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Audit and Governance Committee

Date:	Friday, 9 July 2021
Time:	10.00 am
Venue:	A link to the meeting can be found on the front page of the agenda.

Membership: (Quorum 3)
Matthew Hall (Chairman), Richard Biggs (Vice-Chairman), Susan Cocking, Rod Adkins, Janet Dover, Barry Goringe, Mike Parkes, Bill Pipe, Clare Sutton and Bill Trite

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Chief Executive: Matt Prosser, County Hall, Dorchester, Dorset, DT1 1XJ

For more information about this agenda please contact Democratic Services susan.dallison@dorsetcouncil.gov.uk

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A G E N D A

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1 APOLOGIES

To receive any apologies for absence.

2 MINUTES 5 - 12

To confirm the minutes of the meeting held on 19 April and the extraordinary meeting held on 21 June 2021.

3 DECLARATIONS OF INTEREST

To disclose any pecuniary, other registrable or personal interest as set out in the adopted Code of Conduct. In making their decision councillors are asked to state the agenda item, the nature of the interest and any action they propose to take as part of their declaration.

If required, further advice should be sought from the Monitoring Officer in advance of the meeting.

4 PUBLIC PARTICIPATION

To receive questions or statements on the business of the committee from town and parish councils and members of the public.

When submitting a question please indicate who the question is for and include your name, address and contact details. Questions and statements received in line with the council's rules for public participation will be published as a supplement to the agenda.

The deadline for submission of the full text of a question or statement is 8.30am on 6th July 2021.

5 AUDIT REPORT SEND TRANSPORT 13 - 22

To consider a report by Rupert Bamberger, Assistant Director, SWAP.

6	**SWAP INTERNAL AUDIT PROGRESS REPORT**	23 - 30

To consider a report from Rupert Bamberger (SWAP) and Sally White (SWAP).

7	**RISK MANAGEMENT UPDATE**	31 - 54

To consider a report by David Trotter, Risk & Resilience Officer and Marc Eyre, Service Manager for Assurance,

8	**FRAUD AND WHISTLEBLOWING**	55 - 64

To consider a report by Marc Eyre, Service Manager for Assurance.

9	**CORPORATE COMPLAINTS**	65 - 84

To consider a report by Marc Eyre, Service Manager for Assurance and Tony Bygrave, Service Assurance Officer – Complaints.

10	**PREVENT**	85 - 118

To consider a recommendation from the People & Health Overview Committee.

11	**FORWARD PLAN**	119 - 122

To consider the work programme for the Committee.

12 URGENT ITEMS

To consider any items of business which the Chairman has had prior notification and considers to be urgent pursuant to section 100B (4) b) of the Local Government Act 1972. The reason for the urgency shall be recorded in the minutes.

13 EXEMPT BUSINESS

To move the exclusion of the press and the public for the following item in view of the likely disclosure of exempt information within the meaning of paragraph x of schedule 12 A to the Local Government Act 1972 (as amended).

The public and the press will be asked to leave the meeting whilst the item of business is considered.

There are no items of exempt business.

Dorset Council

AUDIT AND GOVERNANCE COMMITTEE

MINUTES OF MEETING HELD ON MONDAY 19 APRIL 2021

Present: Cllrs Matthew Hall (Chairman), Richard Biggs (Vice-Chairman), Susan Cocking, Rod Adkins, Janet Dover, Barry Goringe, Mike Parkes and Clare Sutton

Apologies: Cllrs Bill Pipe and Bill Trite

Also present: Ian Howse (Deloitte)

Officers present (for all or part of the meeting):
David Trotter (Risk and Resilience Officer), Jim McManus (Corporate Director - Finance and Commercial), Marc Eyre (Service Manager for Assurance), Rupert Bamberger (Assistant Director SWAP), Sally White (Principal Auditor), Richard Ironside (Service Manager for (Finance) Policy and Compliance), Heather Lappin (Head of Strategic Finance), Steve Veevers (Corporate Director Operations, Adult Care) and Elaine Tibble (Senior Democratic Services Officer)

63. **Minutes**

The minutes of the meeting held on 22 February 2021 were confirmed and agreed as a correct record.

64. **Declarations of Interest**

No declarations of disclosable pecuniary interests were made at the meeting.

65. **Public Participation**

There were no questions or statements from members of the public.

66. **Internal Audit Annual Opinion Report 2020-21**

The Principal Auditor from SWAP introduced the Internal Audit Annual Opinion Report 2020/21.

Due to pandemic and staff re-deployment there had been limits to the breadth of the work carried out. Key points raised were as follows;

The table on P13 demonstrated levels of audit assurance against key risks. All limited assurances were followed up as part of SWAP's work, however, at the end of last year the key priority recommendations not implemented at the time of follow was 54%. SWAP were addressing this and hoped to report improved figures going forwards.

2 significant corporate risks were identified but the priority findings had been addressed.
72% of opinion based work last year resulted in a limited opinion, however much of the work had been directed by senior management towards those areas of concern.
Added Value Points:–

- cash savings of £118,000 had been identified directly as a result of SWAP work.
- SWAP had paid £4,500 for the Council to belong to CIFAS to enable fraud prevention data matching.
- Enhancements made to audit processes, including the introduction of an agile audit approach, a focus on data analysis and a one-page audit report.
- Duplicate payment identification work had identified a total of £1.2M of duplicate payments from 2017 to date.
- Following the introduction of new council software, duplicate payments identified had dropped significantly, recovery work had been successful but £2,500 written off and a very small amount still to recover.

The Chairman thanked the SWAP staff who had been re-deployed to help the Council with the pandemic over the last year.

Questions and discussion focussed on:-

No audit actions that were 'risk accepted' during 2020/21 was this a risk adverse approach? Agreeing recommended actions was a negotiated process and only those where a need to mitigate an identified risk would be recorded as risk accepted.

Regular meetings to be arranged with Chairman, Vice-Chairman and SWAP to review risk accepted between committee meetings.

Duplicate payments - the amount of £2500 written off was this one or several payments? SWAP to investigate and inform the Chairman.

In response to a question about action taken against companies that were paid twice in error the Corporate Director Finance and Commercial explained that it was relatively easy to make recoveries from well established companies but recoveries from companies that were no longer trading or were one-off transactions, made recovery difficult or not possible.

The Chair asked SWAP to undertake some benchmarking work to compare the duplicate payment issue across other councils.

The Chair asked whether a SWAP representative could attend Audit and Governance Committee at the July meeting when the SWAP School transport report would be discussed

67. **SWAP approach to Internal Audit Planning 2021-22**

The Assistant Director of SWAP presented the Approach to Internal Audit Planning 2021/22 and the Internal Audit Charter.

The approach to internal audit planning throughout 2021/22 would be a continuous risk assessment and rolling plan approach.

The programme of audit work would be built with consideration to the Authority's corporate & service risk registers. It would also look to consider/ incorporate where necessary, any red flags from the council's corporate performance information, or known issues within Directorates.

There would be quarterly updates in terms of audit coverage of key risks and priorities. Plus up to date information available via a live Audit Tacker (link within the planning paper) of audit outcomes, audits in progress, audits planned etc.

The Assistant Director also highlighted the Internal Audit Charter at Appendix 1 for approval.

Questions and discussion focussed on:-
Concerns over the amount of audit work SWAP were able to carry out during the Pandemic due to redeployment of audit staff, whether this would continue, and whether there was scope to catch up on internal audit coverage.
The Assistant Director highlighted that internal audit staff were only expected to be redeployed for a further month maximum. Subject to this being the case, and the internal audit team being at full complement, internal audit coverage was expected to return to reasonable levels. In terms of catching up, the Assistant Director noted that greater efforts would be put into developing an assurance map, to help signpost other sources of council assurance currently (or able) to provide assurance over those key risks not covered by internal audit.
Business grant distribution. More information on the processes and assurances undertaken would be brought to the next Audit & Governance meeting in July.

Proposed by Cllr Matt Hall, seconded by Cllr Janet Dover.

Decision: to approve the Internal Audit Charter.

68. **Annual Governance Statement 2020-21**

The Annual Governance Statement for 2020/21 was presented by the Service Manager for Assurance who highlighted the key items. This paper accompanied the annual accounts and provided an assessment that the Council had appropriate governance arrangements in place.

A number of improvements had been made to the document following discussions with the Audit & Governance Committee.

Questions and discussion focused on:-

What the council was doing to increase the undertaking Data Protection Training.
Audit & Governance Committee to be updated on this training.
New procurement rules from 2024.
EU Settlement Scheme (employee stats?). Response to be copied to all members.
Addition of new Code of Conduct in the Annual Governance Statement (issues addressed).
Improvement of the Annual Governance Statement to encourage residents to read it.

69. **Risk Management Update**

The Service Manager for Assurance presented the Risk Management Update to the committee for review.

There had been good engagements with Place Directorate and it had been noted a number of risks had not been reviewed recently, a more thorough update would be presented at the next quarterly committee meeting. This had been largely due to the impact of the Pandemic.

Questions and discussion focused on;
The impact of un-used annual leave on the service and structures to manage that.
Information Asset Registers overdue for update – timeframe?

Thanks were expressed to the officers for their excellent work and a very useful document.

Had risk levels been severely impacted by the Pandemic?
How accurate the figures were to “normal”, if heading in the right direction? The Pandemic figures should not be bench-mark for going forward.

The Chairman requested an update on the Place Directorate at a future meeting so that the committee could understand and look at what could be put in place to assist.

Wareham level crossing – to be referred to the Place and Resources Scrutiny Committee to look at.

70. **External Audit Update**

The Committee received a verbal update from the external auditor (Deloitte).

A number of adjustments had been identified that would need to be made to the draft financial statement. There had been complications due to the amalgamation of all the former districts into one Dorset Council but it was hoped to conclude the audit for sign off at the end of the month after a very thorough process.

The amended draft would be brought back to the next committee meeting on 9 July for good governance due to the material changes and the time that had elapsed.

71. **Forward Plan**

The Forward Plan was noted and the additional items to be added for 9 July 2021 meeting.

SWAP – to add Internal Audit Progress Report.
Place Risk Update
External Audit Update

72. **Urgent items**

There were no urgent items.

73. **Exempt Business**

There was no exempt business.

Duration of meeting: 10.00 - 11.20 am

Chairman

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Dorset Council

INFORMAL AUDIT AND GOVERNANCE COMMITTEE

MINUTES OF MEETING HELD ON MONDAY 21 JUNE 2021

Present: Cllrs Matthew Hall (Chairman), Rod Adkins, Susan Cocking, Janet Dover, Barry Goringe, Bill Trite and Andrew Parry

Apologies: Cllrs Richard Biggs, Mike Parkes and Clare Sutton

Officers present (for all or part of the meeting):
David Trotter (Risk and Resilience Officer), Aidan Dunn (Executive Director - Corporate Development S151), Jonathan Mair (Corporate Director - Legal & Democratic Service Monitoring Officer), Jim McManus (Corporate Director - Finance and Commercial), Rupert Bamberger (Assistant Director SWAP), Richard Ironside (Service Manager for (Finance) Policy and Compliance), Heather Lappin (Head of Strategic Finance), Theresa Leavy (Executive Director of People - Children), David Wilkes (Service Manager for Treasury and Investments), Neil Gorman (Service Manager (Finance) Corp Policy & Comp) and Elaine Tibble (Senior Democratic Services Officer)

1. **Declarations of Interest**

No declarations of disclosable pecuniary interests were made at the meeting.

2. **Public Participation**

The were no statements or questions from Town and Parish Councils or the Public

3. **ISA 260 Report from Deloitte**

Ian House the External Auditor from Deloitte presented the final audit report on the 2019/20 Accounts. He highlighted the conclusions of the audit work and clarified the relevant points. A modified opinion on the financial statement would be issued rather than a qualified opinion, this was in relation to one balance, due to the provision for appeals in relation to non-domestic rates.

Following a summary of the main points of the audit The External Auditor updated the committee in the following areas from the report:

- Determination of Materiality
- Significant Risks
- Property Valuations
- Completeness of Accrued Expenditures
- Calculation of the Council's Pension Fund Liability

- Management Override of Controls
- Value For Money (Children's Services)
- Adjusted and Unadjusted Misstatements

The Corporate Director Finance and Commercial together with The Executive Director, of People - Children, addressed the committee members. The Corporate Director Finance and Commercial reminded members that at the 16 November 2020 meeting the committee gave delegated authority to the Chairman and the Section 151 Officer to sign the accounts, today's presentation was to update members with any changes to the report since that meeting, to ensure good governance.

The Executive Director of People – Children outlined the challenges for Children's Services together with action taken and progress to date.

Members of the Audit & Governance Committee were given the opportunity to ask questions.
Members asked for regular updates on the NDR Working Paper and future progress in Children's Services, ie. Ofsted Inspection findings and outcomes.

In summing up the Section 151 Officer and The Corporate Director, Legal and Democratic, confirmed that authority from the November committee meeting had given the Section 151 Officer and Chairman authority to sign the Accounts and a further decision from the committee was not needed.

4. **Forward Plan July 2021**

The Forward Plan was noted and the Committee agreed that as there were no items for discussion in August that the meeting scheduled for 9 August 2021 should be cancelled.

5. **Urgent items**

There were no urgent items.

6. **Exempt Business**

There was no exempt business.

Duration of meeting: 10.00 - 11.00 am

Chairman

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Audit and Governance Committee
9 July 2021

Home to School Transport internal audit update

For Decision

Portfolio Holder: Cllr R Bryan, Highways, Travel and Environment

Executive Director: J Sellgren, Executive Director of Place

Report Author: Rupert Bamberger
Title: Assistant Director, SWAP Internal Audit Services, Tel: 07720 312 464
Email: rupert.bamberger@swapaudit.co.uk

Report Status: Public

Recommendation:
That the Audit and Governance Committee reviews progress made with mitigating the key risks and subsequent actions identified in the July 2020 internal audit of home to school transport.

Reason for Recommendation:
To ensure that the Committee are satisfied with progress within this area and have received satisfactory assurance that any significant risks have been mitigated.

1. Executive Summary
In SWAP's Internal Audit Annual Opinion report for 2020-21 presented at the April meeting of the Audit & Governance Committee, it was highlighted that two significant risks had been identified as part of our internal audit work throughout 2020-21.

One of these risks related to SWAP's audit review of Home to School Transport, which was finalised and reported to management in July 2020. The Committee requested that an update be brough to July's meeting with progress on any actions.

The original internal audit was requested by the Director of Children's Services as a result of an unpredicted budget overspend, and 2019-20 outturn of both SEN and mainstream school transport budgets, of approximately £1.7m combined.

SWAP's subsequent internal audit raised a number of findings with twelve management actions agreed for officers within both Place and Children's Services to take forward.

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In February 2021, SWAP carried out a follow up review of the area and were pleased to report that quick and proactive action had been taken by the services, with ten of the twelve actions confirmed as implemented. Appendix A provides the summary of this follow up review, with Appendix B providing the original management actions and updated status of the actions as at February 2021.

Since February, SWAP have liaised with the services in relation to the two remaining management actions and confirmed a further action has now been implemented (*SWAP Ref: 44026 in Appendix B, relating to the production of a commissioning strategy*). This leaves just one remaining Priority 2 action (*SWAP Ref: 44029 in Appendix B, relating to consolidated billing*) from the original twelve, with an expected completion date for this action now estimated to be October 2021. SWAP will continue to monitor this action through to implementation.

2. Financial Implications

No direct budget implications, although unmitigated risks in this area may give rise to future budget overspends.

3. Well-being and Health Implications

No direct implications.

4. Climate implications

No direct implications.

5. Other Implications

No direct implications, although clearly the area of internal audit focus will more broadly incorporate matters such as safeguarding children, as well as sustainability.

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:
Current Risk: High (*at time of the original internal audit*)
Residual Risk: Medium

7. Equalities Impact Assessment

There are no equalities issues arising directly from this report.

8. Appendices

Appendix A – School Transport Follow up – Final Report – February 2021
Appendix B - School Transport Follow up – Action Plan – February 2021 (Appendix 1)

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9. Background Papers

None.

Footnote:
Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.

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School Transport Follow Up – Final Report – February 2021

Dorset Council

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Follow Up Audit Objective

To provide assurance that agreed actions to mitigate against risk exposure identified within the 2020/21 Limited opinion audit of School Transport have been implemented.

Follow Up Progress Summary

Priority	Complete	In Progress	Not Started	Summary
Priority 1	3	1	0	**4**
Priority 2	5	1	0	**6**
Priority 3	2	0	0	**2**
Total	**10**	**2**	**0**	**12**

Follow Up Assessment

The original audit of School Transport was completed in July 2020 and received a Limited assurance opinion.

It is pleasing to report that the follow up audit has found that services have been proactive with ten of the twelve actions having been completed. Work to implement the actions has been undertaken within a short time scale. The remaining two actions are in progress and are planned to be implemented by 30th April 2021 which we will monitor through the Council to ensure they are completed.

Key Findings

The SEND Travel budget is assigned to a responsible officer in Children's. A SEND Travel Finance Monitoring Group has been established to jointly monitor costs on a monthly basis with representation from Place, Children's and Accountancy. Recharges of passenger assistant costs are being processed by Accountancy monthly and checked by Children's. A decision has been made to cease consolidated billing and revert to invoicing but this will take time to implement.

A review of the suitability of Trapeze has been undertaken by Place and concluded that it is not deemed fit for purpose. A system procurement workstream has been added to Place's transformation programme of work to procure an appropriate replacement. In the meantime, data has been cleansed on both Trapeze and Synergy.

There is a draft SEND Travel Commissioning Agreement in place which will be finalised by the end of February clearly setting out roles and responsibilities for Place and Children's Directorates. The EHCP process has been amended to help identify travel requirements at an early stage.

A SEND Task and Finish Group has been established as a short-term measure to ensure that improvements are embedded successfully. Members and Senior Officers of the Council attend this group.

Follow Up Scope

Testing has been performed in relation to all actions and supporting evidence obtained to support implementation of all actions. Responses and supporting evidence has been provided by Children's, Place and Accountancy staff.

Full details of our audit testing are available upon request. Our audit assurance framework and definitions can be found here (www.swapaudit.co.uk/audit-framework-and-definitions)

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Dorset Council

SWAP INTERNAL AUDIT SERVICES Assuring – Improving – Protecting

Appendix 1 Agreed Actions & Follow Up Assessment

Agreed Action			Follow Up Assessment	Complete
Responsibility for the monitoring and reporting of the SEND Travel budget will be assigned to an individual.			The Corporate Director for Education and Learning is the responsible officer for the SEND Travel budget. The SEND Travel Finance Monitoring Group has been formed with twelve monthly meetings scheduled (commencing on 23/09/20) with representatives from both Place and Children's. To date meetings have not been minuted or decisions recorded. A new mechanism for recording decisions will be implemented from the February meeting.	
Priority	1	*SWAP Ref: 44024*		

Agreed Action			Follow Up Assessment	Complete
An individual from Dorset Travel will attend a monthly SEND Travel budget monitoring meeting along with SEND and Accountancy.			Head of Service for Dorset Travel will be a member of the SEND Travel Finance Monitoring Group. Terms of Reference confirms membership from all required services.	
Priority	2	*SWAP Ref: 44025*		

Agreed Action			Follow Up Assessment			In Progress
A commissioning strategy for SEND travel will be written with a supporting policy that clearly sets out the roles and responsibilities for both SEND requesting the travel and Dorset Travel who commission the provision.			A full draft strategy is now complete and with Dorset Travel for approval. The team are on their second iteration with few further amendments to be made. Target completion is end of February 2021.			
Priority	1	*SWAP Ref: 44026*	**Responsible Officer**	**Corporate Director for Education and Learning / Corporate Director for Economic Growth and Infrastructure**	**Revised Timescale**	**28th February 2021**

Full details of our audit testing are available upon request. Our audit assurance framework and definitions can be found here (www.swapaudit.co.uk/audit-framework-and-definitions)

Agreed Action			Follow Up Assessment	Complete
Travel requirements will be considered early in the EHC planning process and that it forms part of the annual review.			Appropriate changes to the EHCNA process and Annual Review process have been implemented with the SEND service. Workshops will be undertaken with our parent carer forum and other key stakeholders as part of wider improvements to the SEND service processes, which will factor in opportunities to improve the efficiency by which Children's Services can alert Place to travel requirements. These ambitions are set out in the new Commissioning Strategy and part of the service's continuous improvement activities.	
Priority	2	*SWAP Ref: 44027*		

Agreed Action			Follow Up Assessment	Complete
Consideration will be given as to whether the current Trapeze system can deliver the service requirements. It is important that all key requirements including commissioning, operational and financial requirements for a new system to manage school transport are identified before tendering for a potential replacement.			Investigations into the suitability of the system to meet the business needs and to perform sufficiently were undertaken. The Trapeze system is not deemed as fit for purpose and therefore a system procurement workstream has been added to our transformation programme of work to procure an appropriate replacement. (Evidence of investigations can be seen in the 'Trapeze Health Check Report'). A project working group was established and is now reviewing requirements in collaboration with colleagues from procurement. A timeline to procure optimal systems in the next 6-12 months has been drafted.	
Priority	1	*SWAP Ref: 44028*		

Agreed Action			Follow Up Assessment		In Progress	
A review will be undertaken of the capacity within Dorset Travel with regard to the school transport billing and reconciliation process.			It has been agreed by the Place team that consolidated billing will cease, however in the short term there is no viable alternative to move to. Moving away from consolidated billing will occur in a phased manner and the proposal is to implement any changes at the start of the next financial year (April 2021).			
Priority	2	*SWAP Ref: 44029*	**Responsible Officer**	**Corporate Director for Economic Growth and Infrastructure**	**Revised Timescale**	**30th April 2021**

Full details of our audit testing are available upon request. Our audit assurance framework and definitions can be found here (www.swapaudit.co.uk/audit-framework-and-definitions)

Agreed Action			Follow Up Assessment	Complete
A review will be undertaken of the current consolidated billing process to establish whether this should continue.			A review has been undertaken and a decision made to cease consolidated billing.	
Priority	2	*SWAP Ref: 44030*		

Agreed Action			Follow Up Assessment	Complete
If the decision is made to keep consolidated billing, a review will be undertaken of the parameters currently in place for checking the bills and the timeliness of these checks being undertaken.			Not applicable as a decision has been made to cease consolidated billing.	
Priority	2	*SWAP Ref: 44031*		

Agreed Action			Follow Up Assessment	Complete
Steps will be taken to improve data accuracy to ensure that the base budget is more realistic and expenditure can be projected to year end.			Numerous steps have been taken to improve the overall quality of data within Dorset Travel; these include some of the following: updated over 3000 client records with current and accurate data, working with Service Designers to implement new business processes and solutions which will ensure the continued accuracy of our data, incorporated and agreed a planned approach to deliver project outcomes to improve the accuracy of contract and logistic data and move to monthly invoicing – all of which will continue to improve our ability to provide accurate financial and demand focused data. Alongside this, we have also started work on producing KPIs and Management Information which will inform relevant services with insight around current service demand and trends within our spend e.g. number of children on transport and the nature and cost of their transport provision. Children's have undertaken an exercise to cleanse the data on Synergy and have created a live power BI report of EHCP plans in process.	
Priority	1	*SWAP Ref: 44032*		

Full details of our audit testing are available upon request. Our audit assurance framework and definitions can be found here (www.swapaudit.co.uk/audit-framework-and-definitions)

Agreed Action			Follow Up Assessment	Completed
Charges for passenger assistants will continue to be recharged monthly from Place to Children's.			Accountancy are recharging passenger assistant costs monthly.	
Priority	3	*SWAP Ref: 44033*		

Agreed Action			Follow Up Assessment	Complete
Responsibility for checking and approving the monthly SEND passenger assistant recharges will be assigned to an individual.			Children's Services have identified an officer that will lead on the reconciliation of passenger assistants' recharges to ensure they are accurate and approved.	
Priority	3	*SWAP Ref: 44034*		

Agreed Action			Follow Up Assessment	Complete
A review will be undertaken to ensure that all previous recommendations from both internal and external reviews have been considered and where appropriate implemented.			A SEND Travel Task and Finish Group has been established as a short-term measure until they are satisfied that improvements are embedded successfully. This action is complete and has been consolidated into the improvement plan to be tracked within the other actions in this report.	
Priority	2	*SWAP Ref: 44035*		

Full details of our audit testing are available upon request. Our audit assurance framework and definitions can be found here (www.swapaudit.co.uk/audit-framework-and-definitions)

Dorset Council

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INTERNAL AUDIT SERVICES
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Dorset Council

Report of Internal Audit Activity

Progress Report 2021/22 – July 2021

Internal Audit ▪ Risk ▪ Special Investigations ▪ Consultancy

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Executive Summary

As part of our update reports, we will provide an ongoing opinion to support our end of year annual opinion.

We will also provide details of any significant risks that we have identified in our work, along with the progress of mitigating previously identified significant risks.

The contacts at SWAP in connection with this report are:

Rupert Bamberger
Assistant Director
Tel: 07720312464
rupert.bamberger@swapaudit.co.uk

Sally White
Principal Auditor
Tel: 07823473648
sally.white@swapaudit.co.uk

Audit Opinion, Significant Risks, and Audit follow up work

COVID-19 SWAP Staff Redeployment Update:

Since our last update in April, a one day a week SWAP redeployment within Adult Services has now concluded. In addition, the longer term assistance provided by the two staff redeployed to support the business grants team, has now also ended and the SWAP team are able to completely focus on audit activity.

Audit Opinion:

This is our first quarterly update for 2021/22 financial year. Members will recall that we are no longer planning audits based around financial years but are working with a continuous risk assessment and rolling plan approach. As such rather than working with an annual audit plan, which is subject to a high level of uncertainty and change, we are building our plan in conjunction with management as the year progresses.

Our live audit tracker, and specifically the coverage and assurance tab (*extract on page 2 below*), highlights that based on recent reviews completed, whilst generally risks are well managed, we have identified some gaps, weaknesses and areas of non-compliance. However, we have reasonable levels of confidence that the agreed actions will be implemented and as such are able to offer a reasonable opinion.

Since our last progress report in January 2021, we have issued two Limited assurance opinions on the areas and activities we have been auditing but none have been classified as a significant risk. In the Annual Report provided to the April Committee meeting we highlighted that the previously identified significant risks of Home to School Transport and Virtual School had both been adequately mitigated. In Appendix A on pages 6 & 7, we have provided the one-page audit reports for the Limited assurance opinion work, to provide the committee with further insight.

Follow Up of Agreed Audit Actions

As a result of continued low levels of implementation of high-priority audit actions across the Council, SWAP have developed a new process to embed the follow up of actions within directorates themselves, and track this on a live basis. Whilst the new process is very much in its infancy, we hope it will encourage timely completion of actions, which will bring with it strengthened internal control. We aim to provide members with more information about this new process, as well as a status summary of all high-priority audit actions, at the September meeting.

Internal Audit Plan Progress 2021/22

Our audit plan coverage assessment is designed to provide an indication of whether we have provided sufficient, independent assurance to monitor the organisation's risk profile effectively.

For those areas where no audit coverage is planned, assurance should be sought from other sources to provide a holistic picture of assurance against key risks.

SWAP Internal Audit Plan Coverage, and a move to Assurance Mapping

Recent internal audit coverage and outcomes are reflected in the chart below. Audit coverage by corporate risk is just one measure of the extent of audit coverage and we would encourage members to review the audit tracker to be able to additionally view coverage by *'Corporate Plan Objectives', 'Core Areas of Recommended Coverage'*, and also by *'SWAP Top 10 Risk Themes'*.

Additionally, we are currently working with the Assurance team to develop a more holistic **Assurance Map,** which will identify and capture other streams of assurance over key risks across the Council. From this and our own coverage assessment we will be able to visually highlight key assurance gaps, but also build a better picture of assurance outcomes to help direct focus and oversight.

Corporate Risk	Audit Coverage	Assurance assessment based on completed internal audit work
CRR 01 – Budget	Good	Limited
CRR 02 – Cyber Attack	Some	Reasonable
CRR 03 – Recruit, Retain, Develop Workforce	None	
CRR 04 – GDPR	Some	Limited
CRR 05 – Emergency Response	None	
CRR 06 – Brexit	None	
CRR 07 – Infrastructure	Some	
CRR 08 – Education	Some	
CRR 09 – Transformation	Some	Limited
CRR 10 – Corporate Knowledge	None	
CRR 11 – Climate Change	None	
CRR 12 – Breach of Statutory Duty	Some	
CRR 13 – Health, Safety, Wellbeing	Some	Limited
CRR 14 – Safeguarding	Good	Limited
CRR 15 – Commissioning	Good	Limited
CRR 16 – Officer/ Member Interface	None	
CRR 17 – School Transport	Adequate	Limited
CRR 18 – Evidence Base	None	
CRR 19 – Partnerships	None	
CRR 20 – Election	None	
CRR 21 – Covid-19 Response	Good	Advisory

Coverage Key	
Good	Good audit coverage completed
Adequate	Adequate audit coverage completed
Some	Some aspects of audit coverage completed
In progress	Some aspects of audit coverage in progress
None	No audit coverage to date

**Audits carried out more than 2 years from current date are not included.*
**Audits carried out between 12 and 24 months from current date have a reduced impact on audit coverage.*

Assurance Key	
Substantial	Sound system of governance, risk management and controls exist
Reasonable	Generally sound system of governance, risk management and control in place
Limited	Significant gaps, weaknesses or non-compliance were identified
No Assurance	Fundamental gaps, weaknesses or non-compliance identified

**Audits carried out more than 12 months from current date are not included.*

Unrestricted

We will build our audit plan as the year progresses to ensure that we are auditing the right things at the right time

Changes to the Audit Plan

We have traditionally reported to the committee any changes to our audit plan. However, as we are adding work to our plan on a risk-assessed and rolling basis there is much less likelihood that audit work will be removed or changed. Any audits removed or deferred can be viewed within the audit tracker. During quarter 1 of 2021/22 we have undertaken more grant certification work than would normally be expected. This is due to the number of Covid related grant payments that have required certification by the Head of Internal Audit. We have now created a programme of grant certification that enables us to plan this work going forwards.

SWAP Performance Measures

Performance Measure	Performance
Quality of Audit Work	
Overall Client Satisfaction *(Did our work meet or exceed expectations, when looking at our Communication, Auditor Professionalism and Competence, and Value to the Organisation)*	**100%**
Value to the Organisation *(Client view of whether our audit work met or exceeded expectations, in terms of value to their area)*	**100%**
Direct financial savings identified as a result of internal audit work since our last report	**£111,000**

Outcomes from Follow Up Audit Work

We have previously reported to the Committee the percentage of Priority 1&2 actions for Limited assurance audits, that remain outstanding when the follow up audit is undertaken. We had found that this figure had remained stubbornly high for some time and as a result we are currently transitioning to a new follow up process, which we hope will improve levels of implementation. This process is currently embedding, but we will recommence enhanced performance reporting of this area at the September meeting.

Unrestricted

Added Value

'Extra feature(s) of an item of interest (product, service, person etc.) that go beyond the standard expectations and provide something more while adding little or nothing to its cost.'

Added Value

Benchmarking

We have undertaken a range of benchmarking exercises since our last report. We use our own SWAP partner councils for benchmarking, but also utilise a wider national group of the Chief Auditor's Network which has delivered some useful benchmarking data. The exercises undertaken since our last report are:

- Insurance – how Dorset compares to other Councils in terms of self-insurance and in-house handling of claims.
- Duplicate Payments – whether other Councils use bespoke software to identify duplicates in the payment process and if so, how successful this had been.
- Schools Forum –the make-up and constitution of other Council's Forums
- Disclosure and Barring Checks – the approach taken by other councils to ensure that volunteers are DBS checked where appropriate

Covid Grant Certification work

As outlined above we have undertaken a number of Covid related grant certifications across the last quarter. A number of these grants were found to be underspent and as part of our work we have been able to identify further opportunities for utilising the grant money on eligible expenditure, thus ensuring the grant is spent in full and avoiding the potential need to return funding to central government. As a result of this work, we have identified a further **£111k** of eligible spending which could be regarded as a saving to the council.

Covid Business Grants – Data Matching

SWAP has been able to support the council by matching data from the latest round of Covid business grants with the Credit Industry Fraud Avoidance System (CIFAS) in order to identify cases of potential fraud. We have risk-assessed any matches (with no high-risk matches identified) and passed any lower-level matches back to the service to investigate and take action if necessary.

Unrestricted

Internal Audit Plan Progress 2020/21 – Limited Opinion Audits APPENDIX A

The role of SWAP as the internal auditors for Dorset Council is to provide independent assurance that the Council's risk management, governance and internal control processes are operating effectively. In order for senior management and members to be able to appreciate the implications of the assurance provided within an audit report, SWAP provide an assurance opinion. The four recently revised opinion ratings are defined as follows:

Assurance Definitions	
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.
Limited	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited
Reasonable	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Substantial	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

In addition to the assurance definitions above we also provide an 'assurance dial' which indicates on a range of high medium or low where within the range of that assurance a particular audit assurance sits.

As can be seen in this example the assurance provided is low limited as the dial is sitting on the lower end of the limited scale. It could equally have been a medium limited assurance where the dial sits midway or high limited when it is sitting at the upper end close to the reasonable assurance.

The Committee is able to view a record of all internal audit work on the audit tracker. Please follow this link, click on the files tab and then on the file called Dorset Council Internal Audit Tracker. From the tracker, members are able to view work in progress and all completed work that would have previously been reported to the Committee in a table form. To provide the Committee with additional insight into Limited assurance audits we have been providing a summary of the outcomes. We have however, recently introduced a one-page audit report, which we are now providing in full for Limited assurance audits for members information.

Contract Management and Commercialisation– Final Report – April 2021

Dorset Council

SWAP INTERNAL AUDIT SERVICES Assuring – Improving – Protecting

Audit Objective To assess progress made by Dorset Council to deliver value for money from its suppliers through effective contract management.

Assurance Opinion

Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.

Number of Actions

Priority	Number
Priority 1	1
Priority 2	6
Priority 3	5
Total	12

Risks Reviewed

Failure to manage contracts effectively potentially leads to:

- Contractors not delivering contract terms
- Contractor performance not being effectively monitored or reviewed
- Contracts being uplifted annually without appropriate challenge

All or any of the above elements of poor contract management can result in poorer value for money.

Assessment

Medium

Key Findings

The Accord database needs to be an accurate and consistent source of key contract information to help drive increased commerciality and value for money across the authority. All Council officers acting as contract managers need to be identified in order that the Accord database can be appropriately updated. This will ensure that communication to contract managers is correctly targeted and effective. A performance dashboard should be developed to identify key gaps in information within the database, along with an escalation process in instances where action is not taken by the business.

The findings from the survey and the more detailed interviews indicate a general understanding amongst contract managers of the important role that they undertake for the Council. However, there is a need to ensure that all contract managers have the appropriate skills, knowledge, information and support and that they understand what is required of them in order to undertake their role effectively. As part of this there is a need to define the split of roles and responsibilities of both contract managers and procurement officers.

Throughout our work, a clear intent has been evident from the Service Manager, Commercial and Procurement, towards moving the Council to a more commercial approach. There are plans in place to set up a Commercial Network to support contract managers, with a Steering Group to define the work of the Commercialisation Transformation Programme. In addition, this will include working with Learning and Development to create a competency framework to further support contract managers.

Audit Scope

The audit included:

- A benchmarking exercise using contacts within the Local Authorities Chief Auditor's Network and the Central Buying Consortium.
- A survey of all contract managers named in the Accord contract management database was undertaken.
- More detailed interviews with selected respondents.
- Analysis of Accord and spend data to establish effective use of the database.
- Review of the proposed Commercialisation Transformation Programme.

Review of contract terms was limited to inclusion of specific KPI's and annual uplift terms.

Added Value Summary

In addition to the standard audit report, SWAP have provided additional data analysis around the assigned spend (which can be used to inform action 12), analysed results of the questionnaire to contract managers (including access to the Power BI report) and benchmarking across the Local Authority Chief Auditor Network and the Central Buying Consortium. This additional information can be used to shape the work of the Steering Group and Commercial Network going forwards.

Unrestricted

Management of Fraud & Reporting – Final Report – April 2021

Dorset Council

SWAP INTERNAL AUDIT SERVICES Assuring – Improving – Protecting

Audit Objective

To provide assurance that the processes for referring, assessing, investigating and managing potential allegations of fraud is clear and accessible to staff, stakeholders and members of the public.

Assurance Opinion

Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.

Number of Actions

Priority	Number
Priority 1	0
Priority 2	4
Priority 3	2
Total	6

Risk Reviewed	Assessment
Allegations of potential fraud are not referred to, assessed, investigated and managed appropriately resulting in financial and reputational damage and legal recourse.	Medium

Key Findings

A number of platforms exist for reporting and monitoring fraud across the Authority. However, the arrangements require enhancement to ensure reported fraud is captured and then monitored effectively and consistently. This will allow a central oversight of reported fraud, resulting in better management, reporting and learning throughout the Authority.

The majority of agreed actions from our 2018 audit of the council's whistleblowing arrangements remain outstanding. This area has been subject to three follow up audits since the original action plan was put in place and whilst actions are progressing, they have not yet been completed. A small working group has been established to progress these actions and needs to meet more frequently to address outstanding areas. Risks in relation to the arrangements in place to raise awareness, prevent and detect fraud therefore remain unmitigated.

Adequate fraud awareness training has not been made available to officers or members. There is also no allocated member level champion for fraud. In the absence of sufficient awareness and oversight with regards to suspected or actual fraud, fraud may go unreported or may not be adequately acted upon. There is also likely to be the absence of proactive fraud work helping to drive understanding of risk in this area.

There are evidential gaps in the awareness of both Fraud and Whistleblowing processes across the council. Although there are central points of access for fraud information and guidance, these are not currently easily accessible or advertised effectively to officers, members and contractors. Some positive work has been completed to address this, with further work planned.

Scope

The review has considered if:

- There are clear and known mechanisms on how to report fraud including a Fraud Response Procedure that provides direction on how referrals are dealt with.
- Officers and Members have received guidance and training on how to direct a fraud referral.
- The Anti-Fraud and Corruption Strategy directs to how to make a referral and the route.
- All fraud referrals are captured on a central information system that records the action taken including risk assessment.
- All fraud referrals are monitored, and summary reports are submitted to management and Members.

A follow up of the 2018 Whistleblowing Review has been carried out alongside this review due to the cross over and link of key areas.

Other Relevant Information

Due to the number of outstanding Whistleblowing actions and key findings from the Management of Fraud & Reporting review, the decision was made to combine the two pieces of work and re-issue a new audit opinion with new audit actions to help focus and address the key areas that are outstanding. Details of actions can be found in Appendix 1.

A summary of a cross comparison exercise carried out is attached in Appendix 2.

Audit and Governance Committee
9 July 2021
Risk Management Update

For Review and Consultation

Portfolio Holder: Cllr S Flower, Leader of the Council

Executive Director: J Mair, Corporate Director, Legal & Democratic

Report Author: David Trotter
Title: Risk and Resilience Officer
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Email: david.trotter@dorsetcouncil.gov.uk

Report Author: Marc Eyre
Title: Service Manager for Assurance
Tel: 01305 224358
Email: marc.eyre@dorsetcouncil.gov.uk

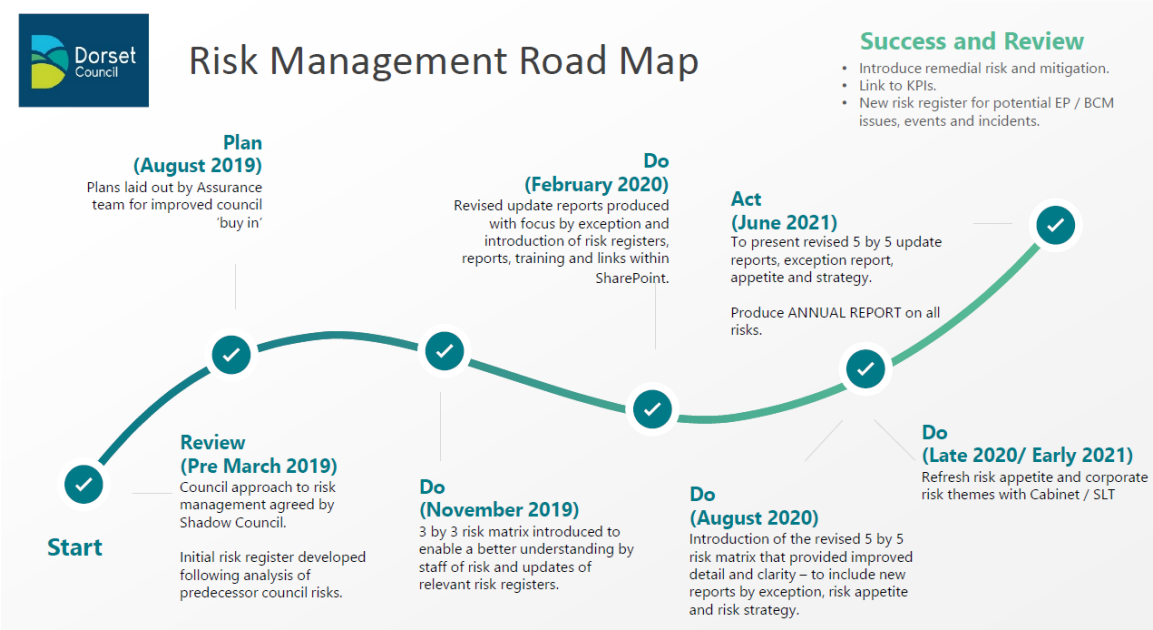
Report Status: Public

Recommendation: That Audit and Governance Committee note and review the key risks identified in the corporate and service risk registers.

Reason for Recommendation: To ensure that the Council's risk management methodologies remain current, proportionate, and effective in enabling risk informed decisions to be made.

1. Executive Summary

The continual development and promotion of risk management will ensure that Dorset Council remains well placed to demonstrate that objective and informed decisions are taken. The following road map has been established to assist further development of the risk management framework and improve maturity:



Strategic risk management is owned by the Senior Leadership Team, with an agreed risk management policy statement setting out the Councils commitment. Directors are accountable for the top-level strategic risks. These are informed by operational service level risks owned by Heads of Service and Service Managers. The principles of the Council's strategy is to be "risk aware" and not "risk averse", with our risk management arrangements informing our decision making processes.

The Risk and Resilience Officer has updated the risk scoring as proposed by the Committee. This quarter's summaries adopt the 5x5 matrix for the first time, as set out in Appendix A and B.

At the last Audit & Governance Committee meeting it was noted that a large number of risks within Place Directorate had not been subject to recent review, and a request was made by councillors for a further update. A risk workshop is scheduled with the Place Management Team on 21st July, and the Executive Director for Place will attend the September Committee meeting to provide an update.

2. Financial Implications

No budget implications specifically, although unmanaged risks may pose a threat to the Council's financial stability. Identified risk improvement measures may also have direct budget implications, each of which need to be subject to a cost/benefit analysis prior to implementation.

3. Well-being and Health Implications

Health, Safety and wellbeing is identified as one of our 21 corporate risk themes.

4. Climate implications

Climate change is identified as one of our 21 corporate risk themes.

5. Other Implications

None

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:
Current Risk: HIGH
Residual Risk: HIGH

The risk level is identified as High as Appendix B provides an update on those High-level risks which are currently identified within the Corporate Risk Register

7. Equalities Impact Assessment

Considering equalities issues is a key aspect of good governance, but there are no equalities issues arising directly from this report.

8. Appendices

Appendix A – Snapshot of Risks
Appendix B – Summary of High Risks

9. Background Papers

Footnote:
Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.

Overall Risk Management by Service – June 2021 the following is provided to summarise the current position against each risk service area. This will help the council to identify and focus upon potential areas for further scrutiny.

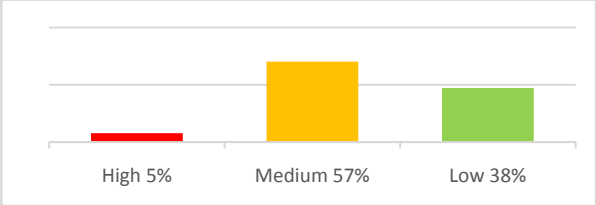
Dorset Council

No. of Risks 240 - 12 High Risks (5%)

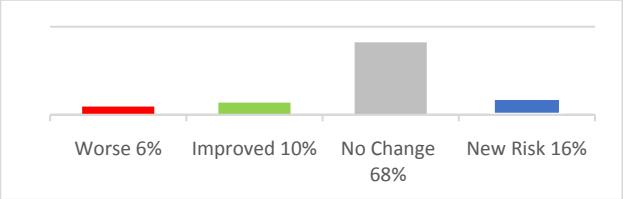
Impact	VU	U	P	L	VH
C		1			
Ma	2	39	31	11	
Mod		47	50	14	1
S		29	13	1	1
L					

Likelihood (Probability)

Risks Current Status



Risks Direction of Travel



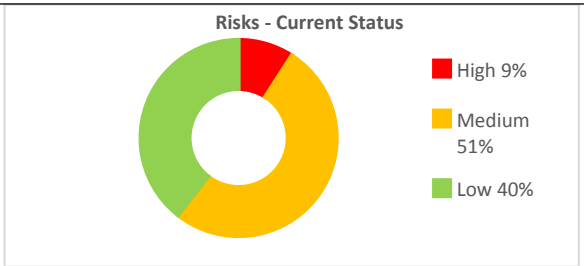
Adults and Housing Services

No. of Risks 33 - 3 High Risks (9%)

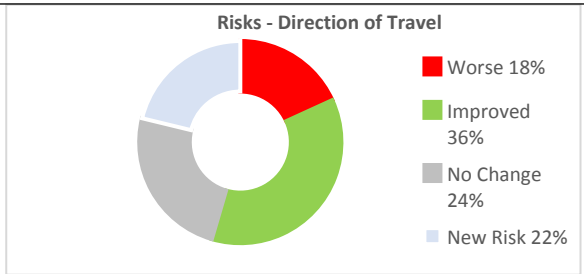
Impact	VU	U	P	L	VH
C					
Ma		1	4	3	
Mod		6	11		
S		5	2	1	
L					

Likelihood (Probability)

Risks Status



Risks Direction of Travel



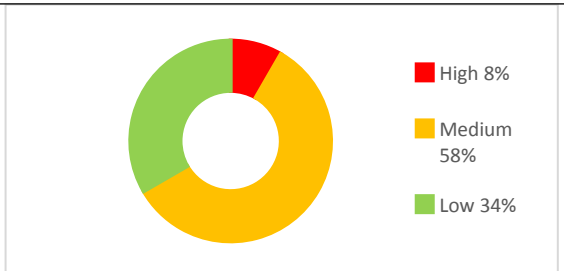
Children's Services

No. of Risks 24 - 2 High Risks (8%)

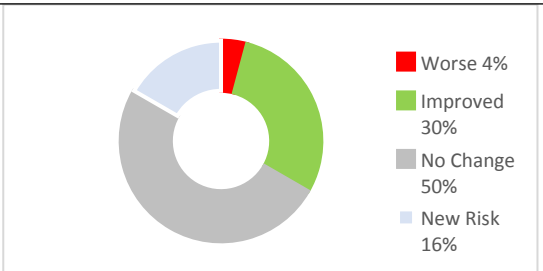
Impact	VU	U	P	L	VH
C					
Ma		4	5	2	
Mod		5	4	1	
S		1	2		
L					

Likelihood (Probability)

Risks Status



Risks Direction of Travel



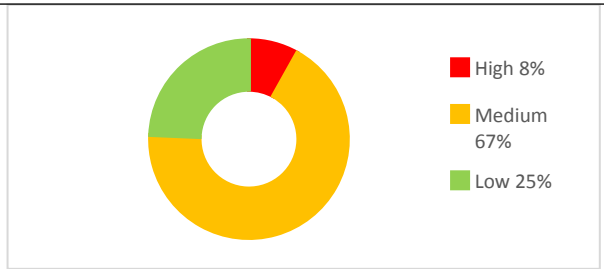
Overall Risk Management by Service – June 2021 the following is provided to summarise the current position against each risk service area. This will help the council to identify and focus upon potential areas for further scrutiny.

Corporate Services
No. of Risks 37 – 3 High Risks (8%)

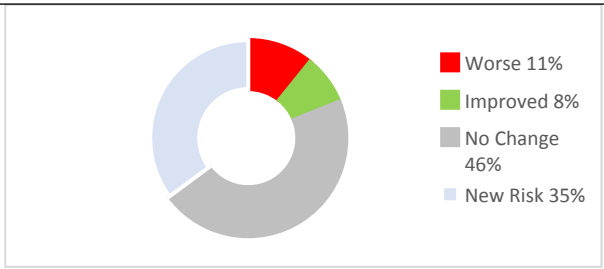
Impact	VU	U	P	L	VH
C					
Ma	1	8	4	2	
Mod		2	5	7	1
S		4	2		1
L					

Likelihood (Probability)

Risks Status



Risks Direction of Travel

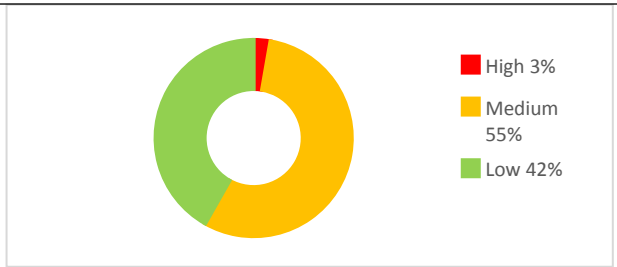


Place Services
No. of Risks 146: 4 High Risks (3%)

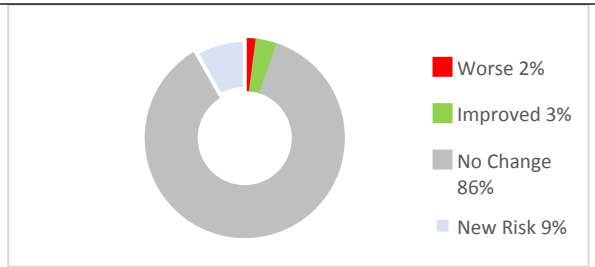
Impact	VU	U	P	L	VH
C		1			
Ma	1	26	18	4	
Mod		34	30	6	
S		19	7		
L					

Likelihood (Probability)

Risks Status



Risks Direction of Travel



ATTENTION – HIGH RISKS

Adults & Housing - Adult Care - Risk 125 - Gap exists between amount of available resource and post-COVID statutory demand
Adults & Housing – Housing - Risk 247 - Temporary Accommodation is insufficient to meet community need
Adults & Housing – Housing - Risk 180 – Increased Homeless Population
Children's - Care & Protection - Risk 104 - A lack of sufficiency and resilience (placements/residential/foster care) impacts negatively on the demands led budget for children in care
Children's - Schools & Learning - Risk 272 - Failure to stabilise the budget for the High Needs Block
Corporate – Assurance - Risk 59 - Inability to respond to the impacts of concurrent events
Corporate – Assurance - Risk 212 - Inadequate information governance culture and framework and culture (policy; training; monitoring etc) results in a significant data breach
Corporate – Assurance - Risk 321 - Unable to sustain Assurance service due to prolonged pressures (increasing caseloads; pandemic etc)
Place – Assets & Property - Engineering & Special Projects - Risk 201 - Climate change effects on sea level rise and uncertainty could lead to low lying areas such as Weymouth being uneconomic to defend
Place - Economy Infrastructure and Growth – HIGHWAYS - Infrastructure & Assets - Risk 84 - Failure to attract funding for asset maintenance
Place - Commercial Waste & Strategy - Risk 208 - Gaining sites and planning to provide infrastructure leads to failure to deliver service
Place - Fleet Maintenance - Risk 83 - PUWER Regulations - non-compliance of PUWER Regulations (H&S Provision and Use of Work Equipment Regulations 1998)

Directorate Update Reports contain the relevant detail on the current HIGH RISKS above

Risk Management Exception Report

Directorate Updates
HIGH RISK

June 2021

The continual development and promotion of risk management will ensure that the Council is well placed to demonstrate that objective and informed decisions are taken and that the Council is ultimately in a strong position to successfully face and address the challenges ahead.

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HIGH risks by Directorate	6
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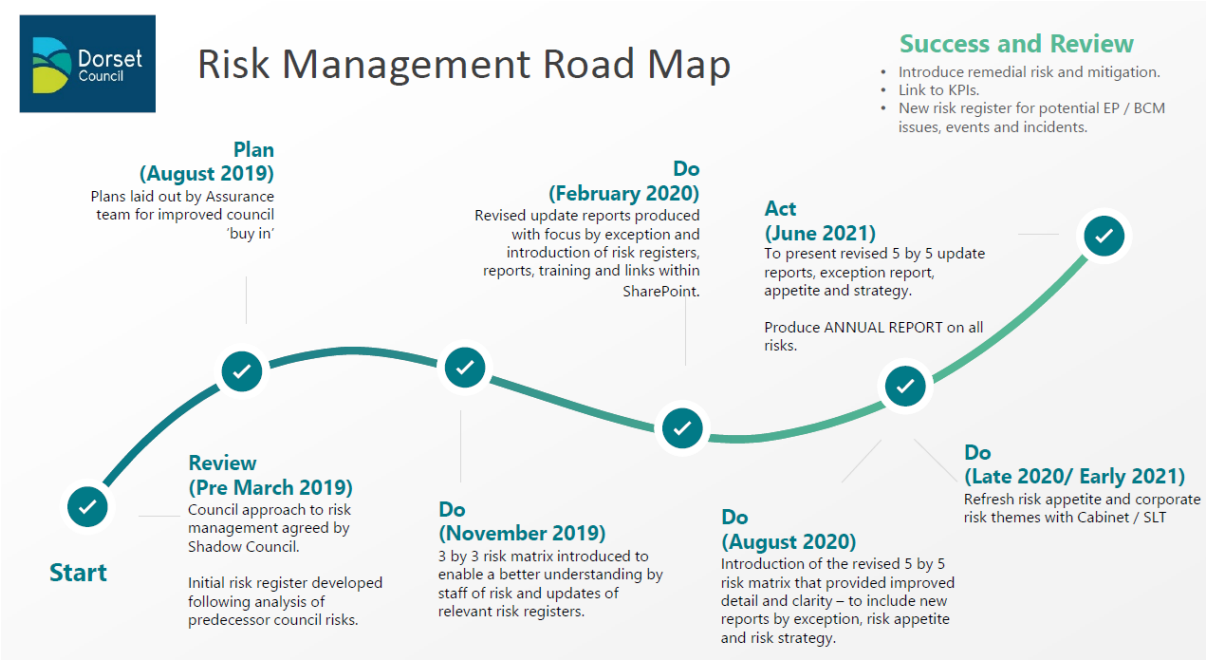
Children's Services Directorate Children's Care and Protection Schools and Learning	11
Corporate Services Directorate Assurance	13
Place Directorate Engineering and Special Projects Infrastructure and Assets Commercial Waste and Strategy Fleet Maintenance	15



Introduction

We recognise that risk management helps us to embed a culture, process and structure that is directed towards the effective management of opportunities and threats to the council. Such effective management will help the council in achieving its priorities and objectives as part of the council's governance framework.

We acknowledge that the Annual Governance Statement (AGS) highlighted several opportunities to enhance risk management and for example efforts have been made to:

- Increase the level of engagement and ownership.
- Enhance the engagement of Members in the risk management process.
- Refresh and update the Corporate and Directorate Risk Registers.
- Update the risk management training and awareness functionality.

The Accounts and Audit Regulations 2015 require the council to have in place arrangements for the management of risk. These arrangements are reviewed each year and reported as part of the Annual Governance Statement (AGS). The statement must identify any significant governance issues that may have resulted from failures in governance and risk management.

Risk Management

Risk affects all organisations. It can have far-reaching consequences in terms of economic performance, environmental and safety outcomes, and professional reputation. Risk is an important part of doing business – used to identify, assess, prioritise, manage, mitigate, communicate, and report on risk. Risk is anything and everything that could impact upon the successful achievement of aims and objectives.

Risk management is a process to identify, assess, manage, and control potential events or situations to provide reasonable assurance regarding the achievement of the organisation's objectives. Success comes from managing both the positive and the negative aspects of risk effectively. Understand the linkage between risk and controls - Risk drives controls, not the other way round. Internal controls exist for many reasons but one of their prime functions is to manage risk.

Update Statement

We continue to look at what makes sense, to understand where we need the resources and the skill sets, we need. We will be working to support the challenge to make our services as efficient as possible, and that's a relentless part of our budget setting process. We are all passionate about delivering the best outcomes for Dorset residents. We recognise that Risk Management is an integral part of good governance to which we are all committed.

Risk Management helps us to provide the framework and processes that enables the Council to manage uncertainty in a systematic way. As part of the Risk Management arrangements the Council reviews the Risk Management Assurance Policy on an annual basis.

We expect to receive more guidance from central government about any post lockdown office arrangements but based on experience to date. Even if we can start to fully relax all Covid-secure office restrictions from the earliest possible date of the 21 June, it will take time for our facilities teams to remove the Covid-secure office setup (or change it if there are new requirements) to prepare our offices for the return of colleagues.

Risk Ranking Matrix identifies the level of risk

Severity (IMPACT)	Description
Catastrophic Score 5	• Multiple deaths of employees or those in the Council's care • Inability to function effectively, Council-wide • Will lead to resignation of Chief Executive and/or Leader • Corporate Manslaughter charges • Service delivery must be taken over by Central Government • Front page news story in National Press • Financial loss over £10m
Major Score 4	• Suspicious death in Council's care • Major disruption to Council's critical services for more than 48hrs • Noticeable impact achieving strategic objectives • Will lead to resignation of Corporate Director and/or Cabinet Member • Adverse coverage in National press/Front page news locally • Financial loss £5m-£10m
Moderate Score 3	• Serious Injury to employees or those in the Council's care • Disruption to one critical Council Service for more than 48hrs • Will lead to resignation of Head of Service/Project Manager • Adverse coverage in local press • Financial loss £1m-£5m
Slight Score 2	• Minor Injury to employees or those in the Council's care • Manageable disruption to services • Disciplinary action against employee • Financial loss £100k-£1m
Limited Score 1	• Day-to-day operational problems • Financial loss less than £100k

Likelihood (PROBABILITY)	Description
Very High Score 5	Reasonable to expect that the event **WILL** happen, recur, possibly or frequently
Likely Score 4	Event is **MORE THAN LIKELY** to occur. Will Probably happen, recur, but is not a persisting issue.
Possible Score 3	**LITTLE LIKELIHOOD** of event occurring. It might happen or recur occasionally.
Unlikely Score 2	Event **NOT EXPECTED**. Do not expect it to happen or recur, but it is possible that it might do so.
Very Unlikely Score 1	**EXCEPTIONAL** event. This will probably never happen or recur.

Level of Risk	How should the risk be managed
HIGH (15-25)	Risks at this level sit above our tolerance and form the biggest risks. The Council is not willing to take risks at this level and action should be taken immediately.
MEDIUM (8-12)	While these risks can be tolerated, controls should be identified to bring the risk down to a more manageable level.
LOW (1-6)	These risks sit on the borders of the Council's risk appetite and so while they don't pose an immediate threat, they are still risking that should remain under review.

A **SUMMARY** of the risks for this reporting period are set out below:

The full Services Risk Register can be viewed from this link **HERE**

Dorset Council Risk Profile

Impact	VU	U	P	L	VH
C		1			
Ma	2	39	31	11	
Mod		47	50	14	1
S		29	13	1	1
L					

Likelihood (Probability)

240 Risks

12 High Risks (5%)

The aim is for all risks to have management actions in place and the risk management process will continue to be subject to a refresh during the coming months during 2021. As with all risks, it is not possible to eliminate the potential of failure entirely without significant financial and social costs. The challenge is to make every reasonable effort to mitigate and manage risks effectively, and where failure occurs, to learn and improve. Risks are being developed that help focus on the goal to have the right information to make intelligent choices about the design of services and the best use of resources.

Adults and Housing

No. of Risks 33 - 3 High Risks (9%)

Impact (Severity)	VU	U	P	L	VH
C					
Ma		1	4	3	
Mod		6	11		
S		5	2	1	
L					

Likelihood (Probability)

Children's Services

No. of Risks 24 - 2 High Risks (8%)

Impact (Severity)	VU	U	P	L	VH
C					
Ma		4	5	2	
Mod		5	4	1	
S		1	2		
L					

Likelihood (Probability)

Corporate Services

No. of Risks 37 – 3 High Risks (8%)

Impact (Severity)	VU	U	P	L	VH
C					
Ma	1	8	4	2	
Mod		2	5	7	1
S		4	2		1
L					

Likelihood (Probability)

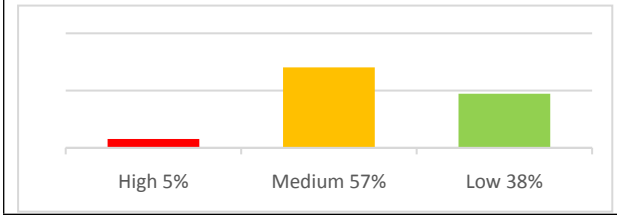
Place

No. of Risks 146 - 4 High Risks (3%)

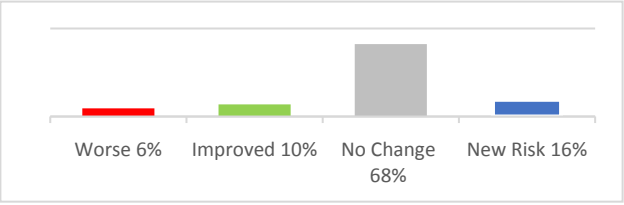
Impact (Severity)	VU	U	P	L	VH
C		1			
Ma	1	26	18	4	
Mod		34	30	6	
S		19	7		
L					

Likelihood (Probability)

Risks - Current Status



Risks - Direction of Travel



Adults and Housing

HIGH RISKS

Adults & Housing - Adult Care

Risk 125 - Gap exists between amount of available resource and post-COVID statutory demand – Accountable Officer - Head of Commissioning /Corporate Director for Adults
(Impact 4 Likelihood 4)

Housing

Risk 247 - Temporary Accommodation is insufficient to meet community need - Accountable Officer - Service Manager for Housing Solutions
(Impact 4 Likelihood 4)

Risk 180 – Increased Homeless Population – Accountable Officer – Corporate Director for Housing and Community Safety
(Impact 4 Likelihood 4)

Children's Services

HIGH RISKS

Children's Care & Protection

Risk 104 - A lack of sufficiency and resilience (placements/residential/foster care) impacts negatively on the demands led budget for children in care – Accountable Officer - Assistant Director for Care & Protection
(Impact 4 Likelihood 4)

Schools & Learning

Risk 272 - Failure to stabilise the budget for the High Needs Block - Accountable Officer - Corporate Director for Schools & Learning
(Impact 4 Likelihood 4)

Corporate Services

HIGH RISKS

Assurance

Risk 59 - Inability to respond to the impacts of concurrent events - Accountable Officer - Service Manager for Assurance
(Impact 4 Likelihood 4)

Risk 212 - Inadequate information governance culture and framework and culture (policy; training; monitoring etc) results in a significant data breach - Accountable Officer - Service Manager for Assurance
(Impact 4 Likelihood 4)

Risk 321 - Unable to sustain Assurance service due to prolonged pressures (increasing caseloads; pandemic etc) - Accountable Officer - Service Manager for Assurance
(Impact 3 Likelihood 5)

Place

HIGH RISKS	ASSETS & PROPERTY Engineering & Special Projects **Risk 201 - Climate change effects on sea level rise and uncertainty could lead to low lying areas such as Weymouth being uneconomic to defend** – Accountable Officer - Service Manager for Engineering & Special Projects (Impact 4 Likelihood 4) Economy Infrastructure and Growth – HIGHWAYS Infrastructure & Assets **Risk 84 - Failure to deliver a safe and suitable alternative to the current arrangements for Wareham Level Crossing** - Accountable Officer - Service Manager for Infrastructure & Assets (Impact 4 Likelihood 4) Commercial Waste & Strategy **Risk 208 - Gaining sites and planning to provide infrastructure leads to failure to deliver service** – Accountable Officer - Head of Commercial Waste and Strategy (Impact 4 Likelihood 4) Fleet Maintenance **Risk 83 - PUWER Regulations - non-compliance of PUWER Regulations** (H&S Provision and Use of Work Equipment Regulations 1998) – Accountable Officer - Head of Waste Operations (Impact 4 Likelihood 4)

Risk Management Exception Report

HIGH RISK

Adults and Housing Services Directorate

June 2021

Adults & Housing - Adult Care

Risk 125 - Gap exists between amount of available resource and post-COVID statutory demand						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Head of Commissioning /Corporate Director for Adults	Improved	17 June 2021	HIGH			
			Impact	4	Likelihood	4
Update - This remains a significant risk. Operational and commissioning action is being taken to mitigate and reduce the financial risk. This is being overseen by a new Savings and Transformation Board which is jointly chaired by Corporate Directors. In addition, Cabinet is considering a request to approve a new Dorset Care Framework in June which when implemented will help shape the market costs. Conversations with the CCG are also taking place as we review and right size funding arrangements for a selection of packages and placements and finally, we are reviewing hospital discharge arrangements. We are working closely with Finance and Procurement colleagues on this matter.						

Housing

Risk 247 - Temporary Accommodation is insufficient to meet community need						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Service Manager for Housing Solutions	Improved	28 May 2021	HIGH			
			Impact	4	Likelihood	4
Update - The Covid-19 pandemic has seen the Council's dependence on B&B accommodation for homeless households increase by over 50%. As at May 2021 the number of households in temporary accommodation including B & B was 307 of these 86 were in B & B. As at 7 August 2020 the Council had 349 households in temporary accommodation of which 139 households were in B&B accommodation. During the pandemic the number of families with children in B & B for over 6 weeks reduced to 1 but is now at 3 and expected to rise with the lifting of the eviction ban. We continue to prioritise these households. Work continues the Next Steps Accommodation Programme (NSAP) 14 new properties have been purchased and we have supported a local housing association to bid for funds that purchased 3 additional properties with support. MHCLG announced a second phase of funding – Rough Sleeping Accommodation Programme (RSAP). We have submitted a bid and anticipate the results during June 2021. Funding will be used to continue the provision of additional accommodation and support for this cohort. Despite the challenges faced by developers to complete new affordable homes our target of 300 was surpassed with 301 new affordable becoming homes available in 20/21. Work will start in 21/22 to develop a new Dorset Council Housing Strategy to drive incremental improvements in access and provision of suitable housing for our residents. There is a direct cost to the Council for every household placed in B&B accommodation in housing benefit top up. Additional temporary accommodation takes the pressure off B&B placements and results in a cost avoidance.						

Risk 180 - Increased homeless population						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Corporate Director for Housing and Community Safety	Worse	28 May 2021	HIGH			
			Impact	4	Likelihood	4
Update - Risk of homelessness increasing due to the release of the ban on landlords taking possession proceedings to Court (eviction), income loss due to rises in unemployment and income loss due to the £20 Universal Credit top up being removed. Protections have been in place during the lockdown period, since March 2020, to prevent eviction and to top up income shortfalls through furlough or Universal Credit. New approaches are returning to pre-pandemic levels however, the lifting of the eviction ban and gradual easing of notice periods over the next few months is expected to contribute to an increase in the levels of households approaching the service. Advice and guidance available within the community and via website. Support to complete residency available at Citizens Advice Bureau and Race Equality group. Should additional people then become homeless they are not eligible for service and this should be considered as part of wider community strategy in partnership with all community and voluntary agencies. Clear engagement work required with relevant agencies to support this cohort. Advice and guidance available within the community and via website. Support to complete residency available at CAB and Race Equality group. Should additional people then become homeless they are not eligible for service and this should be considered as part of wider community strategy in partnership with all community and voluntary agencies. Clear engagement work required with relevant agencies to support this cohort.						

Risk Management Exception Report

HIGH RISK

Children's Services Directorate

June 2021

Children's Care & Protection

Risk 104 - A lack of sufficiency and resilience (placements/residential/foster care) impacts negatively on the demands led budget for children in care						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Assistant Director for Care & Protection	No Change	7 June 2021	HIGH			
			Impact	4	Likelihood	4
Update - Response: Ensuring sufficient local placements for our children in care, closer to their families and communities, is a priority within our Strengthening Services for Children and Families Plan. We are continuing focused initiatives during Summer and Autumn 2021 to further enhance our campaigns to promote Foster Care in Dorset, this has included social media and radio campaigns. We have an active group of Foster Carers and a recently formed Foster Carers association who are continually helping us to shape our services and support. We are also continuing to deliver our Looked After Children Reduction Strategy. This strategy explicitly states our commitment to reducing the number of children in our care. Current Controls - Early help strategy; Commissioning strategy for placements; performance management; prevention is a priority within the Children Families & Young Peoples plan ensuring partner engagement; budgetary controls, monthly tracking and performance meetings and continued progress through the Strengthening Services plan.						

Schools & Learning

Risk 272 - Failure to stabilise the budget for the High Needs Block						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Corporate Director for Schools & Learning	No Change	7 June 2021	HIGH			
			Impact	4	Likelihood	4
Update - Response: Failure to stabilise the pressures in the HNB budget will result in a further increase in the deficit in the DSG. Legally this deficit sits with the DSG and is not part of the LAs budget, however, this does not absolve the LA of working with all schools to support actions to create an inclusive culture of support for pupils with additional and special educational needs in all Dorset schools. Work is being undertaken to move to early intervention and support for families across Dorset; to identify pupil needs earlier so that remedial support can be put in place quickly and thus try to stop expensive support later; to create specialist support in all schools and highly specialist support in local schools to reduce the need for pupils to be placed in the independent sector.						

Risk Management Exception Report

HIGH RISK

Corporate Services Directorate

June 2021

Assurance

Risk 59 - Inability to respond to the impacts of concurrent events						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Service Manager for Assurance	No Change	April 2021	HIGH			
			Impact	4	Likelihood	4

Update - A contingency group was established during the Covid-19 outbreak at Local Resilience Forum level which looked at response to concurrent events. Throughout the duration of the Covid response, the team have been dealing with concurrent events. The dedicated Covid Silver role has been stepped down, in line with the LRF standing down the Major Incident declaration in April 21 but would be reinstated in the event of a significant surge.

The Council has played an active role in the LRF Concurrent Risks Groups (Strategic and Tactical) and onwards into recovery. There has however been a significant impact on responding officers, including a build-up of leave and hours. Emergency Planning team will consider whether additional resilience can be built into the team.

Command and Control structure (Gold and Silver; Duty EP; LALO) - Multi agency wok via Local Resilience Forum - DC Incident Management Team - Portfolio of emergency plans - Safety Advisory Groups - Work of the LRF Contingency Group (Covid-19)

Risk 212 - Inadequate information governance culture and framework and culture (policy; training; monitoring etc) results in a significant data breach						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Service Manager for Assurance	No Change	April 2021	HIGH			
			Impact	4	Likelihood	4

Update - The Shaping Dorset Council programme included a workstream on information governance to ensure that key policies and processes were harmonised, which has transformed into an Information Governance working group since 1 April, chaired by the Senior Information Risk Officer. The Information Compliance team are formulating an action plan, which will be owned by the board.

A new data protection training module is available and will be a mandatory requirement for all staff. Compliance is monitored by SLT.

The Council is currently recording “red” performance for meeting Subject Access Request timescales.

Work is underway with Children’s Services to identify how this position can be improved. Capacity in the information compliance team has been challenging, with team resources focussed on "firefighting" Freedom of Information; Subject Access Requests and Data Breaches, leaving limited time to move forward strategic information governance improvements. Portfolio of information governance policies - GDPR training - Information Governance Group - Information Governance Action Plan.

Risk 321 - Unable to sustain Assurance service due to prolonged pressures (increasing caseloads; pandemic etc)						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Service Manager for Assurance	Worse	June 2021	HIGH			
			Impact	3	Likelihood	5

Update - There are significant pressures across all parts of the Assurance Service. Emergency Planning Team have been focussed on the ongoing Covid response; complaints team have seen a doubling of cases and there are also significant pressures on an already under pressure information compliance team. A business case is being developed to resource those areas more effectively where caseloads are excessively high. Annual leave and wellbeing more generally are being monitored across the service.

Controls - 1 to 1s / My Roadmap; Team meetings and Workstream allocation.

Risk Management Exception Report

HIGH RISK

Place Directorate

June 2021

ASSETS & PROPERTY

Engineering & Special Projects

Risk 201 - Climate change effects on sea level rise and uncertainty could lead to low lying areas such as Weymouth being uneconomic to defend						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Service Manager for Engineering & Special Projects	No Change		HIGH			
			Impact	4	Likelihood	4
Update - Latest inter-governmental guidance is used when designing coast defences, design life of 50 years. Shoreline Management plan review – agree to use managed realignment of coastline in areas. May have to design coastal defences for 100 years life and accept increased costs of doing so. May have to relocate coastal communities. Work with, not against, nature. Further bids to Defra and others to increase funding above EA thresholds for erosion management and flood defence works. EA grant calculator update expected spring 2020, potential for increased funding to protect infrastructure and economic activity. Funding currently mainly based on numbers of homes protected Use latest inter-governmental guidance when designing coast defences, design life of 50 years. Shoreline Management plan review						

Economy Infrastructure and Growth – HIGHWAYS

Infrastructure & Assets

Risk 84 - Failure to deliver a safe and suitable alternative to the current arrangements for Wareham Level Crossing						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Service Manager for Infrastructure & Assets	No Change		HIGH			
			Impact	4	Likelihood	4
Update - Dorset Council assumed responsibility from Dorset County Council (DCC) to manage the pedestrian level crossing in Wareham. The lease agreement between Network Rail and Dorset Council for the level crossing runs until 2038; this crossing will close in 2038 as per the terms of the lease. If no suitable alternative is delivered before 2038 Dorset Council would be found to be breaching Equalities legislation. In 2008/9 The Office for Road and Rail (ORR) raised safety concerns with the pedestrian level crossing in Wareham. The ORR stated that mitigating measures had to be put in place or they would force the closure of the crossing. As a result, DCC paid for the provision of security guards at the crossing to improve compliance and safety at the crossing. In more recent years, following an additional review by the ORR the crossing has been managed with electronic gates closed by security guards when a train is approaching. The crossing is currently managed between 6am and 1am (19hours) seven days a week. The provision of security staff is provided by third party contractors STM Security Ltd. The crossing is locked closed between 1am and 6am each day. Network Rail and the Council have tried twice before to resolve this by proposing ramped bridges adjacent to the existing footbridge but failed to obtain planning permission from the then Purbeck District Council owing to local objections. The crossing continues to be a financial commitment with ongoing reputational concerns as there is no suitable alternative means for all to cross the rail lines if the crossing is closed – there is a stepped footbridge adjacent to the crossing. A parallel footway/cycleway along the A351 is being explored in the area to address an existing network deficiency. There remains commitment from Dorset Council and Network Rail to finding a resolution. Commitment from central government appeared more likely following a visit by the Minister for Rail to the site and meeting with key stakeholders on 23 January 2020. The Minister for Rail stated that he was committed to finding a solution and that safety and accessibility were of paramount importance which would likely mean that a degree of compromise is required when considering suitable alternatives. Network Rail have agreed to explore and exhaust all possible technological options for providing an automated level crossing, however, it is more likely that an alternative step free route over the rail lines will be the most viable solution. Feb 2021 - No definitive permanent plans are proposed, or funding secured for a suitable alternative. Procurement of level crossing security contract is being progressed to make revenue savings for council to continue to deliver service. This has been an ongoing issue for 25 years. Network Rail have tried twice before to resolve this but failed due to planning issues; Currently costing the authority £120,000 per year for security guards (with costs rising); Introduce ramps, with crossing fenced off, and removal of security guards; Continued lobbying and negotiations with Network Rail; Implement main recommendation of ramped solution; Open public meeting held in the evening chaired by MP. Ramp proposal met with overwhelmingly hostile local reaction; Working to modify Network Rail asset, the existing bridge, has trigged more demanding NR assurance requirements; Introduction of ramps (main recommendation) failed to get planning permission; Access for All funding bid by South West Railways and Network Rail for DfT funding to install lifts failed; The crossing continues to be a high risk for safety, continuing financial commitment and reputational damage. Risk being realised with recent crossing incidents, lack of attendants and crossing closure. Cause: Failure to get planning agreement; Failure to get agreement on funding; Lack of Member/Cabinet support; Opposition from Town Trust - Consequence: Closure of crossing by Office of Road & Rail; Legal action against DC; Death; Serious injury; Reputational damage; Financial impact - either due to incidents or ongoing maintenance/management; Negative publicity; Customer dissatisfaction; Public liability claims.						

Place Based Services – COMMERCIAL WASTE & STRATEGY

Commercial Waste & Strategy

Risk 208 - Gaining sites and planning to provide infrastructure leads to failure to deliver service.						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Head of Commercial Waste and Strategy	No Change	2 June 2021	HIGH			
			Impact	4	Likelihood	4
Update - Currently commissioned planning to conduct a site search for a new HRC in the East of the County. Planning Application submitted for a replacement HRC and waste transfer station in Blandford. Involved in the recent property review of depots across Dorset. Waste infrastructure review has been completed to provide a baseline of requirements. Working with waste planning authority to identify and safeguard sites to meet our needs through the Waste Local Plan. Working with neighbouring authorities for continued use of facilities. Robust business cases for any change in infrastructure.						

Place Based Services – WASTE & OPERATIONS

Fleet Maintenance

Risk 83 - PUWER Regulations - non-compliance of PUWER Regulations (H&S Provision and Use of Work Equipment Regulations 1998)						
Accountable Officer	Direction of Travel	Last Reviewed	Risk Rating			
Head of Waste Operations	Worse		HIGH			
			Impact	4	Likelihood	4
Update - There is a clear visual view to identify if individual plant items comply with the control measures. Each depot has a tagging colour scheme poster available to all operators. The system is simple and effective. Fleet will continue to monitor and audit the process to ensure compliance is consistent and maintained, with support from H&S; Countryside service is to start the first round of PUWER checks in February using the new process; Highways have completed the first round of 6 monthly checks in October and no items are outstanding; Highways compliance is excellent and is totally compliant. Countryside are struggling currently, but Fleet are aware of additional resources to catch up with the situation. Admin resources have been trained to implement the documents that are currently sat on desks. Fleet wave is showing 299 records from the Countryside service awaiting completed PUWER inspection sheets. Emails sent out explaining the current risk to the authority; Countryside and grounds are increasing the number of staff to carry out PUWER checks. Fleet Service to instruct on the practical checks and supply training on the Fleet Wave system to the nominated staff; The risk has changed to red due to the current situation. Audit of the system has resulted in 381 items of Countryside plant waiting for a PUWER sheet and the Fleet wave system to be updated. 80 items for Highways also in the same situation. The system was 95% compliant, but due to the current situation this has greatly reduced to 55% compliant. Update - the outstanding PUWER inspections have been completed from the previous scheduled programme. The next programmed 6-monthly PUWER inspections are currently in operation and will report on outstanding items not actioned next month. Cause: Failure to follow inspection schedule; Users using items out of schedule inspection date; No precise inventory of items available - Consequence: Reputational damage; Financial penalties; Increased visits from H&S Executive; Serious injury; Legal actions taken against DCC; Negative publicity; Negative impact on staff morale. Current Controls: Use Fleet wave system to record information; PUWER checks carried out by trained members of staff close to the location of the items; Network of external maintenance providers supporting Fleet Services; Any plant not fitted with current in-date PUWER label will be removed by the H&S team; 5 year schedule for recorded items of plant, with notifications sent to manager/site agent and the person identified to carry out the inspection; Precise inventory of items available - always updating, with managers to ensure staff supply the required information; Automated email informing manager of scheduled PUWER inspection now operating; Storeman in highways has been assessed to carry out PUWER inspections, with access given to Fleet wave and training to enable them to update PUWER data at source; Completed PUWER sheets scanned into Fleet wave attached to relevant job card, removing requirement to hold a paper copy; New plant items are being added to the system by all service reflecting that the system is working as expected.						

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Audit and Governance Committee
9 July 2021
Fraud and Whistleblowing

For Review and Consultation

Portfolio Holder: Cllr S Flower, Leader of the Council

Executive Director: J Mair, Corporate Director, Legal & Democratic

Report Author: Marc Eyre
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Email: marc.eyre@dorsetcouncil.gov.uk

Report Status: Public

Recommendation: The Committee is asked to:

- Note the recent findings from a South West Audit Partnership audit of the Council's fraud arrangements and support the improvement action plan;
- To receive the annual update on fraud and whistleblowing activity; and
- Approve a proposal that the Chair performs the role of member fraud champion.

Reason for Recommendation: To support the Council's zero tolerance to fraud.

1. Executive Summary

At the July 2020 Audit and Governance Committee it was agreed that an annual report of fraud and whistleblowing would be presented in future years. This provides an update on the Councils approach to fraud management and whistleblowing, including a summary of cases reported in the preceding twelve months.

South West Audit Partnership completed an audit on "Fraud and Reporting" in April 2021, with the objective of providing assurance that the fraud management

arrangements are clear and accessible. This include a follow-up on a 2018 review of whistleblowing.

The outcomes from the audit have been added to the existing Anti Fraud, Bribery and Corruption Action Plan which can be found at Appendix A of this report, with a clear delivery timetable. This includes details of the progress made since reporting to the Committee in September 2020.

SWAP completed a second piece of fraud reporting in May 2021,a cross-cutting baseline assessment report on the maturity of fraud management. In the majority of areas assessed against peers the authority has clearly initiated work in the key areas, but conflicting priorities on the Covid response mean that many of these arrangements are not yet fully operational. A further report on progress is proposed for the latter part of 2021. The outcomes demonstrate that our commitment to a zero tolerance of fraud is clear, but further work is necessary to embed arrangements.

2. Financial Implications

Fraud presents a financial risk to the Council which needs to be managed to reduce risk down to an acceptable level.

3. Well-being and Health Implications

None

4. Climate implications

None

5. Other Implications

None

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: Medium
Residual Risk: Medium

7. Equalities Impact Assessment

Fraud policies have been subject to EQIA.

8. Appendices

Appendix A - Anti Fraud, Bribery and Corruption Action Plan

9. Background Papers

Footnote:
Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.

Fraud and Whistleblowing

1. Background

1.1 A number of fraud related policies were established and approved for Dorset Council ahead of 1st April 2019:

- Anti Fraud, Bribery and Corruption Policy;
- Anti Money Laundering Policy;
- Whistleblowing Policy

There are also clear links with Code of Conduct policies.

1.2 The following definition of Fraud has been drafted:

"What is fraud? It can be defined as any intentional false representation, including a failure to declare information or abuse of position that is carried out to make a gain, cause loss or expose another to the risk of loss.

Fraud can be used to describe many acts such as:

Deception	*Causing someone to accept as true or valid what is false or invalid*
Bribery	*Offering someone money or something valuable in order to persuade them to do something for you*
Forgery	*Copying a document, signature etc in order to deceive*
Extortion	*Using violence, threats, intimidation, or pressure from one's authority to force someone to hand over money or something valuable*

Corruption	*Offering, giving or accepting an inducement or reward which would influence the actions taken*
Conspiracy	*A plan or agreement formulated by two or more persons to commit an unlawful, harmful, or treacherous act*
Embezzlement	*Theft or misappropriation of funds placed in one's trust or belonging to one's employer*
Misappropriation	*The wrongful, fraudulent or corrupt use of other's funds in one's care*
False representation	*An untrue or incorrect representation regarding a material fact that is made with knowledge or belief of its inaccuracy*
Concealment of material facts	*The act of hiding or not putting forward any relevant fact that should to be revealed*
Collusion	*The act of doing something secret or illegal with another person, company, etc. in order to deceive people*

2. **South West Audit Partnership Findings**

2.1 South West Audit Partnership carried out an internal audit on "fraud and reporting" which was completed in April 2021, including a follow up on outstanding issues from a 2018 "whistleblowing" report. The following key findings were identified, and have been embedded within the action plan at Appendix A:

2.2 **Finding One (Priority 2) –** The action plan developed in response to the 2018 whistleblowing report has not yet been completed. *Post audit update – the majority of 2018 actions are now complete. The action plan has been updated to reflect the 2021 audit.*

2.3 **Finding Two (Priority 2) -** Officers and Members have not received Fraud Awareness Training. *Post audit update – Added to the action plan. A draft training package is in development, with a target date of 31st August 2021.*

2.4 **Finding Three (Priority 3) –** There is no formal process to support the fraud hotline. *Post audit update – This action has been completed.*

2.5 **Finding Four (Priority 2) –** A central fraud register should be developed, with regular KPI reporting to SLT and Committee. *Post audit update – Partially complete. The database is operative and a whistleblowing KPI is reported. A wider fraud KPI will be developed, but further work is necessary to achieve a more holistic view of organisational fraud.*

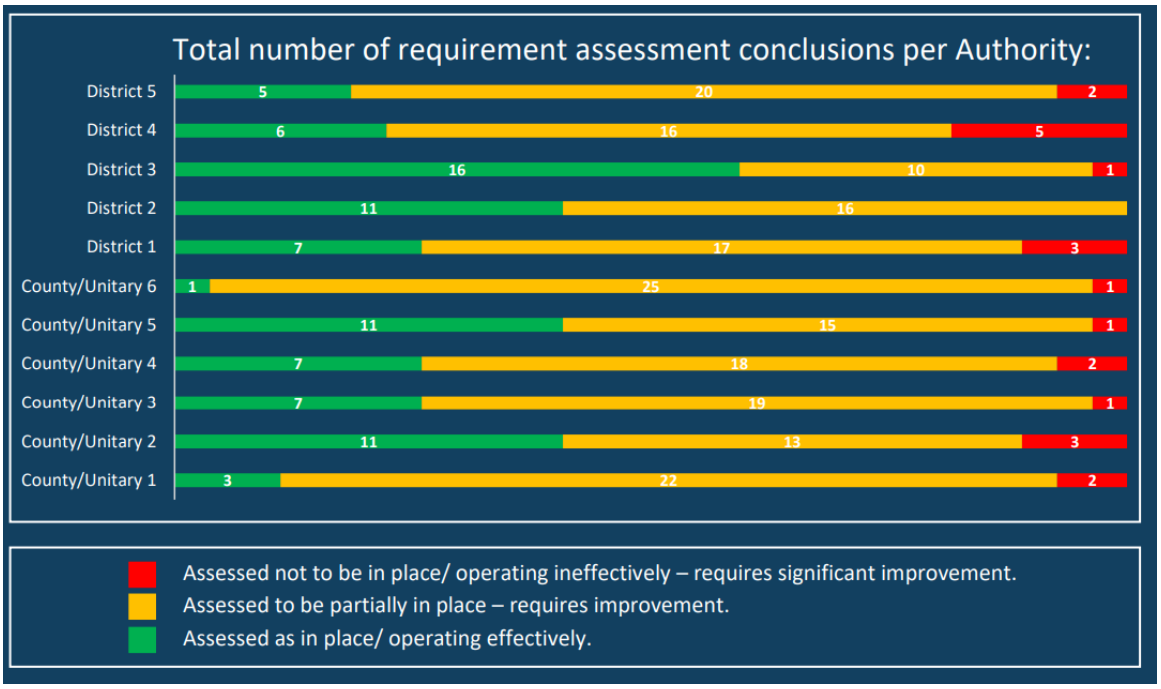
2.6 **Finding Five (Priority 2) –** Visibility of fraud related policies and guidance needs to be improved internally and externally. *Post audit update – Partially complete. Internal communication improved but greater visibility required on the external website.*

2.7 **Finding Six (Priority 3) –** There is currently no designated member champion form for fraud. *Post audit update – Proposal that the Chair of Audit and Governance Committee fulfils this role, as per recommendation set out in this report*

2.8 One of the benefits of our internal audit arrangements with SWAP is that they can provide a cross-authority comparison on significant risks and issues. In May 2021 SWAP completed a cross-cutting baseline assessment report on the maturity of fraud management, comparing authorities across a number of themes:

i) Resource and co-ordination;
ii) Risk management;
iii) Policy related;
iv) Committee roles;
v) Culture and awareness;
vi) Reporting, investigation and monitoring

The summary of output can be seen below, with Dorset Council shown as "County/Unitary Council 6":



This highlights that whilst we have the majority of areas either addressed partially or underway, the arrangements are not currently determined as fully operating effectively in all bar one category. Capacity issues within an Assurance Service responding to Covid has hindered progress, but there will be a concerted authority focus on fraud scheduled for September 2021. The response to this really helpful benchmarking work will be presented to committee later in the year. The improvements required to our fraud and whistleblowing arrangements have been recognised in our Annual Governance Statement.

3. **Reporting of Whistleblowing and Fraud – 2020/21**

3.1 Whilst any issues reported via the Whistleblowing hotline or directly to either the Monitoring Officer or Section 151 Officer will be recorded centrally, other issues that could constitute fraudulent activity (for instance those related to staff code of conduct) are investigated and reported separately via Human Resources. At this point in time, this report focuses on issues reported to the Monitoring Officer or Section 151 Officer.

3.2 The purpose of the whistleblowing policy extends beyond fraud to other perceived cases of malpractice, whether behavioural, procedural or in respect of health and safety failings.

3.3 The whistleblowing policy sets out a number of mechanisms for notification of fraud or other perceived malpractice. The table below sets out whistleblowing activity during 2020/221:

Whistleblowing hotline	No notifications received
Notification to Manager / Executive Director / Chief Executive	One notification received, but managed via HR processes
Notification to the Monitoring Officer	One notification received relating to safeguarding concerns. These were partially upheld.
Notification to the Section 151 Officer	No notifications received
Notification to SWAP	No notifications received

Appendix A – Anti Fraud, Corruption and Bribery Action Plan

Theme	Action	Source	By Whom	By When	Progress Since September 2020
Policy framework	Define scope of what constitutes Fraud	2018 SWAP Report	Service Manager for Assurance	Complete	
	Formalise Joint Working Fraud Protocol with SWAP	Fraud working group	Service Manager for Assurance / SLT	Oct-21	Document drafted by SWAP. The principle of this needs to be agreed with Monitoring Officer / SLT
	Develop fraud risk assessment to prioritise focus across services (linked to training needs analysis)	2018 SWAP Report	Service Manager for Assurance / Risk & Resilience Officer / South West Audit Partnership	Jan-22	Risk and Resilience Officer has produced a draft document 'Fraud Risk for Managers' which sets the scene and provides applicable fraud risk areas as action cards with a risk status, risks, causes and key controls. SWAP have been undertaking fraud risk assessment work regionally and this will be looked at further early 2022.
	New action – Review and update fraud and linked policies:	Fraud working group	Service Manager for Assurance	Sep-21	

Theme	Action	Source	By Whom	By When	Progress Since September 2020
	New action – Establish a "member champion" for Fraud	2021 SWAP Report (Priority 3)	Corporate Director for Legal & Democratic Services	July-21	July Audit and Governance Report proposes that the Chair of the committee is named as fraud champion
Communication and accessibility	Internal promotion campaign on fraud awareness, including access to policy framework via "How Do I" section on the Intranet	2018 SWAP Report 2021 SWAP Report (Priority 2)	Service Manager for Assurance	Complete	Comms article issued, signposting to policy framework. Central intranet page developed, signposting to policies Chief Executive email May 21 included a reminder on whistleblowing arrangements
	Improve accessibility of policy framework from external website	2018 SWAP Report 2021 SWAP Report (Priority 2)	Service Manager for Assurance / Digital Team	May-21 (Overdue)	AS policies are stored within ModGov they are available to the public but are not accessible from searches. Separate page to be developed with hyperlinks
	Ensure that proven cases of fraud are considered for publication / promotion	2018 SWAP Report	Service Manager for Assurance / Comms Team	Complete/ Ongoing	To be considered on a case by case basis

Theme	Action	Source	By Whom	By When	Progress Since September 2020
	Fraud awareness training to be developed for officers and members, to include awareness of whistleblowing	2021 SWAP Report (Priority 2)	Service Manager for Assurance / Risk and Resilience Officer	Aug-21	First draft prepared, for review
Training	Identify areas of potential fraud that may be reported and managed through other management mechanisms (for instance, code of conduct). Ensure that this reporting is centralised with appropriate reporting to Monitoring Officer and SWAP	Fraud working group	Service Manager for Assurance / Task & Finish Group	Sep-20 Overdue (on hold pending Covid response)	To be reviewed further by Task and Finish Group. Copies of documents from other LAs obtained for reference.
Reporting and escalation	Develop mechanism for consolidation of fraud reporting, including Annual Fraud report	2018 SWAP Report	Service Manager for Assurance	Part complete	A whistleblowing KPI is reviewed by SLT. A wider fraud KPI to be developed once a more holistic view of fraud is achieved
	New action - Develop formal process for the fraud hotline	2021 SWAP Report (Priority 3)	Service Manager for Assurance	Complete	Process has been developed. Additional resilience added to ensure that the calls are picked up in the absence of the Service Manager
	New action - Develop central fraud database, with access by Monitoring Officer and Section 151 Officer	2021 SWAP Report (Priority 2)	Service Manager for Assurance	Complete	Database created and operative.
Fraud Identification	Initiate the Cfas data matching arrangements	SWAP review meeting	Service Manager for Assurance	Complete	DC now a member of Cfas

Audit and Governance Committee
9 July 2021
Corporate Complaints

For Decision

Portfolio Holder: Cllr S Flower, Leader of the Council

Executive Director: J Mair, Corporate Director, Legal & Democratic

Report Author: Marc Eyre
Title: Service Manager for Assurance
Tel: 01305 224358
Email: marc.eyre@dorsetcouncil.gov.uk

Report Author: Tony Bygrave
Title: Service Assurance Officer - Complaints
Tel: 01305 225011
Email: antony.bygrave@dorsetcouncil.gov.uk

Report Status: Public

Recommendation: That the Committee:

- Approve the revised Whole Authority Complaints Policy (Appendix A) to change to a single stage process for non-statutory complaints;
- Note the revised arrangements for managing unreasonable behaviours (Appendix B)

Reason for Recommendation: Improve the complaint management process.

1. Executive Summary

Dorset Council currently operates a two stage process for handling of non-statutory complaints (i.e. non-social care). It has become evident that the second stage adds both an additional burden on staff time and a perception of increased bureaucracy before complainants can seek the independent eye of the LGSCO. It

is proposed therefore to remove this second stage, within a revised complaints policy.

The report also presents a revised “unreasonable behaviours” protocol, to provide a clear, consistent and fair approach to managing vexatious, aggressive and potential violent contact against employees, elected members and volunteers.

2. Financial Implications

There is a potential increased financial risk as more complaints could escalate to the Ombudsman without a review stage, but this risk is perceived to be low.

3. Well-being and Health Implications

High caseloads have a significant impact on both staff in the complaints team and more widely for officers across the Council. Whilst the change to a single stage process will not significantly reduce caseloads, it will cut out some pressure. However, the changes made to the unreasonable behaviours process are anticipated to provide a more holistic view, and management centrally is likely to increase pressure on the corporate team.

4. Climate implications

None.

5. Other Implications

None.

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: Medium
Residual Risk: Medium

7. Equalities Impact Assessment

The complaints policy was subject to EQIA.

8. Appendices

Appendix A – Proposed Revised Whole Authority Complaints Policy
Appendix B – Unreasonable Behaviours Protocol

9. Background Papers

Cabinet – 28 January 2020
Existing "Whole Authority Complaints Policy"

Footnote:
Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.

Corporate Complaints

1 Proposal for Single Stage Complaints Policy (Non Statutory Complaints)

1.1 Complaints fall into two key categories –

- Those that relate to social care, and are subject to strict statutory three stage process and statutory timescales;
- Non-social care complaints that are subject to response timescales set by the authority. Whilst non-statutory, the complainant retains the right of escalation to the LGSCO in the event that timescales are not adhered to and complaint outcomes are unsatisfactory.

1.2 Dorset Council currently operates a two stage process for handling of non-statutory complaints (i.e. non-social care). Predecessor Councils operated a range of stages in the process (varying from a single stage to three stage process). During the Shaping Dorset discussions a compromise was reached whereby the complaint was initially assessed by officers (stage one) and then the option for the complaint to be escalated to a more senior manager for review should the decision be challenged. If the complainant remains unsatisfied they can pursue their complaint via the Local Government and Social Care Ombudsman (LGSCO).

1.3 Dorset Council has been operating its Complaints policy for just over two years, and it has become evident that the second stage adds both an additional burden on staff time and a perception of increased bureaucracy before complainants can seek the independent eye of the LGSCO.

1.4 Whilst the complaints process was intended to be a single stage process with an ‘option’ for review, this is interpreted by the LGSCO as a two-stage process. The LGSCO will therefore refer complaints back to us for review regardless of whether the complainant has requested one, as it is not deemed that we have fully exhausted our process.

1.5 The review period provides an additional challenge in our increasing efforts to manage unreasonable behaviours to a final position (whilst few complainants come under this category, they account for a significant amount of handling time in both the complaints team and service areas).

1.6 A single stage process provides an opportunity to move complaints to a resolution more swiftly without undue process (which generally consists of the senior manager reiterating the original response, placing an additional strain on senior officer time).

1.7 The risk to moving to a single stage process is that of the LGSCO finding against the Council, with the resultant reputational and financial consequences. This is however perceived to be a low level risk, as every effort is made to resolve complaints informally and the complaints team work alongside the services to ensure that complaint responses are fit for purpose. It is therefore our considered view that the benefits of moving to a single stage process outweigh this risk. The LGSCO also give the council chance to comment as part of their investigations and will essentially provide a ‘review’ opportunity if something has gone wrong. The financial implications are also minimal when considered against the time and resources of senior managers duplicating investigations into complaints that have already had a robust response.

1.8 The proposal to move to a single stage complaints process for non-statutory complaints was approved in principle by Corporate Management Team on 23 March 2021 and is presented to committee for ratification.

2 Management of Unreasonable Behaviours

2.1 There has been a marked increase in contact by complainants managed under the “unreasonable complainants” policy (i.e. those deemed vexatious and/or present a potential risk). This has put pressure on both the corporate complaints team, service areas and councillors.

2.2 The existing “unreasonable complainants” policy restricts application to those that have made a complaint. However, unreasonable behaviour can be displayed more generally by customers (appreciating that this remains a very small proportion of residents) and in such cases the contact needs to be managed to both protect staff, councillors and volunteers and the time associated with such contact. Possibly linked to the difficulties of the last

twelve months and covid restrictions, there has been a definite increase in contact from those that display unreasonable behaviours, which puts further pressure on resources but also can have a negative impact on wellbeing.

2.3 Cabinet approved the development of a wider “unreasonable behaviours” protocol on 28 January 2020, and responsibility for finalising this was delegated to the Corporate Director for Legal and Democratic in consultation with the Leader. Pressures within the Assurance Service during 2020 (most notably on the emergency planning function and the increasing complaint workload) meant that the revision to the arrangements have taken longer than would have been hoped. However, the revised protocol as set out in Appendix B has been developed in conjunction with both health and safety and customer services colleagues, and approved by Corporate Leadership Team on 12 March 2021. It is now ready for roll-out and promotion.

2.4 A small panel of staff will determine whether it is appropriate to apply the protocol and allocate a single point of contact. The information will be held in a secure database, as per current arrangements for unreasonable complainants, but available on a need to know basis. Each unreasonable behaviour record will be reviewed after 12 months by the panel.

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Ref. No.	CO/CO/1
Category:	
People	
Place	
Corporate	Yes
In Constitution	

Dorset Council Complaints Policy

Policy Details

What is this policy for?	We want to ensure that all customers are satisfied with our services. Where this is not the case, this policy details how Dorset Council will manage any complaints made.
Who does this policy affect?	All staff, and all customers who make a complaint about council services.
Keywords	Complaint, Feedback, Ombudsman, Local Government & Social Care Ombudsman (LGSCO)
Author	Tony Bygrave Senior Assurance Officer
Dorset Council policy adopted from	Dorset Council. This policy applies across the Dorset Council area.
Does this policy relate to any laws?	This does not include Social Care Complaints which are covered by a separate policy and process and governed by statutory requirements
Is this policy linked to any other Dorset Council policies?	Dorset Council Unreasonable Complainants Policy
Equality Impact Assessment (EqIA)	An EqIA has been completed
Other Impact Assessments	None.

Status and Approvals

Status	Live	Version	Version 2.0
Last review date	June 21	Next review date	June 24
Approved by (Director)	Corporate Theme Board, Shaping Dorset Council	Date approved	
Member/ Partnership Board Approval	Not required	Date approved	

Complaints

Dorset Council Whole Authority Complaints Policy / Procedure

Statement of intent: We want to ensure that you are satisfied with our services. We have a policy for managing your complaints if you are not happy with our services. We will seek speedy resolutions and provide mediation between customers and staff. We will listen to and respond to feedback from customers and act to implement improvements to our service. We embrace the Local Government & Social Care Ombudsman (LGSCO)'s principles for effective complaint handling:

- Accessibility – the policy is well publicised, easily accessed and understood
- Communication – effective, timely communication between all parties
- Timeliness – it takes no longer than 12 weeks from receipt to resolution
- Fairness – dealt with in a proportionate, open-minded and impartial way
- Credibility – effective leadership to ensure complaints and learning has a high profile
- Accountability – managed in a proper and open way

We will always try to resolve things that go wrong quickly, and to give customers the best possible outcome. We aim to achieve this on an informal basis. So, as a first step, the customers should talk to staff at the point of service delivery to try to reach an informal agreement. We can also try to resolve any concerns informally but, failing this, we can provide advice on how to make a formal complaint. We will seek to achieve this through the following key aims and objectives:

- Creating a culture of learning and improvement
- Providing customers lots of ways to give feedback
- Leadership in sharing lessons across the council
- Be customer focussed
- Reach the optimum resolution or outcome
- Resolve the problem quickly if possible

Scope of this policy: A complaint is when a customer of a council service is unhappy with the way they have been treated and believe that the council (including a contractor or other body providing services on behalf of the council) has done something wrong. The customer will expect the council to investigate the matter and respond to them. The customer may feel dissatisfied or that they have suffered delay or inconvenience. A complaint may be about:

- the standard of a service or information provided
- the timeliness of a service (delay, or not provided)
- the way a person has been treated (unfairly or discourteously)
- dissatisfaction with any aspect of our service

How will we deal with a complaint? Upon receipt of your complaint we will investigate the issues in order to fully understand and attempt to resolve matters where possible. If the council has done something wrong, we will apologise and try to put things right. We will also consider if, and how, we can improve things to ensure that similar problems do not happen again through proactively learning from complaints. For example, we could provide an explanation or information, review a policy or procedure, provide training and guidance for employees.

Help in making a complaint: If you should need help in making your complaint, please see www.dorsetcouncil.gov.uk or contact your local council office who will be able to advise you.

Informal local resolution – initial contact: We will try to resolve things that go wrong quickly, and to give customers the best possible outcome. We aim to achieve this without the need for a formal complaint. So, as a first step, we will talk to the customer in an attempt to reach an agreement informally and learn from any mistakes made on our part. If we believe that the matter is not a complaint, as defined by this policy, we will say so and advise the customer how best to take it forward.

Formal complaint resolution: If your concerns cannot be immediately resolved, we can register them within the complaints procedure. Complainants will be asked to provide all the relevant information about them and their complaint, so it can be dealt with. All information received by email, letter, telephone or online form will be recorded in line with our data protection policy. Within the first 3 working days of the council receiving the complaint we will send an acknowledgement to the customer. The team manager will investigate your complaint. We aim to respond to all formal complaints within 20 working days of the submission date. In some circumstances where this is not possible, after the initial 20 working day period, we will update you every 10 working days to a maximum of 60 working days.

Local Government Ombudsman (LGSCO): If things are still not right
We try to resolve most complaints internally, but if you are still unhappy you can refer your complaint to the Local Government Ombudsman (LGO), who will carry out an independent review. The LGO will not normally accept a complaint which has not been considered under the council's internal process first.

Compliments and feedback: We value our staff and it is important to us that they know when they have done a good job or exceeded expectations. Once received, they are recorded and then fed back to the relevant team member. We also like to receive feedback on our services which is helpful in making improvements and amendments as necessary. As a learning organisation we welcome all feedback.

Unreasonable complaints: We will try to resolve things that go wrong as soon as possible, and to give customers an outcome that they are satisfied with. However,

if a customer behaves in an unacceptable manner, or is unreasonably persistent, we may decide to restrict the ways that they can deal with us or refuse to consider further complaints about the same matter. For example, if a customer makes multiple complaints about the same matter, or if their complaint has been considered and found to be unjustified but they are not prepared to accept this conclusion.

In such circumstances, the council will consider evidence available including how we have responded to the complaint and if necessary, can decide that the complaints are vexatious and unduly time-consuming. We may then decide to restrict access, giving the customer a single named point of contact with the council, or refuse to consider any further complaints about the same matter, unless any significant new information is provided.

We will inform the customer about this, explaining why the decision has been taken, what restrictions will be applied, for how long, and how the complainant may appeal against such a decision in accordance with the Council's Unreasonable Behaviours Protocol.

What issues are outside the scope of this policy? We will usually consider complaints under this policy, however there are some exceptions to this policy which include:

- Complaints about adult's and children's social care services
- Claims for financial compensation and insurance claims
- A routine first-time request for a service
- Complaints about the conduct of Councillors
- Complaints about schools or academies
- Complaints where there is a statutory right of appeal such as Special Educational Needs (SEN), School Admissions, entitlement to School Transport, Council Tax, Non – Domestic Rates, Blue Badges, Housing Benefit, Planning
- Housing Benefit (including discretionary housing payment decision), housing allocations or homeless applications
- Matters subject to any arbitration process
- Staff disciplinary matters and grievances
- Legal matters or issues that have already been heard by a court/tribunal
- Police matters
- Safeguarding matters
- Freedom of Information matters
- Claims relating to inaccurate personal information
- Policy decisions made by the Council's Executive
- Penalty Charge Notices (PCN's)
- An attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision
- complaints about services that are not the responsibility of Dorset Council

Further Information
If you would like further information, please contact

Complaints Team

Dorset Council
County Hall
Dorchester
DT1 1XJ

Tel: 01305 221061
Email: complaints@dorsetcouncil.gov.uk
Webpages www.dorsetcouncil.gov.uk

Local Government & Social Care Ombudsman

Following completion of our complaints procedure, complaints may be referred to the LGSCO.

Local Government and Social Care Ombudsman
PO Box 4771
Coventry
CV4 0EH
Advice line: 0300 061 0614 or 0845 602 1983
www.lgo.org.uk/making-a-complaint

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Dorset Council Managing Unreasonable Behaviour Protocol

Ref. No.	
Category:	
People	
Place	
Corporate	Yes
In Constitution	

Protocol Details

What is this protocol for?	This document sets out the protocol for managing incidents of unreasonable behaviour, whether violent, potentially violent or vexatious.
Keywords	Complaint, Feedback, Ombudsman, Local Government & Social Care Ombudsman (LGSCO)
Author	Marc Eyre, Service Manager for Assurance - Dorset Council
Dorset Council protocol adopted from	Replaces Dorset Council policy "Policy for Managing Unreasonable and Persistent Complainants"
Does this protocol relate to any laws?	N/A
Is this protocol linked to any other Dorset Council policies?	This protocol supports a number of existing Dorset Council policies: Complaints Policy Violence at Work Policy Equality, Diversity and Inclusion Policy
Equality Impact Assessment (EqIA)	An EqIA has been completed
Other Impact Assessments	None.

Status and Approvals

Status	Live	Version	Version 1.0
Last review date	This is a new Protocol, replacing the unreasonable complainants policy	Next review date	June 2024
Approved by (Director)	CLT	Date approved	March 21
Member/ Partnership Board Approval	Not required	Date approved	

Managing Unreasonable Behaviour Protocol

1. Background

1.1 Most customers that contact the Council do so politely and respectful of Council staff. Even the most challenging customer may have a valid point that needs to be addressed. However there are exceptional circumstances where behaviour can present an issue to the wellbeing of staff or result in an excessive amount of time being spent in response. Dorset Council does not expect its staff to tolerate unreasonable behaviour from members of the public or other points of contact. The organisation has a direct duty of care to its employees and also a responsibility to any associated organisations and/or partners it works alongside.

1.2 It is therefore vital that any known risks emerging from contacts with our clients, customers and/or suppliers etc are logged and recorded and are then available to others that may have contact with that individual to protect their personal safety and/or wellbeing.

1.3 The purpose of this protocol is to set a process by which unreasonable behaviour (whether violent, potentially violent or vexatious) can be assessed, recorded and made available to employees, whilst recognising also the need to ensure that personal data is managed effectively and appropriately. Dorset Council is committed to being compassionate, responsive, sensitive to its clients, customers, residents and that we have a trained workforce to fully support the needs of those groups and respond appropriately to prevent such situations.

1.4 Frontline staff need to take guidance from line managers on how best to resolve using customer services techniques, empathy and the skills required to perform their duties at Dorset Council. This protocol is by exception only to manage those extreme behaviours that are beginning to impact staff wellbeing or are unreasonably time consuming.

2. What constitutes 'unreasonable behaviour'?

2.1 Unreasonable behaviour may include:

- Abusive, offensive or threatening language on the telephone;
- Abusive, offensive or threatening language face to face;
- Sending of abusive, offensive or threatening correspondence;
- Making multiple phone calls;
- Sending multiple e-mails;
- Leaving multiple voicemails;
- Sending multiple text messages;
- Repetitious behaviour;
- Publishing unacceptable information in a variety of media such as social media websites and newspapers;
- Threats of violence;
- Actual violence

2.2 This protocol recognises that some behaviour that may be deemed unreasonable may be linked with underlying health issues. In these instances contact will be made with social care colleagues to determine whether this impacts on how the individual's behaviour is managed.

3. What should you do if you believe that you have been or are the subject of unreasonable behaviour?

3.1 Where you believe that there is no immediate risk to yourself or others, you should use your own judgement and customer services skills to resolve the issue where you are able. However, where you do not feel this to be the case, or if you believe that you have been subject to unreasonable behaviour, you should notify your line manager. Where the incident relates to violent or potentially violent behaviour the Violence, Aggression and Harassment at Work policy and guidance should be followed.

3.2 The manager should email details to the dedicated email address spocassurance@dorsetcouncil.gov.uk, including qualifying criteria and numbers of incidents, so that an assessment can be made as to whether the individual displaying unreasonable behaviours needs to be recorded within the 'unreasonable behaviour' database so that other members of staff can review and take appropriate action should they have contact.

4. How is the 'unreasonable behaviour' database maintained?

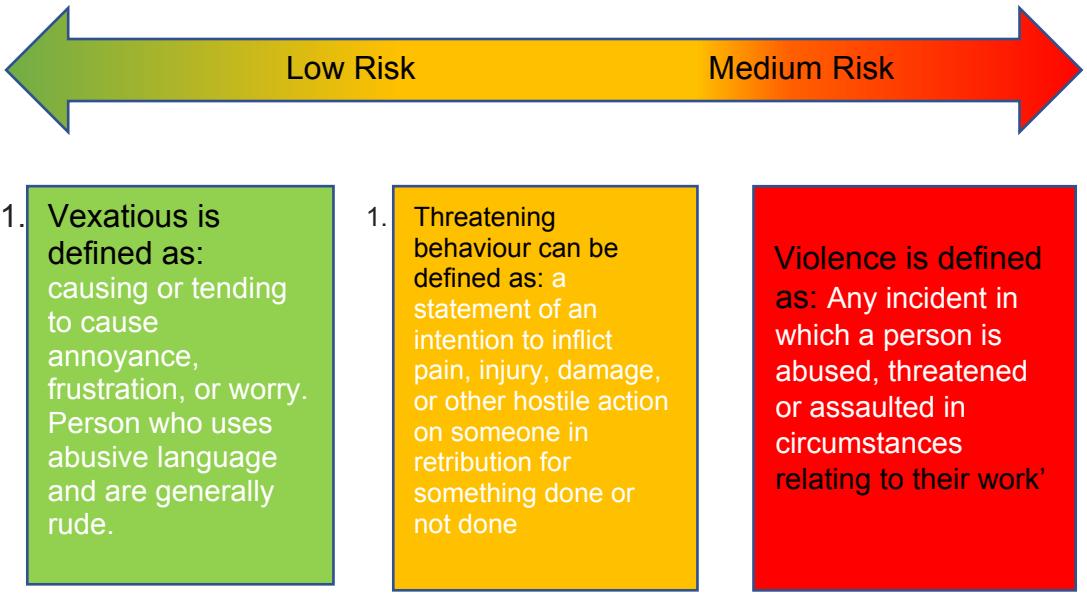
4.1 On receipt of the unreasonable behaviour request, it will be reviewed by the following panel of officers:

- An Operations Manager from the directorate concerned
- Service Manager for Assurance
- Senior Assurance Officer – Complaints
- Customer Services Manager
- A legal representative (Phase 3/High risk cases)
- Health and Safety Manager

(or their nominated representatives)

Where an underlying health issue has been identified, the appropriate social care Operations Manager should be invited to the panel

4.2 The panel will decide if the behaviours meet the criteria for Unreasonable Behaviour (UB), using the following risk assessment criteria (Appendix A provides HSE guidance on threatening behaviour). Where a majority decision is not reached, the Operations Manager will have the 'casting vote'. This first stage of consideration will be to assess whether the individual has underlying health issues that may influence their behaviour, and to link in with social care teams:



4.3 The panel will in the first instance consider whether the individual has any underlying health issues, and in such cases consideration will be given to any changes to the approach set out below, in conjunction with social care colleagues.

4.4 Where the panel's risk assessment determines that the individual should be logged on the unreasonable behaviour database the following three phrases are adopted, which enable action to be ceased where behaviour improves or to be escalated where necessary:

4.5 <u>Low / Medium Risk –</u>

<u>Phase One</u> - A letter or email should be sent from the Directorate using a "phase one" template. This correspondence should describe the incident, location , date and time. The correspondence will advise that they have been logged on the Council's unreasonable behaviour database and that the record will be removed after 12 months as long as there is no repeat

behaviour. The correspondence will be accompanied by an Equalities and Diversity questionnaire. Where the returned questionnaire identifies underlying issues that have not previously been identified, the panel will refer to social care colleagues (as per 4.3 above).

Consideration should be given as to whether a Single Point of Contact (SPOC) is required at this stage. A SPOC will generally be an appropriate Service Manager, but at their discretion this may be delegated to another appropriate officer. If it is identified that there are underlying health issues, it may be appropriate for the SPOC to be an operations manager in the relevant locality.

The incident and follow up actions should be recorded on the unreasonable behaviours database.

Phase Two - If there is a repeat of the behaviour, the panel will reconvene and ensure the behaviours are consistent with the initial incident and take a view on whether phase 2 correspondence should be issued. The correspondence should be signed off at a more senior level to show escalation from the manager at phase 1. The phase 2 correspondence should:

- Refer to the phase 1 correspondence, including date of issue
- Describe the incident, location, date and time.
- Send a strongly worded letter reiterating the Council's position.
- Note that they have been logged on the Council's unreasonable behaviour database and that the record will be removed after 12 months as long as there is no repeat behaviour.

Further consideration should be given as to whether a Single Point of Contact (SPOC) is required at this stage, if not already. At the Panel's discretion, it may be determined that the behaviour demonstrated is sufficiently significant as to move directly to Phase Three.

The further incident and follow up actions should be recorded on the unreasonable behaviours database.

Phase Three - If there is a further repeat of the behaviour, the panel will reconvene and ensure the behaviours are consistent with the initial two incidents and take a view on phase 3 correspondence. The phase 3 correspondence should be drafted by, and sent by legal, and:

- Refer to the phase 1 & 2 correspondence, including date of issue
- Describe the incident, location, date and time.
- Include a cease and desist requirement
- Include a SPOC if not already in place
- Identify the consequences of a breach;

- Note that they have been logged on the Council's unreasonable behaviour and that the record will be removed after 12 months as long as there is no repeat behaviour.

In the event that court action is taken, it is possible that staff summoned to give evidence. In such cases, support should be sought from the line manager in the first instance.

4.6 <u>High Risk –</u>

Where the panel determines the contact to be High risk, Phase 3 will immediately be applied.

5. Who can access the unreasonable behaviours database?

5.1 To be effective it is important that the information on 'anticipated risk levels' associated with known individuals and/or specific addresses are widely available. This will ensure that potential issues are known prior to contacts and/or visits and to allow careful consideration to be given to such contacts. Thought should be given to liaising with social care staff to ensure that Mosaic records highlight the status of the individual.

5.2 However, the organisation also has a responsibility to ensure that sensitive data is protected and managed appropriately in keeping with the General Data Protection Regulations.

5.3 This means that relevant information will need to be 'layered' with certain information only being available on a 'need to know basis'.

6. How will the database be maintained?

6.1 Unreasonable behaviour records will be reviewed after 12 months by the panel, and a view taken as to whether or not to remove the individual from the list. Removal from the list will not be communicated to the perpetrator as this may re-oxygenate the issues.

6.2 The Service Manager for Assurance will be the Information Asset Owner for the Unreasonable Behaviours database, but the responsibility for individual records will rest with the identified Operations Manager.

7. What happens if the behaviours do not improve?

7.1 In the event that behaviours do not improve, the matter should be escalated to legal services to determine what further action needs to be taken.

Marc Eyre, Service Manager for Assurance
March 2021

Appendix A

Definitions

The Health & Safety Executive (HSE) have published some helpful guidance and supporting definitions which the organisation is seeking to utilise to guide its own approach to assessing the level of anticipated risk'.

These definitions are as follows:

VIOLENCE

Any incident in which a person is abused, threatened or assaulted in circumstances relating to their work.

AGGRESSION

Feelings of anger or antipathy resulting in hostile or violent behaviour; readiness to attack or confront.

HARASSMENT

The act of systematic and/or continued unwanted and annoying actions of one party or a group, including threats and demands.

These definitions also include verbal abuse or threat, threatening behaviour, any assault, any serious or persistent harassment and extends from what may seem to be minor incidents to serious assaults and threat against the employee's family.

Also covered by this policy are employees that work from home and work flexibly from home or other locations that are not their normal place of work, as this is still counted as being 'at work'.

These definitions are also taken to include any form of hate crime against any individual or group of people including any form of sexual harassment or discrimination against any of the protected characteristics under equality legislation, i.e.

- Age;
- Disability;
- Gender reassignment;
- Marriage and civil partnership;
- Pregnancy and maternity;
- Race;
- Religion or belief;
- Sex;
- Sexual orientation

The following link can be used to report any hate crimes and all team members should be encouraged to do so - https://www.dorset.police.uk/do-it-online/report-a-hate-crime-or-incident/

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Recommendation to Audit & Governance Committee

People and Health Overview Committee

Prevent

Decision

Portfolio Holder: Cllr G Carr-Jones, Housing and Community Safety

Local Councillor(s): All

Executive Director: V Broadhurst, Interim Executive Director for People - Adults

Report Status: Public

Recommendation:

1. That Article 11 of the Council's Constitution be amended to include the new statutory Channel Panel, its proposed membership and terms of reference.

Reason for Recommendations:

To ensure Dorset Council meets its statutory duties and expectations relating to Prevent.

Appendices

Appendix 1 – Report to People & Health Overview Committee – May 2021

Appendix 2 – Channel Panel Terms of Reference and Membership

Appendix 3 – Home Office Prevent Elected Members Handbook

Background Papers

Home Office e-learning on Prevent - here

Prevent Duty Guidance - here

Channel Duty Guidance - here

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People & Health Overview Committee
4th May 2021
Prevent

For Recommendation to Council

Portfolio Holder: Cllr G Carr-Jones, Housing and Community Safety

Local Councillor(s): All

Executive Director: V Broadhurst, Interim Executive Director of People - Adults

Report Author: Andy Frost
Title: Service Manager for Community Safety (Strategic Lead)
Tel: 01305 224331
Email: andy.frost@dorsetcouncil.gov.uk

Report Status: Public

Recommendations:

Members of the committee:

1. Consider and comment on the Council's work on Prevent, including the Channel system. This is to support the Council in its duty to have due regard to the need to prevent people from being drawn into terrorism. Channel Panels are multi-agency practitioner groups that come together when someone is identified as being at risk of being drawn into extremism

2. Recommend to Full Council via the Audit and Governance Committee that Article 11 of the Council's Constitution is amended to include the new statutory Channel Panel, its proposed membership and terms of reference.

3. Consider how to increase awareness of Prevent work amongst Dorset Councillors including by using the Prevent Elected Members Handbook published by the Home Office.

Reason for Recommendations:

To ensure Dorset Council meets its statutory duties and expectations relating to Prevent.

1. Executive Summary

Section 26 of the Counter-Terrorism and Security Act 2015 places a duty on local authorities in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism.

The Prevent Duty Guidance for England and Wales sets out requirements on local authorities to:

- Work in partnership to co-ordinate Prevent activity
- Assess the risk of individuals being drawn into terrorism
- Develop action plans relating to Prevent
- Train staff
- Ensure local authority resources are not used to provide a platform for extremists or to disseminate extremist views
- Collaborate with other local authorities on Prevent issues
- Act as priority areas for Prevent (specific local authorities only)
- Work with other agencies and organisations supporting children

Officers assess progress against Prevent duties each year using the Home Office 'Prevent Duty Toolkit for Local Authorities' as a guide. The latest assessment shows that Dorset Council is meeting its duties, though some work is ongoing and needs to be regularly updated.

Channel Panels are multi-agency practitioner groups that come together when someone is identified as being at risk of being drawn into extremism. Panels put support packages in place to steer individuals away from extremist activity.

In November 2020, the government released its 'Channel Duty Guidance' which sets out new expectations for local authorities.

The Home Office recognises that local authority elected members play a key role in local Prevent delivery. They have published a 'Prevent Elected Members Handbook' that explains the Prevent programme in-depth, helps build understanding and can be used in meetings and when engaging with local communities.

2. Financial Implications

Financial implications are considered minimal, with work being picked up through existing budget arrangements.

3. Well-being and Health Implications

None.

4. Climate implications

None.

5. Other Implications

Community safety, as set out in the report.

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: Low
Residual Risk: Low

7. Equalities Impact Assessment

The Council's work on Prevent and Channel is directed by Government legislation and statutory guidance. It is assumed the Government has completed relevant equality impact assessments on these.

8. Appendices

Appendix 1 – Channel Panel Terms of Reference and Membership

Appendix 2 – Home Office Prevent Elected Members Handbook

9. Background Papers

Home Office e-learning on Prevent - here

Prevent Duty Guidance - here

Channel Duty Guidance - here

Footnote:
Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.

10. Introduction

10.1 Section 26 of the Counter-Terrorism and Security Act 2015 places a duty on local authorities in the exercise of their functions to have due regard to the need to prevent people from being drawn into terrorism.

10.2 Requirements include working with partners, developing action plans, assessing risks, training staff and running Channel Panels.

11. Progress Against Duties

11.1 Officers assess progress against Prevent duties each year using the 'Home Office Prevent Duty Toolkit for Local Authorities' as a guide. The latest assessment shows that Dorset Council is meeting its duties, though some work is ongoing and needs to be regularly updated.

11.2 The risk assessment process is annual and action plans require regular monitoring and updating annually. Staff training is assessed and adapted as needed to ensure it meets the standards set by the Home Office. Safeguarding policies and procedures cover working with other agencies and organisations working with children.

11.3 The Council is required to ensure that publicly owned venues and resources do not provide a platform for extremists and are not used to disseminate extremist views. ICT have been through a process of harmonising security software for Dorset Council and have provided assurance that adequate security software is in place. This includes Libraries who have IT equipment that is normally accessible to the public. Most council owned buildings have covenants written into tenancies and leases to prevent extremism and/or radicalisation being promoted. Any new agreements or those under review will be picked up as and when required.

12. Channel Panel Arrangements

12.1 Channel Panels are multi-agency practitioner groups that come together when someone is identified as being at risk of being drawn into extremism. Panels put support packages in place to steer individuals away from extremist activity.

12.2 In November 2020, the government released its Channel Duty Guidance which sets out new expectations for local authorities.

12.3 Dorset Council is required to:

- Have in place a single Channel panel covering both adults and children
- Chair Channel panels for its area
- Have a nominated chair and deputy chair (by the Chief Executive), ensuring they meet core competencies (details of the chair and vice chair must be notified to the Home Office)
- Be members of the panel in addition to the Police and other relevant partners who will have a duty to cooperate
- Work with other areas where a Channel panel takes place across local authority areas
- Hold monthly channel panels where there is a live case
- Have in place strong local governance and an escalation process with Channel included in the Council's constitution
- Have in place a Personal Information Sharing Agreement (PISA).

12.4 Terms of reference and membership for the new statutory channel panel is provided at appendix 1. Members of the Committee are asked to recommend it to Full Council for inclusion in the Constitution.

12.5 Within Dorset Council, the intention is to take updates on work through the Council's internal governance arrangements, including the relevant overview and scrutiny committees.

12.6 Partnership governance arrangements are through the pan-Dorset Prevent Partnership Group which reports to the overarching pan-Dorset CONTEST Board (CONTEST is the UK's counter terrorism strategy).

13. Elected Members and Raising Awareness

13.1 The Home Office recognises that local authority elected members play a key role in local Prevent delivery.

13.2 Last year Dorset Council Councillors received training on Prevent and a briefing on the Council's work. In response to the new requirements, annual updates on Prevent and Channel work will be taken through the Council's relevant overview and scrutiny committees.

13.3 The Home Office have published a 'Prevent Elected Members Handbook' that explains the Prevent programme in-depth, helps build understanding and can be used in meetings and when engaging with local communities. The handbook is provided at appendix 2.

Dorset (Dorset Council area) Channel Panel

Terms of Reference

Created: April 2021 Final

1.0 Context

1.1 Full guidance on Channel Panels is provided in the *Channel Duty Guidance 2020: Protecting people vulnerable to being drawn into terrorism*[1]. Panel members should read the guidance in full in conjunction with these basic requirements and Terms of Reference.

1.2 Channel forms a key part of the national Prevent strategy. Channel is an identification and intervention safeguarding multi-agency process, providing support to individuals who are at risk of being drawn into terrorism.

1.3 Channel became a statutory requirement as part of the Counter Terrorism and Security Act 2015. **In practice, the legislation requires:**

a) local authorities to ensure that a multi-agency Channel Panel exists in their area;

b) the local authority to provide the chair;

c) the Panel to develop a support plan for individuals accepted as Channel cases;

d) the Panel to consider alternative forms of support, including health and social services, where Channel is not appropriate;

e) the Panel will ensure accurate records are kept detailing the support plan, agreed actions and decision-making, and outcomes: and

f) all partners of a Panel (as specified in Schedule 7), so far as appropriate and reasonably practicable, to cooperate with the police and the Panel in the carrying out of their functions

2.0 Purpose

2.1 Channel seeks to deliver prompt and tailored work in its conduct of assessing an individual's vulnerability to being drawn into terrorism, information gathering, developing, and delivering support packages to meet identified need and reduce vulnerability.

2.2 The Channel process is managed by the local authority, who will chair the Panel, in conjunction with the Police, and is the principal decision-making and co-ordinating body for the Channel Programme in Dorset.

[1] Channel Duty Guidance 2020: Protecting people vulnerable to being drawn into terrorism: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/964567/6.6271_HO_HMG_Channel_Duty_Guidance_v14_Web.pdf

2.3 Decisions made by the Panel will be based on discussions which consider shared information, assessment of vulnerability, risk and support needs and the input of all core members. Decisions will ideally be based on Panel consensus; where consensus cannot be reached, Panel majority will be used, with the chair having the deciding vote where there is no Panel majority. The rationale for all decisions will be clearly recorded in the minutes.

2.4 The Panel has the ability to work outside scheduled meetings, in response to urgent or critical incidents.

2.5 Channel is a safeguarding and public protection measure that aims to ensure that children and adults of any faith, ethnicity or background receive support before their vulnerabilities are exploited by those that would want them to embrace terrorism, and before they become involved in criminal terrorist related activity.

2.6 Success of the programme is very much dependent on the co-operation and coordinated activity of partners. It works best when the individuals and their families fully engage with the programme and are supported in a consistent manner.

3.0 Membership and Meeting Frequency

3.1 The Channel Duty Guidance sets out that as a minimum, the membership will consist of the local authority Channel chair and the police.

3.2 Other partners (listed in Schedule 7 of CT&S Act and also Annex B of the Channel Duty Guidance) have a duty to cooperate, as far as is appropriate and reasonably practicable, to assist the police and the Panel in carrying out its functions.

3.3 It is proposed that the core membership of the Dorset Channel Panel will be the Corporate Director – Adult Social Care (Commissioning) (Local Authority Chair) and representatives from the following:

- Dorset Police
- Counter Terrorism Police, South West, Dorset
- Dorset Council Adult and Housing Service's
- Dorset Council Children's Service's
- Dorset Combined Youth Justice Service
- National Probation Service
- Dorset, Devon & Cornwall Community Rehabilitation Company
- Dorset Clinical Commissioning Group (CCG)
- Dorset Health Care
- Education Establishments – as appropriate and on request
- Child Care Providers (inc Fostering Agencies) – as appropriate and on request

3.4 Other members should be invited where they have input to the cases to be discussed, as determined by the Panel chair and invited each time.

3.5 A Council Officer within Dorset Council will chair Panel meetings. There is a named deputy chair who can deputise if the chair is absent from a meeting.

3.6 It is expected that Panel members attend regularly or ask a named deputy to take their place if they are unable to attend a meeting.

3.7 The Channel Panel will meet at least monthly where there are live cases for discussion, new referrals requiring a decision or cases requiring 6/12-month review. Where necessary, an emergency meeting can be convened if the individual's vulnerabilities require prompt consideration.

3.8 Where there are no cases/referrals requiring Panel meetings to be convened, the chair and local authority Prevent Coordinator will convene (a gap of no more than three months) wider Prevent meetings to take abreast of any changes to duties, legislation and/or knowledge, practice updates.

3.9 Panel members must also ensure that they keep up to date with any changes in duties and legislation and undertake training as required. Regular updates will be provided at Panel meetings.

3.10 Panels will constitute a single Panel, with a single chair, covering the needs of adults and children.

4.0 Secretariat

4.1 The local authority will perform all secretarial functions which include:

- Creating an agenda and circulating this to members one week before the meeting;
- Minuting the meeting and circulating these to core members and relevant partners in good time;
- Ensuring key discussions, Panel decisions and the basis for all decisions are clearly recorded.

4.2 Channel Case Officers (Dorset Police) will keep a record of all VAFs and Channel minutes on CMIS (Case Management Information System). All other activity is summarised in a running case log.

5.0 Scope of the meetings and decision making

- The Channel chair liaises with the Channel Case Officer before all scheduled Panels.
- The agenda and papers for the Panel are issued to all Panel Members prior to the meeting.
- For cases to be discussed at Channel, the Channel Case Officer contacts all relevant agencies to gather information held to support the writing of the Vulnerability Assessment Framework (VAF). The VAF is circulated to Panel members in advance of the Panel meeting.
- Colleagues who have made the referral may be invited to attend Channel to provide the Panel with more information and background to the referral. Other relevant professionals who could have helpful information or advice

will also be invited to Panel at a specified time to join the discussion about the case.

- Meetings will risk assess referrals by using VAFs and any other information available and agree the most appropriate support to meet their needs.
- A decision will be taken by the Panel on the adoption of all referrals presented for consideration.
- Decisions made by the Channel Panel will ideally be based on Panel consensus, or if this cannot be achieved, Panel majority (with the chair having the casting vote). This will be achieved by respectful consideration of the views of partners working cooperatively.
- When deciding whether a referral should be adopted by Panel, the chair will ensure that a full discussion has taken place with the relevant specialist advice and information available. The minutes will reflect the details of each individual Panel member's contribution to the discussion and decision. Minutes will record Panel members' contributions.
- Panel members will ensure an effective support plan is put in place for any cases adopted and that consent is sought from the individual prior to the plan being activated and identify and commission a suitable intervention to offer support in order to reduce the level of vulnerability. This may include the use of a Home Office Intervention Provider. The use of an Intervention Provider will be considered for all adopted cases.
- Cases currently open to Channel will be discussed and reviewed at each Panel to decide whether Channel involvement is still necessary. For cases that are currently open to Channel there will be an updated version of the Support Plan and an updated VAF (at least every 3 months) circulated to Panel members in advance ready for review and discussion at the meeting.
- If an Intervention Provider is still working with the case, then it will automatically remain with Channel. The Intervention Provider will report its recommendations to the Panel, who will then decide if interventions should conclude. If a case has been adopted but there is no Intervention Provider, the police will be asked to review this after 3 months. On occasion, (i.e. where consent for Channel is withdrawn) the risk may not be mitigated or decreased through the Channel process and a case may be moved from Channel to police-led space.

6.0 Governance

6.1 The Dorset CONTEST Board has overall responsibility for the local overview and monitoring of partners implementation of Channel and the wider Prevent duty. Officers in the council with responsibility for Channel / Prevent will report to councillors through Dorset Council's People and Health Scrutiny Committee. The first report will be taken to the Dorset Council's People and Health Scrutiny Committee in May 2022, and annually thereafter. There are also strong links with the Pan Dorset Prevent Partnership and Dorset Community Safety Partnership (CSP).

6.2 Governance arrangements include provision for addressing escalated concerns.

7.0 Accountability

7.1 Members are expected to prepare by reading the agenda, vulnerability assessments and any supporting information in advance of the meeting.

7.2 Members are expected to complete their actions in good time and to report outcomes of their actions to the Panel.

7.3 The Channel chair should be briefed by the Channel Case Officer in advance of panel to aid agenda setting, meeting preparations and identify the appropriate panel members required to be in attendance. The pre-brief should only be used to provide a summary of referrals for consideration at panel: it should be concise, brief and not treated as a decision-making forum or a filter for consideration of Channel referrals.

7.4 Police will own (are responsible for the identification and mitigation of imminent risks of individuals mobilising towards and terrorism offences) the terrorism risk and the Panel will own the terrorism vulnerability associated with all referrals and cases discussed.

7.5 It is expected that Panel members attend regularly or ask a named deputy to take their place if they are unable to attend a meeting. The named deputy chair will deputise for the chair if unable to attend the meeting.

7.6 Panel members must ensure that they keep up to date with any changes in duties and legislation and develop an improvement plan which includes identification of any training needs, at least annually. Regular updates will be provided at Panel meetings. It is expected that the Dorset Channel chair will attend relevant training, events and disseminate relevant updates or briefings to Panel members as necessary. There is an annual Dorset Channel Development Day.

8.0 Information Sharing

8.1 The Channel Panel will agree arrangements for sharing personal data relating to referrals, live cases and cases subject to review. An information sharing agreement to facilitate the appropriate and efficient sharing of information between partner agencies detailed within this term of reference will be developed and reviewed two yearly or in light of legislative and other changes.

9.0 Confidentiality

9.1 Information discussed by partners within the ambit of this meeting is strictly confidential and must be treated as such during the meeting and in the subsequent handling of any data considered at this meeting; data must not be disclosed to third parties without the prior agreement of the partners of the meeting.

9.2 Information shared should be directly or indirectly relevant to cases on a need to know basis. Clear distinctions should be made between fact and opinion.

9.3 All agencies should ensure that the minutes are retained in a confidential and appropriately restricted manner. These minutes will aim to reflect that all individuals who are discussed at these meetings should be treated fairly, with respect and without improper discrimination. All work undertaken at the meetings will be informed by a full commitment to equality considerations.

9.4 The responsibility to take appropriate actions rests with individual agencies. The role of the Channel Panel is to facilitate, monitor and evaluate effective information sharing to enable appropriate actions to be taken to increase public safety.

9.5 Channel Panel members will sign the Confidentiality and Official Secrets Act declaration at the start of each meeting.

10.0 Discharging Cases

10.1 When the Panel agrees that a case no longer presents a Prevent concern, or is no longer appropriate for Channel, the following discharge process should be followed to ensure that all decisions and actions are recorded with reasons.

When discharging cases from Channel other risk factors should be considered and appropriately discharged e.g. risk to self and others

10.2 If the panel is satisfied that the terrorism vulnerability has been successfully reduced or managed, they should recommend that the case then exits the process as the intervention is complete. A closing VAF should be completed by the Channel Case Officer as soon as possible setting out the reason for the panel's recommendations. The recommendations will need to be endorsed by the Channel panel chair and the Channel Case Officer

10.3 The most appropriate Panel member is identified to liaise with the individual and notify them of the Panel's decision.

10.4 Where the Panel has agreed that broader support may be necessary:

- If that support is from an agency/service represented at Channel it is the responsibility of the representative to advise on what support should be considered and ensure that that their agency/service follows through with any agreed actions
- If the support is not from an agency represented at Channel, a discussion will be held, and agreement reached about how the request for support will be progressed

10.5 The Channel Panel will review all adopted cases at 6 and 12 months after exiting from Channel. The Case Officer will drive this process, updating the chair on upcoming cases to be reviewed. The review process will include a request for relevant information from Panel members, including their service engagement, police checks, change of circumstances, and contact with the

initial referrer where appropriate. The Case Officer will ensure the Case Management system is updated to reflect the process and any decisions taken.

11.0 Security Clearance

11.1 It is recommended that the Channel Panel chair and deputy chair hold UK National Vetting clearance at 'Security Check' SC level clearance. The Home Office should be contacted to administer these requests.

12.0 Document Retention

12.1 The GDPR provides that personal data shall be '*kept in a form which permits identification of data subjects for no longer than is necessary for the purposes for which the personal data are processed'*. When cases have been formally discharged from Channel Panel, the retention of data shall comply with the data retention policy of each agency.

13.0 Review of Terms of Reference

13.1 Terms of Reference will be reviewed on an annual basis or in light of legislative and other changes.

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Home Office

PREVENT

Handbook for Elected Members

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Prevent - Handbook for Elected Members

The purpose of Prevent is to safeguard vulnerable individuals from becoming terrorists or supporting terrorism, by engaging with people vulnerable to radicalisation and protecting them from being targeted by terrorist recruiters.

Prevent uses a similar approach to public health models, which focus on prevention rather than treatment. Focusing solely on confronting ideologies alone will not undermine terrorism. Prevent provides holistic support to address some of the personal and social conditions which make vulnerable people receptive to radicalisation.

Alongside other public-sector bodies such as policing, healthcare and education institutions, Local Authorities play a vital role, and have a legal duty to implement Prevent to protect vulnerable people and manage the threat from terrorism.

As leaders and representatives of local citizens, Elected Members have the reach and understanding to create and maintain meaningful relationships with their communities. Although tackling radicalisation may appear to be distant from the typical day-to-day role of Elected Members, the delivery of Prevent requires the support of local communities, local partnerships and local leaders to be implemented effectively.

This document provides information for Local Authority Elected Members about the context, purpose and implementation of Prevent. It looks at the important role that Local Authorities and Elected Members can play at a local level, and how they can lead the vital work that is necessary to safeguard individuals against radicalisation.

THE UK COUNTER-TERRORISM LANDSCAPE

The Threat

- The UK is currently facing a number of different terrorist threats, ranging from Daesh and Al'Qa'ida-inspired to right-wing terrorism.
- The current level of threat from terrorism in the UK is substantial - which means an attack is considered likely.
- The threat has mainly been caused by Daesh (also known as Islamic State of Iraq and the Levant - ISIL). Their ability to direct, enable and inspire attacks makes the group the most significant global terrorist threat.
- There is also a growing threat from right-wing terrorism. The Government has banned three right-wing terrorist groups - National Action, Sonnenkrieg Division (SKD) and Feuerkrieg Division (FKD).
- Since 2017, there have been nine Daesh-inspired attacks and two right-wing terrorist attacks in the UK. These attacks have resulted in the tragic loss of many lives, as well as severe injuries and psychological impacts for victims.
- Terrorism also represents a huge cost to the country financially, with the direct and indirect costs of the 2017 attacks alone running into the billions of pounds.
- Some online spaces are used by terrorists to spread sophisticated propaganda designed to radicalise, recruit and inspire people, and to incite or provide information to enable terrorist attacks. Since 2010, over 310,000 pieces of illegal terrorist material have been removed from the internet by the Counter-Terrorism Internet Referral Unit (CTIRU), a body set up by the Home Office to help counter the spread of terrorist propaganda online.

CONTEST

- The UK combats the threats from terrorism through CONTEST, the UK's counter-terrorism strategy. The aim of CONTEST is to reduce the risk of terrorism to the UK, its citizens and interests overseas so that people can go about their lives freely and with confidence.
- The most recent version was published in June 2018 as a result of a review of all aspects of counter-terrorism. The review was undertaken to ensure that Britain has the best response to the heightened threat, seen through the attacks in London and Manchester in 2017.

The framework for CONTEST, is made up of four 'P's:

Prevent: *to stop people becoming terrorists or supporting terrorism*

Pursue: *to stop terrorist attacks*

Protect: *to strengthen our protection against a terrorist attack*

Prepare: *to mitigate the impact of a terrorist attack*

WHAT IS PREVENT?

The purpose of Prevent is to safeguard people who are at risk of radicalisation and to stop them from being exploited by people who would want them to support terrorism. It is also about building resilience in communities through a variety of projects and civil society organisations.

The Prevent programme uses early intervention to protect individuals and communities from the harms of terrorism. Prevent works in a similar way to programmes designed to safeguard people from other harms, such as gangs, drug abuse, and physical and sexual abuse, by tackling the underlying causes of radicalisation. Intervention support for vulnerable individuals is both confidential and voluntary. Prevent is delivered through a wide network of partners within communities, civil society organisations and public-sector institutions.

Prevent work also extends to supporting the rehabilitation and disengagement of those already involved in terrorism through the Desistance and Disengagement Programme. This programme is a new element of Prevent that provides a range of intensive tailored interventions and practical support, designed to tackle the drivers of radicalisation. Support could include mentoring, psychological support, theological and ideological advice.

PREVENT IS:

- An extension of existing multi-agency safeguarding principles
- Working with communities and local civil society to build resilience to terrorist narratives
- Promoting debate in schools and universities
- Tackling terrorism in all its forms

PREVENT IS NOT:

- A spying mechanism
- Focussed on any particular religion or ethnicity
- Stifling free speech in higher education

Success in Preventing Terrorism

Over 310,000 pieces *of terrorist material removed from the internet, since February 2010*

203 community *based projects were delivered in 2018/19 reaching over* **142,000 participants**

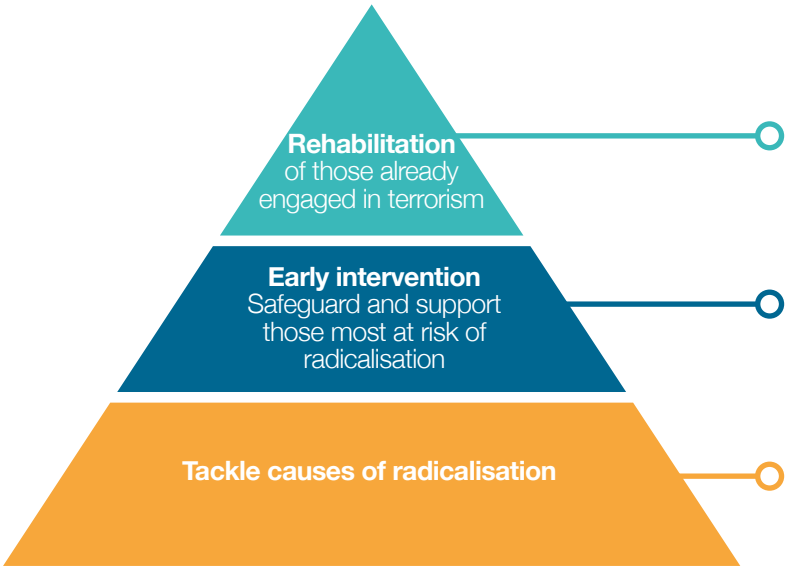
Over 100 *children safeguarded by the Courts from being taken to conflict zones in Iraq and Syria since 2015*

2,200 *people adopted onto Channel since 2012*

Prevent training has been completed **over 1.1 million times**

The Prevent Delivery Model

Prevent is risk-based and proportionate. The Prevent delivery model sets out how a broad range of Prevent initiatives tackle both the causes and risk factors that can lead an individual to become radicalised, and directly support those who are at risk through early intervention. Prevent also aims to rehabilitate the relatively small number of higher risk individuals who have already engaged in terrorism.



Providing support to those already engaged to disengage and rehabilitate.

Using safeguarding principles to provide tailored multi-agency support to those identified as most vulnerable to radicalisation e.g. counselling, theological mentoring.

Working online and offline to empower communities and individuals e.g. community engagement, civil society organisations.

Tackling the causes of Radicalisation

Civil Society Organisations – what is their role in the delivery of Prevent?

Prevent works with a broad range of civil society organisations. In 2019/20 there were 226 community-based projects across the country with over 142,000 participants, addressing vulnerabilities from social isolation to substance misuse.

These civil society organisations play a vital role in building community resilience to extremist narratives and increase the understanding of the risks of radicalisation across the community. They can be key to providing holistic support to vulnerable individuals.

Case study: Prevent-funded Civil Society Organisations

Kikit Pathways is a Prevent-funded Black, Asian and Minority Ethnic (BAME) specialist drug and alcohol support service that provides a range of services to meet the needs of vulnerable people.

Based in the West Midlands, Kikit work with mosques and communities to provide mentoring and support for individuals who are vulnerable to terrorist recruiters, particularly those suffering problems with drug and alcohol abuse – who can be targeted by recruiters. Kikit then help to establish referral pathways to the relevant safeguarding services, including Channel early intervention support where appropriate, so that individuals can get the assistance that they need.

The project provides specialist practitioner support and tailored mentoring for those exhibiting signs of radicalisation and grievance and, once assessed, beneficiaries are provided with holistic support to reduce their vulnerabilities. Kikit have a strong track record, including in preventing people travelling to Syria to fight for Daesh.

See some examples of the civil society organisations in your local area below:
(Please fill the below section in with examples of civil society organisations in your local area including, who they are, what they do and how they can help vulnerable individuals).

Example 1

Example 2

Early Intervention

What is Channel?

Channel is an early intervention safeguarding programme and the element of Prevent which provides bespoke support to children and adults identified as vulnerable to radicalisation, before their vulnerabilities are exploited by terrorist recruiters who would encourage them to support terrorism, and before they become involved in criminal terrorist related activity.

Channel works like other safeguarding interventions, identifying individuals at risk through referral, assessing the nature and extent of the risk and then by developing a support plan for the individual concerned. It is a voluntary and confidential programme.

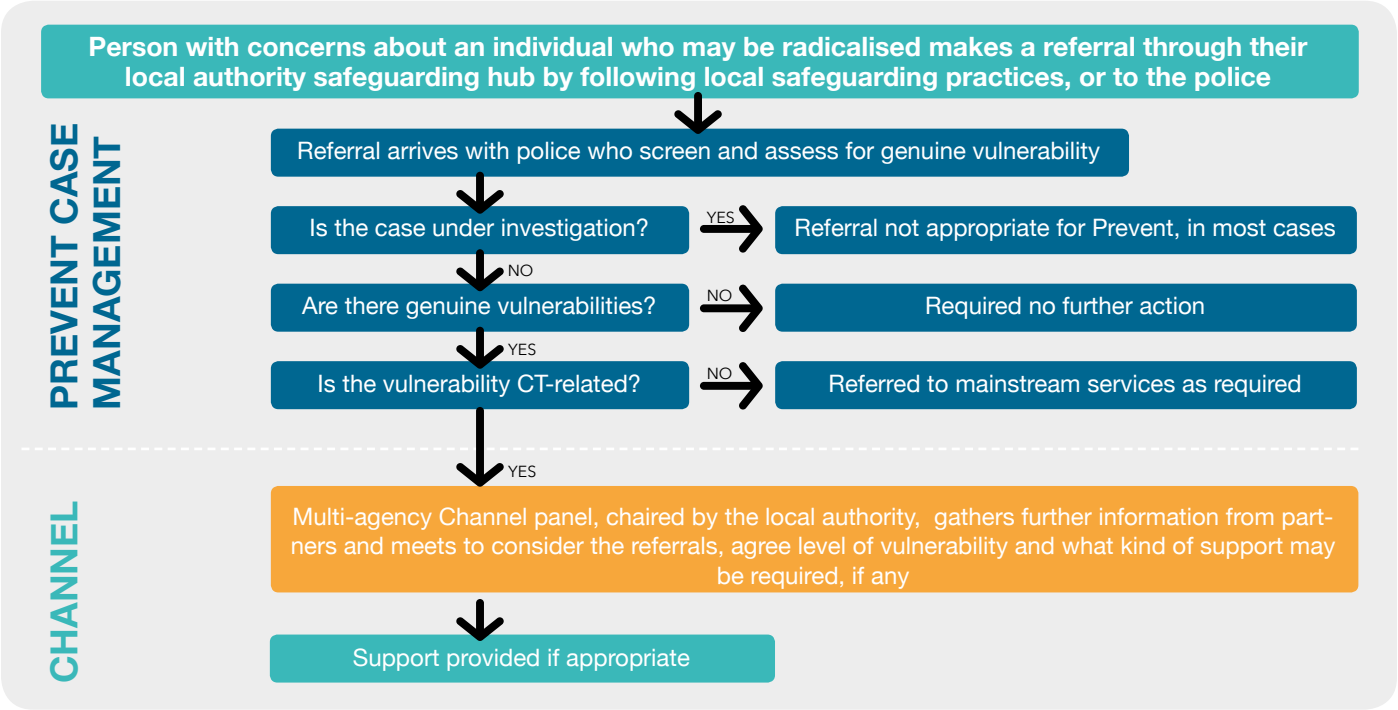
Channel takes a multi-agency approach, involving a range of partners including the local authority, the police, education, social services, health providers and others to tailor the support plan to the individual's needs.

The type of support available is wide-ranging and bespoke. It can include help with accessing other mainstream services, such as education or career advice, dealing with mental or emotional health issues, drug/alcohol abuse, and theological or ideological mentoring from a specialist Channel Intervention Provider, who works with the individual on a one-on-one basis.

In 2018/19, 561 individuals were adopted as Channel cases nationally. Of these, almost half were referred for concerns related to right-wing extremism, higher than the number who were referred for Daesh or Al Qa'ida-inspired extremism.

In 2018/19, 11% of Prevent referrals came from Local Authorities, while the education sector accounted for 30% and the Police 29%. Of individuals adopted as Channel cases in 2018/19, 88% were male and 66% were aged 20 years or under.

Prevent and Channel referral process



Case study: Channel intervention for 'Leon'

Leon was referred by teachers to Prevent at the age of 15, after searching for extreme right-wing material on the school internet. He had also been disclosing to staff that he felt angry and intimidated because he is a minority in his classes.

Leon disclosed that he hates all Muslims because 'they are all ISIS', and that he was part of an extreme right-wing group on Facebook. He also expressed his interest in football violence and gang culture, and that he felt picked on by teachers.

Through Prevent, a range of actions were undertaken as part of Leon's package of support, including providing mental health services to treat his anxiety and insomnia, a specialist Channel mentor who was able to discuss the origin of his views, and advice on internet safety for his parents. The local Prevent team also helped Leon enrol on the work placement scheme of a national construction company, which included support from a careers mentor, and onto the Premier League Kicks programme with his local football team.

Leon's case was successfully concluded and his behaviour in school noticeably improved, with no further issues of him being involved in anti-social behaviour. His mother expressed her gratitude for the intervention, saying "without the intervention from the Prevent team my son wouldn't be on the path he is now on".

Case study: Channel intervention for 'Misbah'

Misbah came across extremist propaganda online while struggling with his identity as a British Muslim teenager. He started to become supportive of the extremist material he was viewing online as it made him feel part of a bigger cause and gave him the direction he had been lacking.

After making worrying comments in class about terrorism, Misbah's teachers became concerned about him and his vulnerability to radicalisation, and he was referred to the local authority Prevent team.

Through the voluntary and confidential Channel early intervention support, Misbah was offered a specialist mentor who met with him weekly and with whom he discussed a range of issues from theology to his future ambitions.

The mentoring allowed Misbah to gain valuable knowledge and exposed him to new and challenging ideas which he may not have had the opportunity to consider otherwise. Misbah found it easy to relate to his mentor, who had a similar background, and they forged a relationship of mutual trust. This, coupled with support from a teacher at his school, ensured that Misbah had positive influences which helped him overcome the negative ones, and he was able to reconsider his worldview.

Misbah went on to study interfaith reconciliation at university. He reported that he now has a clear direction in life and is considering a career in counter-extremism after graduation.

Rehabilitation

What is the Desistance and Disengagement Programme?

The Desistance and Disengagement Programme focuses on rehabilitating individuals who have been involved in terrorism or terrorism-related activity and reducing the risk they pose to the UK.

The programme works by providing tailored interventions which support individuals to stop participating in terrorism-related activity (desist) and to move away from terrorist ideology and ways of thinking (disengage). The programme aims to address the root causes of terrorism, build resilience, and contribute towards the deradicalisation of individuals.

The Prevent Duty

The Counter Terrorism and Security Act 2015 introduced the Prevent Statutory Duty. The Duty requires Local Authorities, schools, colleges, universities, health bodies, prisons and probation and police to consider the need to safeguard individuals from being drawn into terrorism, embedding Prevent as a part of their wider existing day-to-day safeguarding duties. The roll out of the Duty has been supported with guidance for each sector and a dedicated training package.

Prevent, Counter-Extremism and Integration

HM Government's Prevent Strategy, Counter-Extremism Strategy and Integrated Communities Strategy all play important roles in tackling terrorism, challenging extremism and building stronger, more cohesive communities that are resilient to divisive narratives. Whilst these strategies are complementary, they each have distinct, separate objectives:

- **The Prevent Strategy** aims to safeguard those vulnerable to radicalisation, to stop them becoming terrorists or supporting terrorism.
- **The Counter-Extremism Strategy 2015** aims to protect the values which underpin our society - the rule of law, individual liberty, democracy, mutual respect, tolerance and understanding of different faiths and beliefs – by tackling extremism in all its forms. It addresses the promotion of hatred, the erosion of women's rights, the spread of intolerance, and the isolation of communities all of which can increase the risk of hate crime.
- **The Integrated Communities Strategy 2018** aims to create communities where people, whatever their background, live, work, learn and socialise together, and where many religions, cultures and opinions are celebrated. This is built upon shared rights, responsibilities and opportunities and underpinned by the shared British values that champion tolerance, freedom and equality of opportunity.

Integrated communities provide an important protective factor against the threat of terrorism, because of the association between support for divisive terrorist narratives and the deliberate rejection of strong and integrated societies. Marginalised communities who do not or cannot participate in civil society are more likely to be vulnerable to radicalisation.

LOCAL AUTHORITY PARTNERSHIP SELF-ASSESSMENT TOOL

As Prevent is largely a locally-led programme, Local Authorities are at the forefront of tackling radicalisation using their local knowledge, expertise and networks. While national Government provides a framework, guidance, support and funding for Prevent, it is essential that local partners develop responses to tackling radicalisation that are tailored to their local area.

To enable effective delivery of Prevent, the Home Office has worked with a range of local partners to produce the Prevent Duty Toolkit. It has been designed to enable Local Authorities to assess Prevent delivery in their local area against statutory requirements and examples of best practice from peers around the country.

All areas are expected to have Prevent plans in place that are proportionate to the local risk – that might mean some areas where the risk of radicalisation is higher should plan to exceed the delivery outlined in the benchmarks below.

Here is a summary of key benchmarks expected of Local Authorities in delivering Prevent activity:

1. The organisation has a local risk assessment process reviewed against the Counter Terrorism Local Profile.
2. There is an effective multi-agency partnership board in place to oversee Prevent delivery in the area.
3. The area has an agreed 'Prevent Partnership Plan' – this is a local delivery plan, developed against an assessment of local risk, which drives activity where it is most needed in an area.
4. There is an agreed process in place for the referral of those identified as being at risk of radicalisation.
5. There is a Channel Panel in place, meeting monthly, with representation from all relevant sectors.
6. There is a Prevent problem solving process in place to disrupt radicalising influences.
7. There is a training programme in place for relevant personnel, mostly frontline staff such as nurses and teachers – so that they understand the signs of radicalisation and the referral process for vulnerable individuals.
8. There is a venue hire policy in place, to ensure that premises are not used by radicalising influencers, and an effective IT policy in place to prevent the access of extremist materials by users of the networks.
9. There is engagement with a range of communities and civil society groups, both faith-based and secular, to encourage an open and transparent dialogue on the Prevent Duty and local delivery.
10. There is a communications plan in place to proactively communicate and increase transparency of the reality and impact of Prevent work and support frontline staff and communities to understand what Prevent looks like in practice.

Full details corresponding to the benchmarks are provided in the Prevent Duty Toolkit, which was published by the Home Office in September 2018 (a web address can be found in the 'Further Information' section of this document).

ROLE OF ELECTED MEMBERS

Elected Members are crucial for successful delivery of Prevent, by overseeing and scrutinising local plans which ensure that citizens are kept safe, and vulnerable people are given safeguarding support from the harms of radicalisation. Elected Members also play a critical role in representing members of their local community. They act as both a voice of local citizens; raising issues and concerns, whilst speaking on behalf of the Local Authority to communicate how policies and programmes operate.

There are three key roles for Elected Members in shaping and delivering local Prevent activity:

1) Leadership and Strategic Direction

Elected members can use their authority and legitimacy to challenge extremist narratives in the community by building community trust and ultimately, community resilience. In this vein, they can work with individuals and the Local Authority to amplify counter messaging to those aiming to harm the community and misrepresent its values through extremism.

Council Leader

The council leader has overall responsibility for setting the strategic direction of Prevent in their area. As a figurehead for the local area, the Leader of the Council has responsibility for ensuring understanding of Prevent services and activities locally. By explaining Prevent's position in the context of wider safeguarding practices, the Leader can become best positioned to talk about Prevent as a vital means to protect people from those looking to harm vulnerable individuals and protect the local community's values. The Leader can also consider the risks, demands and resourcing of Prevent in the broader context of service delivery across the borough.

Portfolio Holder

The portfolio holder with responsibility for Prevent plays a vital role in the delivery of Prevent locally. They ensure that the local authority is fulfilling its statutory obligations in delivering the Prevent Duty, through holding to account officials and supporting those holders of related portfolios (for example, Children's Services or Health) to meet their responsibilities. The portfolio holder should seek to stay updated on the work of the multi-agency partnership boards with responsibility for the governance of Prevent. They can provide advice and insight into how Prevent should be delivered in line with the Council's strategic direction of travel.

2) Community Dialogue

As representatives of their local communities, Elected Members often understand the challenges, tensions and concerns facing the local area. This means that they are well positioned to listen to and raise community concerns, and to be identified as the public face of Prevent delivery for the area. This provides the opportunity for Elected Members to talk to communities openly about Prevent, to listen to their concerns, explain the duty and role of the Local Authority in protecting individuals, and help to raise awareness about referral mechanisms and supportive interventions.

Elected Members should have the confidence and knowledge to engage the community, address concerns and answer questions about Prevent in any forum. By acting as the point of contact between the community and council through ward surgeries, regular emails and general local visibility, Elected Members can help diffuse tensions and misconceptions about Prevent. In some areas, Elected Members chair regular Prevent Advisory Groups; regular community platforms that provide the public with opportunities to play a role in shaping local Prevent plans, plus forums for dialogue.

It is vital that Elected Members understand their local Prevent referral processes in order to give the best advice and assurance to vulnerable individuals, and to those concerned about those individuals. Given this, Elected Members can enhance the number and quality of Prevent referrals from the community allowing an increasing number of vulnerable individuals to be supported.

3) Scrutiny

Elected Members may also consider their role in providing transparency and accountability in delivering Prevent through formal scrutiny procedures. By holding to account the local delivery of Prevent, improvements can be made to implementation, and communities can be reassured by Increased transparency.

Elected Members have the opportunity to scrutinise the local implementation of Prevent as part of a Scrutiny Committee - these offer a continuous review and evaluation of local Prevent programmes.

RESOURCES AVAILABLE TO ELECTED MEMBERS

Elected Members should be able to access:

- A version of the local area's Counter Terrorism Local Profile (CTLP) and/or the risk assessment based on the CTLP. The CTLP is produced primarily by local counter-terrorism policing with input from the Local Authority and provides insight on the local threat picture. The risk assessment based on the CTLP can be more widely shared and should inform the Prevent Action Plan (see below).
- The Local Prevent Action Plan. This document is informed by the CTLP and outlines how Prevent is going to be delivered locally, including aspects such as Prevent projects, Channel and community engagement. This plan should reflect the risks highlighted in the CTLP and risk assessment.
- Prevent training delivered by Local Authority officials specifically for Elected Members. It is best practice that officials provide training opportunities to Elected Members on Prevent. This should not take the same format as WRAP training, which is used for statutory partners.
- Minutes of the multi-agency group responsible for Prevent. In some areas, Prevent may come under the Crime and Disorder group however, others have a group dedicated to Prevent work.

Case study: Luton – Elected Member

Luton Council's 'Member Prevent Engagement Group' (MPEG) provides Elected Member-led support, advice, challenge and scrutiny of the council's Prevent Board, which coordinates Prevent activity across Luton.

The MPEG is a sounding board on sensitive community issues linked to terrorism and radicalisation and as a conduit for direct and best practice on engagement with local people and institutions whilst being responsive to local and national requirements. The group is chaired by the Prevent Portfolio Holder and is made up of cross-party members.

MPEG's role is to:

- Advise on Prevent communications and engagement activity, including reviewing plans and messages.
- Participate in engagement on Prevent with local stakeholders.
- Help the Prevent Board to develop counter narrative messages against extremist rhetoric.
- Provide a focal point for Elected Members on Prevent, including support for training and development, as well as Member-Led scrutiny and challenge.

Priority Areas Only

Overview of Prevent Staff in the Local Authority

(Please fill this section in with a list of funded posts in the local area, who is occupying them and their contact details)

MYTHS AND MISCONCEPTIONS

There are widespread misconceptions surrounding Prevent. These myths do not reflect what the Prevent programme is or how it operates. Some common questions are outlined below:

Does the Prevent strategy target Muslims?

Prevent does not target a specific faith or ethnic group - it deals with all forms of terrorism, including right-wing. Rather, Prevent protects those who are targeted by terrorist recruiters. Although ring-wing terrorism is a growing threat, currently the greatest threat comes from terrorist recruiters inspired by Daesh and Al Qa'ida. Prevent will necessarily reflect this by prioritising support for vulnerable British Muslims.

Anyone who is at risk of any type of radicalisation can receive support from Channel. In 2018/19, almost half of those who were adopted as Channel cases were related to right-wing radicalisation, more than those related to Daesh and Al Qa'ida-inspired radicalisation.

Is Prevent doing enough to tackle right-wing extremism?

Prevent is implemented in a proportionate manner that takes into account the level of risk in any given area or institution. In some areas the risk of right-wing terrorism may be significant and Prevent activity will therefore focus on this threat – including protecting those most likely to be vulnerable to it. In 2018/19, 561 individuals were adopted as a Channel case. Of these, almost half were referred for concerns related to right-wing extremism.

Does Prevent encourage spying?

There is nothing in law, in the guidance, or in any form of training that requires, authorises, or encourages any form of spying whatsoever in connection with the Prevent Duty. The Prevent Duty does not require teachers to spy on pupils or to carry out unnecessary intrusion into family life. It is about ensuring that teachers know how to identify behaviour of concern and how to refer pupils who may be at risk of radicalisation for appropriate support.

Does being on the Channel programme mean you get a criminal record?

Being referred or supported by Channel is not any form of criminal sanction; Channel is a safeguarding programme and not a programme to further an investigation. It will have no bearing on a person's education or career prospects.

Isn't the Prevent Duty an attack on freedom of speech in universities?

The right to free speech and protest are cornerstones of British democracy, which the Government has committed to protecting. Universities in particular represent one of the most important arenas for challenging extremist views and ideologies. The Prevent strategy in no way, shape or form undermines this commitment.

In 2019, the Government published guidance to help protect and enhance free speech on campus, to ensure they remain forums for open and robust enquiry. The Prevent Duty explicitly requires further and higher education institutions to have regard to their duty to secure freedom of speech and to have particular regard to the importance of academic freedom.

GLOSSARY

Counter radicalisation – refers to the process of protecting vulnerable people from being drawn into terrorist related activity.

Extremism – is defined in the Prevent Strategy as vocal or active opposition to fundamental shared values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Interventions - projects intended to divert people who are being drawn into terrorist activity. Interventions can include mentoring, counselling, theological support, encouraging civic engagement, developing support networks (family and peer structures) or providing mainstream services (education, employment, health, finance or housing).

Islamism – this term refers to the interpretation of Islam as a utopian model of politics, law and society superior to any other model. Islamists - those that follow the ideology of Islamism - seek to overturn systems based on non-Islamist values, which they consider to oppose their political interpretation of divine law and theology. Islamism is a political ideology and it is wrong to equate it to the Islamic faith.

Radicalisation - refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Right-Wing Extremism – in the UK can be broadly divided into three strands;
- Cultural Nationalism is a belief that Western culture is under threat from mass migration into Europe and from a lack of integration by certain ethnic and cultural groups.
- White Nationalism is a belief that mass migration from the 'non-white' world, and demographic change, poses an existential threat to the 'white race' and 'Western culture'.
- White Supremacism is a belief that the 'white race' has certain inalienable physical and mental characteristics that makes it superior to other races.

Terrorism – an action (defined in the Terrorism Act 2000) that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use of the threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing political, religious or ideological cause.

Vulnerability - within Prevent, describes factors and characteristics associated with being susceptible to radicalisation.

FURTHER INFORMATION

Prevent: An Introduction - Home Office produced video explaining how Prevent works
https://www.youtube.com/watch?v=Otc2eaRY32s&feature=youtu.be

Prevent Duty Toolkit for Local Authorities and Partner Agencies
https://www.gov.uk/government/publications/prevent-duty-toolkit-for-local-authorities-and-partner-agencies

Prevent Duty Guidance for England and Wales
https://www.gov.uk/government/publications/prevent-duty-guidance

Channel Guidance
https://www.gov.uk/government/publications/channel-guidance

UK Counter-Terrorism Strategy
https://www.gov.uk/government/publications/counter-terrorism-strategy-contest-2018

Prevent E-Learning
https://www.elearning.prevent.homeoffice.gov.uk/edu/screen1.html

Freedom of Speech Guidance
https://www.gov.uk/government/news/free-speech-to-be-protected-at-university

Let's Talk About It – Counter Terrorism Policing website to provide practical help and guidance to the public in order to stop people becoming terrorists or supporting terrorism.
https://www.ltai.info/

Educate Against Hate - Department for Education and Home Office website giving teachers and parents advice and resources on protecting children from radicalisation.
https://educateagainsthate.com/

Safe Campus Communities - Provides access and links to a range of guidance, resources and case studies for the Higher Education sector.
https://www.safecampuscommunities.ac.uk/

Home Office

Audit and Governance Committee Forward Plan 2021

Date of Meeting	Item	Purpose / Key lines of Enquiry	Lead Councillor and Officer
9 July 2021			
	SWAP Audit Report SEND Transport	To consider the actions which have and are being taken forward in response to the audit.	Portfolio Holder – Cllr Andrew Parry / Cllr Ray Bryan Officer contact – John Sellgren / Matt Piles
	Annual Whistle Blowing Report	Annual Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre
	Corporate Complaints	Annual Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre
	Internal Audit Progress Report	Progress Report	Portfolio Holder – Cllr Spencer Flower Officer contact- Rupert Bamberger – SWAP Sally White - SWAP
	Quarterly Risk Management Update	Update Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre
	Prevent	Recommendation from the People & Health Overview Committee	Officer contact – Andy Frost – Service Manager for Community Safety

Date of Meeting	Item	Purpose / Key lines of Enquiry	Lead Councillor and Officer
9 August 2021- cancelled			
Date of Meeting	**Item**	**Purpose / Key lines of Enquiry**	**Lead Councillor and Officer**

27 September 2021			
	Quarterly Risk Management Update	Update Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre
	Internal Audit Progress Report	Progress report	Portfolio Holder – Cllr Spencer Flower Officer contact- Rupert Bamberger – SWAP Sally White - SWAP
	Constitution Changes – Notices of Motion	Recommendation to Council	Portfolio Holder – Cllr Spencer Flower Officer contact – Jonathan Mair
	Value for Money Report	Update report	Portfolio Holder – Cllr Peter Wharf Officer contact – Bridget Downton & Rebecca Forrester
	Agency Spending	Update report	Portfolio Holder – Cllr Peter Wharf Officer contact – David Macintosh
	Treasury Management Annual Review 2020/22	Annual Report	Portfolio Holder – Cllr Gary Suttle Officer contact – David Wilkes

Date of Meeting	Item	Purpose / Key lines of Enquiry	Lead Councillor and Officer
15 November 2021			
	Treasury Management Mid-Year Review 2021/22	Mid-Year Review	Portfolio Holder – Cllr Gary Suttle Officer contact – David Wilkes
Date of Meeting	**Item**	**Purpose / Key lines of Enquiry**	**Lead Councillor and Officer**
17 January 2022			
	Quarterly Risk Management Update	Update Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre
	Internal Audit Progress Report	Progress report	Portfolio Holder – Cllr Spencer Flower Officer contact- Rupert Bamberger – SWAP Sally White - SWAP
Date of Meeting	**Item**	**Purpose / Key lines of Enquiry**	**Lead Councillor and Officer**
21 February 2022			
Date of Meeting	**Item**	**Purpose / Key lines of Enquiry**	**Lead Councillor and Officer**
11 April 2022			
	Quarterly Risk Management Update	Update Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre
	Internal Audit Annual Report & Internal Audit Planning Report	Annual Report	Portfolio Holder – Cllr Spencer Flower Officer contact- Rupert Bamberger – SWAP Sally White - SWAP

	Annual Governance Statement	Annual Report	Portfolio Holder – Cllr Spencer Flower Officer contact – Marc Eyre

Other items raised by Audit and Governance Committee requiring further consideration

Issue	Notes	Date raised
Workforce stress / mental health issues	The committee have raised this as a potential area of work but note that it is linked to current transformation work	At committee on 7 November 2019
How Dorset Council holds and shares information	It is understood that some work is being undertaken in this area. A councillor workshop on the Dorset Council transformation programmes is being held on 10 January 2020. The suggestion is that councillors attend this session and following this, the committee give further consideration to whether any further work is required in this area	At committee on 7 November 2019
Schedule of debt	Jim Mcmanus agreed to produce a schedule of debt and the areas in the Capital Budget funded by borrowing.	At pre-meeting on 8 February 2021