G
h. A culture of compliance with legislation, strategies, policies and procedures throughout the organisation.	A	A	A
<p><b>Lead Director Summary</b></p> <p>Significant progress continues in this area particularly in establishing the governance and decision-making framework through improved processes (e.g. ModGov) and operating models (e.g. scrutiny). Improvements in practice have been inconsistent as officers and members are upskilled to new ways of working and higher standards, especially in respect of governance and report writing. Overview and Scrutiny has made progress and the new model of work based on forward planning is right. However, there remain concerns about the understanding of the purpose of overview and scrutiny in improving executive decision making, which has in turn impacted on its work and agendas in practice. Progress has been seen in a flow of scrutiny recommendations into Cabinet, particularly from the corporate O&amp;S committee, informing decision making.</p> <p>The budget setting process including the development of savings proposals and scrutiny has worked well with a number of improvements on previous years and more transparency in reporting.</p> <p>The Audit Committee continues to be of high quality with constructive challenge and the new Head of Internal Audit has made a major difference in the quality of reporting and advice to the committee with a willingness to work collaboratively with the Assistant Director, Legal &amp; Governance, providing greater corporate strength to support the committee, especially on the Local Code of Governance and AGS.</p>			

**a. Options are internally scrutinised to assess impact on resourcing.**

**Assessment of Progress**

There is still work to do on improving the quality of decision making and reports, and this is likely to be a continuous process, and the steps as set out in the 1<sup>st</sup> Report are still being embedded. Other committees are now being added to the ModGov process in addition to cabinet. The Monitoring Officer has presented a series of report writing training sessions, however, uptake on attendance from directorates at these has not been as high as expected (or attendees book and do not attend), which is disappointing.

**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.**

**Assessment of Progress**

As set out in the 1<sup>st</sup> Report assessment there is ongoing improvement required here and change will take time. The assessment for 2<sup>nd</sup> Report is that this is still a work in progress, but the tools and processes are in place to assist in moving this requirement forward.

**c. The authority's scrutiny function is challenging, robust and contributes to the efficient delivery of services.**

**Assessment of Progress**

The assessment is broadly the same as 1<sup>st</sup> Report, however, during 2<sup>nd</sup> Report period there has been an increase in the connection between O&Ss and executive decision making, for example in the budget scrutiny and there has been a call in.

**d. Decision-making is taken at the right level, with staff empowered to do their jobs consistent with the scheme of delegation.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics).

*Currently there is a scheme of delegation in place, which is sound and is followed. There is a good process in place for reports going to Cabinet, and the right level of reports are going to this decision-making body.*

*There are various procurement approvals and HR systems in place for new spend/roles, and also the SAP process for spend above £25,000 - all systems appear to be set up well and working. These systems are solid on the process but what is not yet evident is the quality checking/ level of scrutiny during the process and also measure of output i.e. demonstration of value for money.*

*The constitution review will next include a full review of the scheme of delegation as part of the wider constitution review will consider whether decisions are being taken at the right level. This will also consider the quality and transparency of delegated decisions. Anecdotal*

*consideration suggests that procedural requirements (e.g. compliance with a tender process) are the focus of reports and possibly meaning less emphasis on the need to demonstrate best value in delegated decisions. Consideration to training key officers will be given.*

**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.**

**Assessment of Progress**

Our work to develop a new approach to service planning for the financial year 2025/26 is ongoing. While we are aware that this work will be impacted on announcements on devolution and local government reorganisation a golden thread of accountability to individual objectives for our priorities is still required. We are not yet able to say that this approach is imbedded across all teams, but we will make further progress during 2025/26.

**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.**

**Assessment of Progress**

There have not been any meetings of the committee during this period, but significant preparation has been undertaken on the Annual Governance Statements for presentation to the committee in due course.

**g. Full Council, alongside the Audit Committee, reviews governance arrangements and takes an effective overview of the systems of control, audit and governance.**

**Assessment of Progress**

As at 1<sup>st</sup> Report. The new Overview and Scrutiny rules at Chapter 4 of the Constitution were approved at October Council, and since then there has been some challenge regarding the implementation of the new rules, with member challenge to them. This gives rise to a concern of a lack of understanding of the implication of the rules that were agreed and will need to be monitored going forward.

**h. A culture of compliance with legislation, strategies, policies and procedures throughout the organisation.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics).

*The Local Code of Governance sets out how the council will comply with its legal obligation as assessed in the annual governance statement reported to Audit Committee*

*It is evident in reporting that officers within service areas are aware of the legislation, strategies, policies and procedures with which they are required to comply and provide good advice and information to members on how to lawfully achieve objectives, and a culture of compliance exists. If anything as a result of the intervention, and nervousness by officers around this, on occasion it apparent that there is almost an over-correction on compliance.*

*Reference to quality of Cabinet reports is made here and that there is more work to do on ensuring that services such as legal and finance, who provide implications for reports, are focussed on governance and provide solutions based, well rounded advice as to how objectives can be delivered, rather than just commenting on the statutory compliance for example.*

*The Council's culture change programme also features work to counter the "silo" and "non-compliance" approach within the council.*



8. Improvement in the transparency of performance information	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Performance management and quality assurance information effectively measures outcomes and is frequently interrogated.	A	A	A
b. Effective project management of projects to enhance governance and effective use of resources.	A	A	A
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.	A	A	A
d. A commitment to promoting transparency and sharing performance information with the public.	G	G	G
<p><b>Lead Director Summary</b>  As in other areas, the foundations of lasting improvement have been laid as focus now turns to embedding the change. Engagement with Members and Commissioners over this period has been vital in shaping how we embed and then test our improvement.</p>			

<p><b>a. Performance management and quality assurance information effectively measures outcomes and is frequently interrogated.</b></p>
<p><b>Assessment of Progress</b>  The publication of our corporate performance data for Q2 2024/25 has been the first opportunity for interrogation of the data both in private at SLT and in public at Cabinet and Corporate O&amp;S. These discussions have been meaningful and challenging as we evolve the process and drive performance. We know that we have more work to do to imbed an outcomes approach and our new Performance and Insights Board will assist in this.</p>
<p><b>b. Effective project management of projects to enhance governance and effective use of resources.</b></p>
<p><b>Assessment of Progress</b>  Change Programme Governance is established and working well. Some adjustments planned to ensure strategic discussions are adding value. New Change Programme Office staff are being on boarded to provide additional capacity and capability as well as improve effectiveness.</p>

**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.**

**Assessment of Progress**

Following helpful and productive public scrutiny of the Q2 data for 2024/25, we will continue to work with Cabinet and Chairs of O&S Committees to reflect their feedback and strengthen our approach to performance. From February 2025, the Performance and Insights Board will meet on a regular basis to scrutinise corporate performance internally.

**d. A commitment to promoting transparency and sharing performance information with the public.**

**Assessment of Progress**

We are now implementing a regular reporting cycle of corporate performance data to Cabinet and O&S committees that has had success. As this matures, we will explore further opportunities to share this directly with residents.

9. Improvement in value for money	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Business plans are in place for savings opportunities and for the new operating model implementation.	A	A	A
b. Strong financial management and reporting, in accordance with the CIPFA Financial Management Code, runs throughout the whole organisation.	A	A	A
c. The financial strategy and budgets are clearly aligned with strategic priorities and there is a robust process for reviewing and setting the budget.	G	G	G
d. A robust system of financial controls and reporting exists, which provide clear accountability and ensure compliance with statutory requirements and accounting standards.	A	A	A
e. Compliance with the Prudential Framework, a clearly presented Investment Strategy, Capital Strategy and Minimum Revenue Provision (MRP) policy exists.	G	G	G
f. There is collective accountability for the budget and medium-term financial plan, rather than a siloed approach to management.	A	A	G
g. There are regular financial reports to Cabinet and training is available for all members and officers on finance.	G	G	G
h. There is a culture of collective effort and responsibility to address the financial issues the Council faces.	A	A	G
i. Outputs and outcomes are consistently delivered to best value.	A	A	A

**Lead Director Summary**

Significant efforts across the organisation are being deployed to ensure financial management and practice is as robust as possible and meets the requirements of good financial practice. 2024/25 has seen a significant review of financial strategies, processes and reporting with a view to rebuilding good models of practice and ensuring the foundation for the 2025/26 budget is on a firm a foundation as possible. However moving forward this foundation needs to be maintained and built upon, especially around processes and budget control.

Financial reporting is much improved linking in with relevant activity data and an evidenced based approach to ensuring agreed savings are realised with the learning being built into procedures for 2025/26.

There has been positive engagement pan organisation to identifying worked through saving proposals to meet the 2025/26 saving targets much earlier in the financial year to allow the Council more time and space to work through the future large-scale transformation required to ensure financial sustainability. Robust proposals, to meet the full savings target for 2025/26, are built onto the final budget for 2025/26. Where required, capital provision has been made in the updated Capital Programme and funding has been ear marked to fund the implementation costs of the proposals.

Finance training has been provided to both Members and Budget Holders, but work is required to ensure training is embedded as BAU and remains relevant to where the organisation is on its financial journey.

Recruitment remains a significant challenge in the finance team which does impact on capacity. Despite extensive efforts, progress to date has been difficult and slow. A focused campaign with an external agency, with a good reputation in local government, has been engagement to support the recruitment to all vacant posts by the start of 2025/26. The early results of the recruitment campaign are far from fruitful and it is likely the finance team will continue to be reliant on interim resources in 2025/26.

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

**Assessment of Progress**

Savings requiring business cases have been development and initial review of deliverability has been conducted. In light of government plans on local government reorganisation, consideration is being given to the approach to the operating model going forward.

**b. Strong financial management and reporting, in accordance with the CIPFA Financial Management Code, runs throughout the whole organisation.**

**Assessment of Progress**

Further improvements made to quarterly financial management reporting including mitigation for areas of overspend and savings tracking. Key downwards trajectory of projected overspend in 2024/25 in service pressures to maintain overall financial stability of the Council. Assessment against CIPFA's Financial Management Code will be undertaken in 2025/26.

**c. The financial strategy and budgets are clearly aligned with strategic priorities and there is a robust process for reviewing and setting the budget.**

**Assessment of Progress**

The final budget for 2025/26 and final MTFS 2025/26 to 2028/29 have been finalised ready for Cabinet and Full Council in February 2025. There has been a robust review of the budget and MTFS including budget scrutiny from the Corporate Overview and Scrutiny Committee on 2 occasions. In 2025/26, there will be a mid year review of the MTFS to ensure it accurately reflects the dynamic environment in which the council operates to support the setting of the budget for 2026/27.

**d. A robust system of financial controls and reporting exists, which provide clear accountability and ensure compliance with statutory requirements and accounting standards.**

**Assessment of Progress**

Financial controls and systems are being worked on systematically in line with compliance requirements and standards. Finance processes continue to be reviewed alongside the current restructure, which is looking at roles and responsibilities.

**e. Compliance with the Prudential Framework, a clearly presented Investment Strategy, Capital Strategy and Minimum Revenue Provision (MRP) policy exists.**

**Assessment of Progress**

The five-year Capital Programme was reviewed during the 2024/25 budget setting process. Capital Strategy and Treasury Management Strategy are produced in compliance with CIPFA's Prudential Code requirements.

**f. There is collective accountability for the budget and medium-term financial plan, rather than a siloed approach to management.**

**Assessment of Progress**

Budget holders are expected to enter their forecasts into Oracle with assistance of Finance Business Partners. Accountability for financial management sits with responsible budget holders and management. Reports are produced for Directorate Management Teams (DMTs) by finance detailing the financial position for each period, with the respective actions to mitigate overspending areas to be determined by each service area. A collective approach is taken by services and finance to ensure the financial stability of the organisation is maintained and any risks are identified.

The delivery of savings against targets are also the responsibility of the respective budget holders and Executive Directors and monitoring is carried out to ensure review of realisation of savings by Finance.

A program of budget holder training drop in sessions is planned for the new financial year, once permanent staffing resources are in place, to ensure compliance with financial requirements, particularly with new budget holders. Developments in Beyond are being delivered to enhance the budget holder experience and are currently in testing phase.

**g. There are regular financial reports to Cabinet and training is available for all members and officers on finance.**

**Assessment of Progress**

Quarterly reports are being produced for Cabinet and O&S Committees. Ongoing training requirements for members and staff are being discussed.

**h. There is a culture of collective effort and responsibility to address the financial issues the Council faces.**

**Assessment of Progress**

There is an awareness and collective effort to address the financial issues facing the Council, with work required in some areas to ensure progress is made to further enhance financial protocols and working practices.

**i. Outputs and outcomes are consistently delivered to best value.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics).

*There is a drive to ensure that all outputs are delivered to ensure best value and value for money and delivery of outcomes for residents. Further work is required in some areas to ensure enhancement of working practices to delivering a more enhanced focus of best value.*

10. Improvement in responsiveness to poor performance	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
a. Through governance arrangements and improved reporting performance issues are escalated and a clear action plan agreed.	A	A	A
b. 360-degree appraisals are used where appropriate.	A	A	A
c. Performance improvement and capability deficit processes for officers are developed, well understood, and monitored.	A	A	A
d. Performance management policies and processes are redefined and managers and officers aware of compliance requirements and target dates for action planning improvement.	A	A	A
e. Effective and timely responses to issues with accountability of the need to make changes and without a culture of blame.	A	A	A
<p><b>Lead Director Summary</b></p> <p>There is progress in this area to improve the council’s performance management framework but much of the work is still in progress leading to the amber rating. The new permanent Assistant Director, HR&amp;OD will take the lead on the workstream and is proposing a new performance development model based on existing work with the Chief Executive and Managing Director Commissioner. Due to resourcing pressures on the council, added to by the recent reorganisation announcements, has meant the timeline is being reviewed before a final commitment. This has meant the assessment remains at amber.</p>			

<p><b>a. Through governance arrangements and improved reporting performance issues are escalated and a clear action plan agreed.</b></p>
<p><b>Assessment of Progress</b></p> <p>This is on track through the review of performance management which is currently under way. A proposal has been presented to Commissioners and has been favourably received. It will be presented to SLT and General Services Committee in January/February 2025. A corporate wide change is resource intensive and, as stated above, the council will need to determine the timeline alongside its other demands, added to by the devolution and reorganisation agenda.</p>
<p><b>b. 360-degree appraisals are used where appropriate.</b></p>
<p><b>Assessment of Progress</b></p> <p>360 degree feedback will be considered as part of the review of performance management at the appropriate level, which is currently under way.</p>

**c. Performance improvement and capability deficit processes for officers are developed, well understood, and monitored.**

**Assessment of Progress**

This is on track through the review of performance management which is currently under way. A proposal has been presented to Commissioners and has been favourably received. It will be presented to SLT and members and the timeline for implementation will be reviewed and proposed, as above.

**d. Performance management and disciplinary policies and processes are redefined and managers and officers aware of compliance requirements and target dates for action planning improvement.**

**Assessment of Progress**

As above. Focus will also remain on the existing Performance Management arrangements addressing these issues.

**e. Effective and timely responses to issues with acceptance of the need to make changes and without a culture of blame.**

**Assessment of Progress**

As above



11. Improvement in policy and practice through the use of external expertise	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
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.	A	A	A
b. The existence of a proactive and welcoming attitude to external challenge and scrutiny.	A	A	G
c. Use of independents in Committees, as advisors or mentors to improve capability if required.	G	G	G
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.	G	G	A
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.	G	G	G

**Lead Director Summary**

To counter its previous insular approach, the Council has used external expertise in key areas of policy and strategy development and training but in a way that has incorporated knowledge and skills into the council in a number of areas, e.g. scrutiny working with CfGS and external trainers. Independent members sit on key committees and provide useful insight to decision making in Audit and Scrutiny. The new senior officer cadre have largely come from external organisations and therefore bringing new ideas and perspectives and standards to the council's challenges. There is demonstrated in the number of external reviews of council services e.g. PAS, review of information governance and ICT.

**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.**

**Assessment of Progress**

As reported previously, engagement with professional bodies continues across the Council. See above regarding review of performance management.

**b. The existence of a proactive and welcoming attitude to external challenge and scrutiny.**

**Assessment of Progress**

In addition to improving capability to seek external challenge and scrutiny as set out in the previous report, the council has shown examples of where external peer review and challenge has been embraced and led to service improvements. For example, the Planning Advisory Service (PAS) review of the council's planning functions have resulted in a programme of improvement within the service which has been subject to a follow-up review by PAS in January 2025). There have also been peer and external reviews in Information Governance and ICT.

**c. Use of independents in Committees, as advisors or mentors to improve capability if required.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics). A proposal to have a non-voting independent chair of code of conduct hearings is being proposed to Standards Committee – at their request – and then to full council for inclusion in the constitution.

*Independents are well utilised in Committees such as: Audit (where up to 6 x co-opted non-voting members can be appointed by the Committee) ; Planning ( 2 x co-opted non-voting members – one to represent the interests of business and trade in Thurrock and the other to represent the interests of heritage and conservation/ the countryside); and various independent co-opted members of the Overview and Scrutiny Committees, for example parent governors to comment on education matters.*

**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.**

**Assessment of Progress**

Within the new Performance Management and Accountability Framework, it is our intention to agree an approach to opportunities for continuous improvement. It is not yet clear how the Government's proposals for devolution and reorganisation will impact the timeline for this work but we are committed to seeking external views on our performance as part of intervention and improvement.

**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.**

**Assessment of Progress**

The position is assessed as being the same as 1<sup>st</sup> Report (see below italics).

*Ongoing activity in this area remains in place.*

12. Improvement in corporate capability	RAG – Baseline (Sept 24)	RAG – last period (Sept 24)	RAG – this period (Dec 24)
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.	A	A	G
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.	A	A	G
c. The local authority takes an innovative approach when considering how services will be designed and delivered in the future.	A	A	A
d. A demonstrable commitment to leadership and member development, including specialist training for key roles.	G	G	G

### Lead Director Summary

There is progress in this area, but improvement is still ongoing. Much of this work links to the work on performance management. Compliance on appraisals is high but it is recognised there are inconsistencies in the quality of assessment, which is under review.

Work on member development is being focussed on a successful and comprehensive councillor training after May 2025 elections but work with the cabinet and scrutiny has taken place to implement new ways of working. The plan for induction has had to refocus following the proposed cancellation of the all-out elections to more of a focus on improving skills but still based on a training day. There are some concerns about the level of member commitment to a weekday for this especially given the number that are in full time employment. This may require a rethink of the approach.

### 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.

#### Assessment of Progress

A proposal is to be presented to SLT for a new approach to resourcing. The recruitment policy will also be reviewed as part of the review of all People policies during 2025.

### 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.

#### Assessment of Progress

This is on track through the review of performance management which is currently under way. A proposal has been presented to Commissioners and has been favourably received. It will be presented to SLT and General Services Committee in January/February 2025 with the aim of implementation at the start of the new performance cycle in April 2025.

**c. The local authority takes an innovative approach when considering how services will be designed and delivered in the future.**

**Assessment of Progress**

Work on developing the new operating model has challenged services to think differently about how they are delivered. In the medium to long-term, services will be focussing on readiness in response to the English Devolution White Paper.

**d. A demonstrable commitment to leadership and member development, including specialist training for key roles.**

**Assessment of Progress**

Member training continues for 2024/25, with the scheduled programme being delivered (albeit with fewer sessions outstanding due to the majority having been delivered for the year). An additional session on Scrutiny has been scheduled for February following further work with CfGS.

Additional opportunities that arise through the LGA and other local government bodies are sent to Members for further development when they arise. Selected senior Members have continued to attend the LGA Leadership Academy throughout quarter 3. Individual Member training profiles continue to be developed, allowing Members to track and manage their training journey.

A refresh of the Member Development Strategy has been drafted, following the results of the internal audit of Member training in the summer of 2024. As part of that refresh Member 'training pathways' have been developed for use in 2025/26, to allow Members to attend the training sessions relevant to their specific role with the Council, e.g., Scrutiny Member, Committee chair, Cabinet Member.

The refresh, alongside a draft Member training schedule for 2025/26, is due to be presented at Standards Committee on in February 2025 and GRB in January 2025. Funding to provide a programme of externally-facilitated training on a range of skills has been agreed in principle by the LGA.