

**Annual Assessment and Review Improvement Plan 2010**

**MERSEYSIDE WASTE DISPOSAL AUTHORITY**

**Assurance and evidence in support of the Authority's Annual Governance Statement**

**Objective 1 - Establishing Principal Statutory Obligations and Organisational Objectives  
Step 1: In support of objective 1 – Mechanism established to identify principal statutory obligations**

<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement (Referenced to Action Plan)</b>
<p>1. Responsibilities for statutory obligations are formally established</p>	<p>Procedural Rules and Scheme of Delegation. Appointment of Committees inc delegation and terms of reference. Job descriptions (inc. Statutory Officers) Organisational charts</p>	
<p>2. Record held of statutory obligations</p>	<p>Accessible record of statutory obligations produced through Annual Performance Plan Environmental Law and other legislative subscriptions Legal library held by Monitoring Officer</p>	<p>CG1 - Provision of Services Review (workstream within Operational Review)</p>
<p>3. Effective procedures to identify, evaluate, communicate, implement, comply with and monitor legislative change exist and are used</p>	<p>Management Structure ensures this through existing management processes Suitably qualified and experienced employees are appointed and selected against accurate and specific job descriptions and person specifications Induction Process for new staff Subscribed to receive electronic parliamentary updates to highlight forthcoming legislative changes</p>	<p>CG 2 - Continuous Professional Development of Statutory Officers</p>

Examples of assurance:	Evidenced by:	Areas of Improvement (Referenced to Action Plan)
	<p>Reports to Members where necessary on implications of changes to / new legislation.</p> <p>Corporate Training Programme and Member Training &amp; Development Plan</p> <p>Contract for Professional Legal Advice</p>	
<p>4. Effective action is taken where areas of non-compliance are found in either mechanism or legislation</p>	<p>Comments and Complaints System established to record and monitor service user satisfaction.</p> <p>Internal / External audit reports are reported to the Authority and action plans agreed.</p> <p>All Comment and Complaints reported to Management Team.</p> <p>Performance Management Framework</p> <p>Environmental Monitoring System</p>	

## Step 2: In support of Objective 1 – Mechanism in place to establish organisational objectives

<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
1. Consultation with stakeholders on priorities and objectives	<p>JMWMS Consultation.</p> <p>Development of Inter Authority Agreement.</p> <p>Communications Strategy</p> <p>Senior Officers Working Group and Sub Groups</p> <p>Stakeholder &amp; Community Liaison Plan (WMRC Contract)</p>	<p>CG 3 - Waste Management Recycling Contract (WMRC) – User Survey</p> <p>CG 4 - WMRC – Establishment of Stakeholder Liaison Panel</p> <p>CG 5 - Review of Joint Municipal Waste Management Strategy</p> <p>CG 6 - Signing of Inter Authority Agreement by all partners</p>
2. The authority's priorities and organisational objectives have been agreed (taking into account feedback from consultation).	<p>The Corporate Plan takes into account the European, National, Regional and Merseyside agenda in developing its aims and objectives.</p> <p>Consultation with the Merseyside Partnership and their plans used to inform the Authority's strategies and planning processes.</p> <p>Three year Corporate Plan reviewed during Annual Service Planning Process.</p> <p>Director's forward priorities set by Members</p>	<p>CG 5 - Review of Joint Municipal Waste Management Strategy</p> <p>CG 8 - Delivery of Operational Review</p>
3. Priorities and objectives are aligned to principal statutory obligations and relate to available funding	<p>The principal statutory obligations are currently recognised within the Corporate Plan and Annual Service Plans and executed through waste contracts with financial constraints recognised.</p> <p>Inter Authority Agreement defines partnership approach / responsibilities.</p> <p>The levy apportionment mechanism has been changed to one which is more tonnage based and better reflects</p>	<p>CG 5 - Review of Joint Municipal Waste Management Strategy (Review of funding principles)</p> <p>CG 7 - Annual review of Affordability Envelope</p>

	<p>the 'polluter pays' principle.</p> <p>Affordability envelope agreed with Merseyside District Councils</p>	
<p>4. Objectives are reflected in departmental plans and are clearly matched with associated budgets</p>	<p>The Authority's Corporate Plan is implemented through the Annual Service Plans which include key projects and how they contribute to Corporate Objectives.</p> <p>The Authority prepares three year budgets as part of its forward planning.</p>	<p>CG 9 - Review of Financial Instructions</p>
<p>5. The authority's objectives are clearly communicated to staff and to all stakeholders, including partners.</p>	<p>The Authority has an established performance management framework which sets out the Authority's vision, aims and objectives within its Corporate Plan which is published in its Annual Performance Plan.</p> <p>The Corporate Plan and Annual Service Plans used as part of the Staff Development process to illustrate a 'golden thread' approach.</p>	<p>CG 10 – Review of Performance Reporting</p> <p>CG 11 – Production of an Annual Merseyside and Halton Partnership Performance Report</p> <p>CG 12 - Annual Performance Report</p>

### Step 3: In support of objective 1 – Effective corporate governance arrangements are embedded within the authority

<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
<p>1. Code of corporate governance established</p>	<p>A Code of Corporate Governance in line with the CIPFA/SOLACE guidance relevant to the type of authority has been adopted by the authority.</p> <p>The Code is approved by Members on an annual basis and published on the Authority's website.</p> <p>Statutory Officers utilise subscription updates to keep track of changes to best practice framework.</p>	
<p>2. Review and monitoring arrangements in place</p>	<p>The Code itself incorporates a review process to ensure it remains up to date, implemented by the Primary Assurance Group (PAG).</p> <p>An annual report on compliance with the Code of Corporate Governance is prepared and submitted to members</p> <p>External auditors report on adequacy of corporate governance arrangements and internal auditors provide quality assurance.</p> <p>An action plan is prepared to address any significant identified weaknesses in complying with the Code and is monitored by the PAG</p>	
<p>3. Committee charged with governance responsibilities</p>	<p>The Authority is the body charged with governance responsibilities.</p> <p>An Audit and Governance Committee is formed each year to deal with governance issues in the absence of a full Authority Meeting. The Audit and Governance Committee has established delegations, terms of reference and reports its proceedings to the Authority.</p>	

<p>4. Governance training provided to key officers and all members</p>	<p>Induction training for new officers and all new members in place.</p>	<p>CG 2 - Continuous Professional Development of Statutory Officers</p>
<p>5. Staff, public and other stakeholder awareness of corporate governance</p>	<p>Principal documents including procedural rules are reviewed and circulated annually. Code of Corporate Governance and other key documents are published on the Authority's website. Employee Handbook incorporates procedural rules, etc which is reviewed annually.</p>	<p>CG 13 – Delivery of a Document Control Library CG 14 - Production of a Guide for MWDA Members</p>

**Step 4: In support of objective 1 – Performance management arrangements are in place.**

<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
<p>1. Comprehensive and effective performance management systems operate routinely</p>	<p>The Authority's Performance Management Framework identifies Key Performance targets through Corporate and Service Plans.</p> <p>Executive Management Team monitor performance through monthly management reports.</p> <p>Comparisons made on yearly, quarterly and monthly performance.</p> <p>Benchmarking takes place for key indicators</p> <p>Approved Data Quality Strategy.</p> <p>Waste Management Recycling Contract (WMRC) includes contractual performance monitoring.</p>	<p>CG 10 - Review of Performance Reporting</p> <p>CG 15 - Establish methodology for mass balance of waste inputs and outputs at MWDA facilities</p>
<p>2. Key performance indicators are established and monitored</p>	<p>Performance Indicators are produced in various formats for a variety of audiences including public documents.</p> <p>Performance Data User Group</p>	<p>CG 10 - Review of Performance Reporting</p>
<p>3. The authority knows how well it is performing against its planned outcomes</p>	<p>Quarterly reports published on website</p> <p>Internal and external auditor's reports on key performance indicators</p> <p>Quarterly budget monitoring reports are produced.</p> <p>External audit/agency reports on performance through WasteDataFlow.</p>	<p>CG 10 - Review of Performance Reporting</p>
<p>4. Knowledge of absolute and relative performances achieved is used to</p>	<p>JMWMS identifies key performance targets and monitoring reports are regularly produced.</p>	<p>CG 5 - Review of Joint Municipal Waste Management Strategy</p>

<p>support decisions that drive improvements in outcomes</p>	<p>Performance targets in subsequent corporate and service plans are revised in the light of actual performance</p> <p>Continuous improvement is strived for in the development of the Annual Service Plans and reported to the Executive Management Team.</p> <p>Performance targets and monitoring used to inform partnership working through Performance Data Group and Senior Officers Working Group.</p> <p>The performance management systems are regularly reviewed through the executive management team and updated to take account of organisational changes, audit recommendations and in terms of technology development.</p>	
<p>5. The authority continuously improves its performance management</p>		



<b>Step 1a – In support of Objective 1 - Apply the Six CIPFA/SOLACE Core Principles Focusing on the purpose of the authority and on outcomes for the community and creating and implementing a vision for the local area</b>		
<b>The code should reflect the requirements for local authorities to:</b>	<b>Source documents/good practice/other means that may be used to demonstrate compliance</b>	<b>Areas of Improvement</b>
1. develop and promote the authority's purpose and vision	Corporate Plan reviewed 2009 and Service Plans produced annually.  Corporate Training Programme	CG 5 – Review of Joint Municipal Waste Management Strategy  CG 16 – Continue to strengthen the Authority's role in District Local Strategic Partnerships  CG 17 - Delivery of a Member Workshop to review roles and responsibilities
2. review on a regular basis the authority's vision for the local area and its impact on the authority's governance arrangements	Corporate Plan is a three year plan but reviewed annually.  Service Plans produced annually and incorporate governance development through annual CG review.  Joint Municipal Waste Management Strategy	CG 5 – Review of Joint Municipal Waste Management Strategy  CG 17 - Delivery of a Member Workshop to review roles and responsibilities
3. ensure that partnerships are underpinned by a common vision of their work that is understood and agreed by all parties	Joint Municipal Waste Management Strategy  Inter Authority Agreements  Representation on boards (MWWHL, BML)  Merseyside & Halton Waste Partnership  Senior Officer Working Group  Annual Performance Plan	CG 5 – Review of Joint Municipal Waste Management Strategy  CG 6 - Signing of Inter Authority Agreement by all partners
4. publish an annual report on a timely basis to communicate the authority's activities and achievements, its financial		CG 12 - Annual Performance Report

position and performance (not police service)	Annual Statement of Accounts	
<p>5. decide how the quality of service for users is to be measured and make sure that the information needed to review service quality effectively and regularly is available</p>	<p>WMRC service measures including user surveys. Stakeholder &amp; Community Liaison Plan (WMRC Contract)</p> <p>Complaints System reporting and satisfaction surveys. Complaints Procedure</p> <p>Performance standards within current and future contracts.</p> <p>Performance Management Framework.</p> <p>Sustainable Procurement Policy</p> <p>Data Quality Strategy</p> <p>Environmental Monitoring System</p> <p>VFM Audit by District Auditor</p> <p>WMRC Service Delivery Plans identified annually</p> <p>Treasurer included in Chief Finance Officer Meetings</p>	<p>CG 3 - Waste Management Recycling Contract (WMRC) – User Survey</p>
<p>6. put in place effective arrangements to identify and deal with failure in service delivery</p>		
<p>7. decide how value for money is to be measured and make sure that the authority or partnership has the information needed to review value for money and performance effectively. Measure the environmental impact of policies, plans and decisions.</p>		<p>CG 18 - Value for Money Assessment</p>

<b>Step 2a – In support of Objective 1 - Apply the Six CIPFA/SOLACE Core Principles Members and officers working together to achieve a common purpose with clearly defined functions and roles</b>		<b>Areas of Improvement</b>
<b>The local code should reflect the requirements for local authorities to:</b>		<b>Source documents/good practice/other means that may be used to demonstrate compliance</b>
<p>1. set out a clear statement of the respective roles and responsibilities of the executive and of the executive's members individually and the authority's approach towards putting this into practice (this is not relevant for the police service)</p>	<p>Procedural Rules and Scheme of Delegation.</p> <p>Appointment of Lead Members / Portfolios and representations on other bodies.</p> <p>Member Training and Development Plan.</p>	<p>CG 14 - Production of a Guide for MWDA Members</p>
<p>2. set out a clear statement of the respective roles and responsibilities of other authority members, members generally and of senior officers</p>	<p>Procedural Rules and Scheme of Delegation.</p> <p>Job Descriptions</p>	<p>CG 14 - Production of a Guide for MWDA Members</p>
<p>3. determine a scheme of delegation and reserve powers within the constitution, including a formal schedule of those matters specifically reserved for collective decision of the authority taking account of relevant legislation and ensure that it is monitored and updated when required.</p>	<p>Scheme of Delegation.</p> <p>Statutory Instruments and Regulations.</p>	
<p>4. make a chief executive or equivalent responsible and accountable to the authority for all aspects of operational management</p>	<p>Job Descriptions and Service Plans.</p>	<p>CG 17 - Delivery of a Member Workshop to review roles and responsibilities</p>
<p>5. develop protocols to ensure that the leader and chief executive (or equivalent) negotiate their respective roles early in the relationship and that a</p>	<p>Member and Staff Induction.</p> <p>Member / Officer Protocol.</p>	

<p>shared understanding of roles and objectives is maintained</p>	<p>Chairman's Briefings. Director's Annual Appraisal</p>	
<p>6. make a senior officer (usually the section 151 officer) responsible to the authority for ensuring that appropriate advice is given on all financial matters, for keeping proper financial records and accounts, and for maintaining an effective system of internal financial control</p>	<p>Appointment of Treasurer to the Authority. Financial Procedural Rules AD – Finance Job Description</p>	<p>CG 9 - Review of Financial Instructions</p>
<p>7. make a senior officer (other than the Responsible Financial Officer) responsible to the authority for ensuring that agreed procedures are followed and that all applicable statutes, regulations are complied with</p>	<p>Appointment of Clerk to the Authority and Monitoring Officer – respective roles defined within Procedural Rules and Job Descriptions. Contract for Professional Legal Advice</p>	
<p>8. develop protocols to ensure effective communication between members and officers in their respective roles</p>	<p>Member/Officer protocol</p>	<p>CG 19 - Review of Member / Officer Protocol</p>
<p>9. set out the terms and conditions for remuneration of members and officers and an effective structure for managing the process including an effective remuneration panel (if applicable)</p>	<p>Member Allowance Scheme</p>	<p>CG 20 - Evaluation / Implementation of Staff Grading Review</p>
<p>10. ensure that effective mechanisms exist to monitor service delivery</p>	<p>Performance Management Framework WMRC Performance Arrangements including work of Compliance Officers Joint Municipal Waste Management Strategy</p>	
<p>11. ensure that the organisation's vision, strategic plans, priorities and targets</p>		<p>CG 5 – Review of Joint Municipal Waste Management Strategy</p>

<p>are developed through robust mechanisms, and in consultation with the local community and other key stakeholders, and that they are clearly articulated and disseminated</p>	<p>Statutory Performance Targets Senior Officer Working Group</p>	<p>CG 4 - WMRC – Establishment of Stakeholder Liaison Panel</p>
<p>12. when working in partnership ensure that members are clear about their roles and responsibilities both individually and collectively in relation to the partnership and to the authority</p>	<p>Joint Municipal Waste Management Strategy Inter Authority Agreements. Representation on Joint Boards. Project Plans, Statement of Funding and representation on Project Boards (NTDP and Procurement) Inter Authority Agreements Shareholders Agreement Senior Officer Working Group Terms of Reference Statutory Officer Roles</p>	<p>CG 14 – Production of a Guide for MWDA Members CG 16 - Continue to strengthen the Authority's role in District Local Strategic Partnerships</p>
<p>13. when working in partnership: - ensure that there is clarity about the legal status of the partnership - ensure that representatives or organisations both understand and make clear to all other partners the extent of their authority to bind their organisation to partner decisions.</p>	<p>Inter Authority Agreements Shareholders Agreement Senior Officer Working Group Terms of Reference Statutory Officer Roles</p>	<p>CG 6 - Signing of Inter Authority Agreement by all partners</p>

<b>Step 3a – In support of Objective 1 - Apply the Six CIPFA/SOLACE Core Principles Promoting values for the authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour</b>			
<b>The local code should reflect the requirements for local authorities to:</b>	<b>Source documents/good practice/other means that may be used to demonstrate compliance</b>	<b>Areas of Improvement</b>	
<p>1. ensure that the authority's leadership sets a tone for the organisation by creating a climate of openness, support and respect</p>	<p>Code of Conduct Performance Management Framework Staff Development Scheme HR Strategy</p>		
<p>2. ensure that standards of conduct and personal behaviour expected of members and staff, of work between members and staff and between the authority, its partners and the community are defined and communicated through codes of conduct and protocols</p>	<p>Member/Officer Protocol Officer Code of Conduct Antifraud and Corruption Strategy Communications Protocol Members Code of Conduct (at host Authorities) Declarations of Interest by Members (registered at host Authorities) Declarations of Interest by senior officers.</p>	<p>CG 21 - Review of the Authority's Anti Fraud and Corruption Strategy  CG 22 - Review of Internet and Email Policy</p>	
<p>3. put in place arrangements to ensure that members and employees of the authority are not influenced by prejudice, bias or conflicts of interest in dealing with different stakeholders and put in place appropriate processes to ensure that they continue to operate in practice</p>	<p>Procedural Rules Codes of Conduct and Declarations of Interest. Equality and Diversity Policy (Reviewed in 2009)</p>		
<p>4. develop and maintain shared values</p>	<p>Officer Codes of Conduct</p>		

<p>including leadership values both for the organisation and staff reflecting public expectations and communicate these with members, staff, the community and partners</p>	<p>(Reviewed in 2008) Host authority Codes of Conduct for Members collated Waste Management Recycling Contract Service Delivery Plans Codes of Conduct HR Strategy</p>	
<p>5. put in place arrangements to ensure that procedures and operations are designed in conformity with appropriate ethical standards, and monitor their continuing effectiveness in practice</p>		
<p>6. develop and maintain an effective standards committee</p>	<p>Members' Host Authority Standards Committees apply</p>	
<p>7. use the organisations shared values to act as a guide for decision making and as a basis for developing positive and trusting relationships within the authority</p>	<p>Performance Management Framework Intranet establishes effective communications. Annual Corporate Training Programme HR Policies</p>	
<p>8. in pursuing the vision of a partnership, agree a set of values against which decision making and actions can be judged. Such values must be demonstrated by partners' behaviour both individually and collectively.</p>	<p>Waste Management Recycling Contract Service Delivery Plans</p>	<p>CG 5 - Review of Joint Municipal Waste Management Strategy CG 6 - Signing of Inter Authority Agreement by all partners</p>

<b>Step 4a – In support of Objective 1 - Apply the Six CIPFA/SOLACE Core Principles Taking informed and transparent decisions which are subject to effective scrutiny and managing risk</b>		<b>Areas of Improvement</b>
<b>The local code should reflect the requirements for local authorities to:</b>	<b>Source documents/good practice/other means that may be used to demonstrate compliance</b>	
1. develop and maintain an effective scrutiny function which encourages constructive challenge and enhances the organisation's performance overall and of any organisation for which it is responsible.	Scrutiny function delivered through Scheme of Delegation  Authority meetings deliver the scrutiny function.	
2. have regard to relevant scrutiny committee reports of partner authorities where written notice requires the Authority's consideration.	Compliance with legislative requirements LGPIH Act 2007	CG 23 - Annual statement to district councils regarding scrutiny
3. develop and maintain open and effective mechanisms for documenting evidence for decisions and recording the criteria, rationale and considerations on which decisions are based	Scheme of Delegation and documented sub-delegations.  Key Decisions recorded in Authority minutes.  Agenda and minutes published on website.  Standardised template for Key Decision reports.  Forward Plan published monthly on website.  Standard format for Executive Decisions.  Executive Decisions published on website  Admin Decisions recorded  Access to Information Procedural Rules	



<p>4. put in place arrangements to safeguard members and employees against conflicts of interest and put in place appropriate processes to ensure that they continue to operate in practice</p>	<p>Members comply with their host authority's Code of Conduct  Copies of Members' registered interests collated  Anti Fraud and Corruption Strategy  Code of Conduct for Officers  Audit and Governance Committee Terms of Reference</p>	
<p>5. develop and maintain an effective audit committee ( or equivalent ) which is independent or make other appropriate arrangements for the discharge of the functions of such a committee</p>		
<p>6. put in place effective transparent and accessible arrangements for dealing with complaints</p>	<p>Comments and Complaints Procedure</p>	<p>CG 24 - Promotion of Comments and Complaints System</p>
<p>7. ensure that those making decisions whether for the authority or partnership are provided with information that is fit for the purpose – relevant, timely and gives clear explanations of technical issues and their implications.</p>	<p>Member Training and Development including Induction process.</p>	<p>CG 14 - Production of a Guide for MWDA Members  CG 25 - Production of a Report Writing Guide</p>
<p>8. ensure that professional advice on matters that have legal or financial implications is available and recorded well in advance of decision making and used appropriately</p>	<p>Financial and legal advice considered at Chairman's Briefings and relevant advice recorded within Authority reports.</p>	

<p>9. ensure that risk management is embedded into the culture of the organisation , with members and managers at all levels recognising that risk management is part of their job</p>	<p>Risk Management Strategy (Last Reviewed 2009)</p>	
<p>10. ensure that arrangements are in place for whistle blowing to which staff and all those contracting with the authority have access (In the police service "staff" includes the Chief Constable and those under the direction and control of the Chief Constable)</p>	<p>Whistleblowing Policy – included in Corporate Training</p>	
<p>11. actively recognise the limits of lawful activity placed on them by, for example the ultra vires doctrine but also strive to utilise powers to the full benefit of their communities</p>	<p>Constitution Monitoring officer provisions Statutory provision</p>	<p>CG 8 - Delivery of Operational Review</p>
<p>12. recognise the limits of lawful action and observe both the specific requirements of legislation and the general responsibilities placed on local authorities by public law</p>	<p>Legal / QC advice sought where appropriate and collated centrally.  Legislative monitoring through subscription service and officer research role.</p>	
<p>13. observe all specific legislative requirements placed upon them, as well as the requirements of general law, and in particular to integrate the key principles of good administrative law – rationality, legality and natural justice into their procedures and decision making processes.</p>	<p>Statutory Officer provisions Job Description / Person Specifications Statutory provision  Corporate Social Responsibility Policy</p>	

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<b>Step 5a – In support of Objective 1 - Apply the Six CIPFA/SOLACE Core Principles Developing the capacity and capability of members and officers to be effective</b>		<b>Areas of Improvement</b>
<b>The local code should reflect the requirements for local authorities to:</b>	<b>Source documents/good practice/other means that may be used to demonstrate compliance</b>	
1. provide induction programmes tailored to individual needs and opportunities for members and officers to update their knowledge on a regular basis	Staff Development Scheme including Training Plan Member Training and Development Plan including Induction Process HR Strategy Recruitment and Retention Strategy	
2. ensure that the statutory officers have the skills, resources and support necessary to perform effectively in their roles and that these roles are properly understood throughout the organisation	Job Descriptions / Person Specifications Performance Management Framework Staff Development Interview	CG 2 - Continuous Professional Development of Statutory Officers
3. assess the skills required by members and officers and make a commitment to develop those skills to enable roles to be carried out effectively	Staff Development Training and Development Plans for Officers and Members Corporate Training Programme Management Training Programme	CG 26 – Officer Skills Audit (Workstream within the Operational Review) CG 27 – Optimise use of Member skills / experience
4. develop skills on a continuing basis to improve performance including the ability to scrutinise and challenge and to recognise when outside expert advice is needed	Member Training and Development supports MWDA role. Wider Member training delivered by host authorities.	
5. ensure that effective arrangements are in place for reviewing the performance of the authority as a whole and of individual members and agreeing an action plan which might for example aim	Performance Management Framework linked to Corporate Plan and ultimately the Staff Development Scheme to identify training needs. PMF Reporting including monthly reports to executive	CG 10 - Review of Performance Reporting

to address any training or development needs	management team	
<p>6. ensure that effective arrangements designed to encourage individuals from all sections of the community to engage with, contribute to and participate in the work of the authority</p>	<p>Consultation Processes in relation to strategy development and sites and planning processes. WMRC Stakeholder and Community Liaison Advisory Panel</p>	<p>CG 4 - WMRC – Establishment of Stakeholder Liaison Panel</p>
<p>7. ensure that career structures are in place for members and officers to encourage participation and development</p>	<p>Staff Development Scheme HR Strategy Annual review of Member Training and Development Recruitment and Retention Strategy</p>	

<b>Step 6a – In support of Objective 1 - Apply the Six CIPFA/SOLACE Core Principles Engaging with local people and other stakeholders to ensure robust public accountability</b>		
<b>The local code should reflect the requirements to:</b>	<b>Source documents/good practice/other means that may be used to demonstrate compliance</b>	<b>Areas of Improvement</b>
1. make clear to themselves, all staff and the community, to whom they are accountable and for what	Consultation processes  Corporate Plan and Annual Performance Plan.	CG 5 – Review of Joint Municipal Waste Management Strategy  CG 16 - Continue to strengthen the Authority's role in District Local Strategic Partnerships
2. consider those institutional stakeholders to whom they are accountable and assess the effectiveness of the relationships and any changes required	Inter Authority Agreements and Joint Municipal Waste Management Strategy  Joint and Project Boards  Senior Officer Working Group and sub-groups  Engagement with regional boards	CG 16 - Continue to strengthen the Authority's role in District Local Strategic Partnerships
3. produce an annual report on scrutiny function activity	Scrutiny items considered by full Authority.  Scrutiny items reported on website	
4. ensure that clear channels of communication are in place with all sections of the community and other stakeholders including monitoring arrangements to ensure that they operate effectively	Communications Strategy  Complaints Procedure  Performance Management Framework  Stakeholder and Community Liaison Plan (WMRC Contract)  Member of each District Council's Local Strategic Partnership structure	CG 5 - Review of Joint Municipal Waste Management Strategy  CG 28 - Joint Communications Strategy

<p>5. Hold meetings in public unless there are good reasons for confidentiality.</p>	<p>Authority Meetings Access to Information Procedural Rules Papers published in public domain inc. website Procedural Rules</p>	
<p>6. ensure arrangements are in place to enable the authority to engage with all sections of the community effectively. These arrangements should recognise that different sections of the community have different priorities and establish explicit processes for dealing with these competing demands</p>	<p>Equality and Diversity Policy Translation Service Contract Specifications / Service Delivery Plans</p>	<p>CG 5 - Review of Joint Municipal Waste Management Strategy</p>
<p>7. establish a clear policy on the types of issues they will meaningfully consult on or engage with the public and service users including a feedback mechanism for those consultees to demonstrate what has changed as a result</p>	<p>Communications Strategy Authority and Contractual User Surveys Joint Municipal Waste Management Strategy Comments and Complaints Procedure Management Report includes comments and complaints monitoring. Site Acquisition Strategy inc. Planning WMRC User Surveys</p>	<p>CG 4 – WMRC – Establishment of Stakeholder Liaison Panel CG 5 - Review of Joint Municipal Waste Management Strategy</p>

<p>8. on an annual basis, publish a performance plan giving information on the authority's vision, strategy, plans and financial statements as well as information about its outcomes, achievements and the satisfaction of service users in the previous period.</p>	<p>Annual Performance Plan Statement of Accounts Budget Reports</p>	<p>CG 12 - Annual Performance Report</p>
<p>9. ensure that the authority as a whole is open and accessible to the community, service users and its staff and ensure that it has made a commitment to openness and transparency in all its dealings, including partnerships subject only to the need to preserve confidentiality in those specific circumstances where it is proper and appropriate to do so</p>	<p>Procedural Rules including Access to Information Procedural Rules Website provides access to information. Freedom of Information Publication Scheme Procurement Project Confidentiality Agreement</p>	<p>CG 29 – Review of Freedom of Information Scheme (against Information Commissioner’s Office Model) CG 30 - Develop Resource Recovery Contract Freedom of Information Clauses</p>
<p>10. develop and maintain a clear policy on how staff and their representatives are consulted and involved in decision making.</p>	<p>Performance Management Framework and Decision Making Process. Management representation on Staff Committee Health and Safety Committee Section and Staff Meetings</p>	



### Objective 2: Identify principal risks to achievement of objectives:

Step 1: In support of objective 2 – The authority has robust systems and processes in place for the identification and management of strategic and operational risk		
Examples of assurance:	Evidenced by:	Areas of Improvement
<p>1. There is a written strategy and policy in place for managing risk which:</p> <ul style="list-style-type: none"> <li>• Has been formally approved at political and risk management board (or equivalent) level</li> <li>• Is reviewed on a regular basis</li> <li>• Has been communicated to all relevant staff</li> <li>• Includes partnership risks</li> </ul>	<p>A Risk Management Strategy is in place which aligns corporate risks with the Corporate Plan and ultimately risk management at Service Plan and Key Project level.</p> <p>Corporate Risk Register reviewed and approved as part of the annual review of the Corporate Plan and Annual Service Plan process.</p> <p>Corporate Risk reviewed by SMT acting as risk management board</p>	<p>CG31 – Risk Management Policy and Strategy Review</p> <p>CG32 - Review of Procurement Risk Register Process</p>
<p>2. The authority has implemented clear structures and processes for risk management which are successfully implemented and:</p> <ul style="list-style-type: none"> <li>• Management board and elected members see risk management as a priority and support it by personal interest and input</li> <li>• Decision making considers risk</li> <li>• A senior manager has been appointed to “champion” risk management</li> <li>• Roles and responsibilities</li> </ul>	<p>Lead Member identified for Risk Management portfolio and risk management also included in officer job descriptions at appropriate levels.</p> <p>Key and Executive Decisions with options appraisal include risk analysis.</p> <p>Corporate Planning process is risk-based with Corporate Risk Register used to identify key risks to delivery of Corporate aims and objectives.</p> <p>Corporate Services Manager responsible for monitoring Risk Management Strategy.</p> <p>Risk management and analysis included within all levels of the Performance Management Framework.</p> <p>Link between internal audit and risk management functions is</p>	

<p>for risk management have been defined</p> <ul style="list-style-type: none"> <li>• Risk management systems are subject to independent assessment</li> <li>• Risk management is considered in the annual business planning process</li> <li>• Risk management extends to partnership risks</li> </ul>	<p>clearly defined in terms of reference of internal audit.</p> <p>Health and Safety Committee</p>	
<p>3. The authority has developed a corporate approach to the identification and evaluation of risk which is understood by all staff</p>	<p>Risk Management processes embedded in project management methodology to manage the projects identified to deliver Corporate and Service Plans.</p> <p>Employee Handbook includes a section on Risk Management</p> <p>Risk Management included in Corporate Training Programme</p>	

<p>4. The authority has well defined procedures for recording and reporting risk</p>	<p>Risk Management Strategy defines and embeds processes for managing risks at each level of the Performance Management Framework.</p> <p>Included and recorded in decision making processes (Key and Executive Decision templates include risk).</p> <p>Exceptions reporting to EMT</p>	
<p>5. The authority has well-established and clear arrangements for financing risk</p>	<p>Budget Report identifies financial coverage of future risks.</p> <p>Treasury management delivered by St Helens</p> <p>The Authority has regularly reviewed its risk financing and mitigation through meetings with its Insurance consultants</p> <p>All legal requirements for insurance are met</p> <p>Insurance claims are managed at St Helens MBC in accordance with their internal procedures and in accordance with current procedural rules</p> <p>Management Training Programme included risk management</p> <p>Project Management training includes risk.</p>	<p>CG 33 - Establishment of Service Level Agreement with St Helens MBC</p>
<p>6. The authority has developed a programme of risk management training for relevant staff</p> <p>7. The corporate risk management board (or equivalent) adds value to the risk management process by:</p> <ul style="list-style-type: none"> <li>• Advising and supporting corporate management team on risk strategies</li> <li>• Identifying areas of overlapping risk</li> <li>• Driving new risk</li> </ul>	<p>Health and Safety Committee includes risk.</p> <p>Risk reviews conducted by management and project teams.</p> <p>Internal Audit</p> <p>Environmental Management System Surveillance Process</p>	<p>CG 33 - Establishment of Service Level Agreement with St Helens MBC</p>

<ul style="list-style-type: none"> <li>• management initiatives</li> <li>• Communicating risk management and sharing good practice</li> <li>• Providing and reviewing risk management training</li> <li>• Regularly reviewing the risk register(s)</li> <li>• Coordinating the results for risk reporting</li> </ul>		
<p>8. A corporate risk officer has been appointed with the necessary skills to analyse issues and offer options and advice and:</p> <ul style="list-style-type: none"> <li>• Support decision making and policy formulation</li> <li>• Provides support in the risk identification and analysis process</li> <li>• Provides support in prioritising risk mitigation action</li> <li>• Provides advice and support in determining risk treatments</li> <li>• Inspires confidence in managers</li> </ul>	<p>Corporate Safety and Risk Officer in place (support service from St Helens) and a member of ALARM</p> <p>Risk Management included in officer job descriptions.</p>	<p>CG 33 - Establishment of Service Level Agreement with St Helens MBC</p> <p>CG 34 - Risk Management Training and Development</p>

<p>9. Managers are accountable for managing their risks</p>	<p>Job Descriptions reflect risk responsibilities</p> <p>Corporate Risk register identifies responsible officer.</p> <p>Managers report risk as part of EMT Exception Reporting</p> <p>Project Managers responsible for project risk management</p>	
<p>10. Risk management is embedded throughout the organisation</p>	<p>Risk Management embedded within Performance Management Framework and part of the Corporate and Service Planning process.</p> <p>Risk management included in the Authority's decision-making processes.</p>	
<p>11. Risks in partnership working are fully considered</p>	<p>Risks associated with JMWMS have been identified throughout its development and therefore joint working risks/opportunities considered. Control measures in place through the Inter Authority Agreement.</p> <p>The procurement project has a clearly developed risk management process and this highlights partnership working as a key risk/opportunity.</p> <p>JMWMS review includes risk assessment</p>	<p>CG6 - Signing of Inter Authority Agreement by all partners</p>
<p>12. Where employed, risk management information systems meet users' needs</p>	<p>EMT Exceptions reporting includes risk management.</p>	

**Objective 3: Identify and evaluate key controls to manage principal risks:**

<b>Step 1: In support of objective 3 – The authority has robust system of internal control which includes systems and procedures to mitigate principal risks</b>		
<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
<p>1. There are written financial regulations in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff:</p> <ul style="list-style-type: none"> <li>• Authority has adopted CIPFA code on Treasury Management</li> <li>• Compliance with the Prudential Code</li> </ul>	<p>Financial Procedural rules exist and approved / regularly reviewed by the Authority</p> <p>Financial procedures have been made available to all staff and incorporated into the Corporate Training Programme and induction process.</p> <p>Capital Strategy</p> <p>Asset Register</p> <p>Financial Instructions included within an Employee Handbook which is available to all staff.</p> <p>Contract Procedural Rules exist and approved / reviewed by the Authority</p> <p>Included within an Employee Handbook which is available to all staff.</p>	<p>CG9 - Review of Financial Instructions</p>
<p>2. There are written contract standing orders in place which have been formally approved, regularly reviewed and widely communicated to all relevant staff</p>	<p>Whistleblowing Policy and Procedure approved by Authority (3/2/06).</p> <p>Included within an Employee Handbook which is available to all staff and part of the Corporate Training Programme</p>	<p>Cg35 - Whistleblowing Policy Review</p>
<p>3. There is a whistle blowing policy in place which has been formally approved, regularly reviewed and widely communicated to all relevant staff</p>	<p>Anti-Fraud and Corruption Strategy approved by Authority (2/2/07). Timetabled for review in 2010.</p> <p>Included within an Employee Handbook which is available to all</p>	<p>CG21 - Review of the Authority's Anti Fraud and Corruption Strategy</p>
<p>4. There is a counter fraud and corruption policy in place which has been formally approved,</p>		

<p>regularly reviewed and widely communicated to all relevant staff</p> <p>5. There are codes of conduct in place which have been formally approved and widely communicated to all relevant staff</p>	<p>staff.</p> <p>Register of Gifts/Hospitality in use.</p> <p>A Code of Conduct for Authority employees exists – last reviewed and updated in 2008.</p> <p>All Authority employees have been issued with the Code of Conduct and it is part of the Corporate Training Programme, induction process and included in Employee Handbook.</p> <p>A Member / Officer Protocol was been approved by the Authority (19/3/04)</p>	<p>CG19 - Review of Member / Officer Protocol</p>
<p>6. A register of interests is maintained, regularly updated and reviewed</p>	<p>Members complete the register of interests at their host authority – copies collated at MWDA.</p> <p>Members declare any interest at each Authority meeting and is recorded accordingly.</p>	
<p>7. Where a scheme of delegation has been drawn up, it has been formally approved and communicated to all relevant staff</p>	<p>Registers included in Officer Code of Conduct</p> <p>Scheme of Delegation approved each year at Annual Meeting.</p> <p>Sub-delegations documented.</p> <p>Guidance on levels of delegation produced and circulated to relevant staff and within Member Induction Pack.</p> <p>Key Decisions formally minuted, Exec decisions recorded, Admin Decisions / Urgent Decisions recorded as appropriate.</p>	
<p>8. A corporate procurement policy has been drawn up, formally approved and communicated to all relevant staff</p>	<p>A Procurement Strategy has been approved for major waste contracts.</p> <p>Procurement Group established with Lead Member identified.</p> <p>Sustainable Procurement Policy approved by Members and action plan developed.</p>	

<p>9. Business/service continuity plans have been drawn up for all critical service areas and the plans:</p> <ul style="list-style-type: none"> <li>• Are subject to regular testing</li> <li>• Are subject to regular review</li> </ul>	<p>Capital Strategy in place.</p> <p>Sustainable Procurement recognised in relevant job descriptions. Key services are delivered through contracts and continuity plans need to be addressed within contractual arrangements.</p> <p>ICT Strategy addresses data recovery arrangements.</p> <p>Environmental Monitoring System includes compliance audits</p>	<p>CG36 - Business Continuity Plan Implementation</p>
<p>10. The corporate/departmental risk register(s) includes expected key controls to manage principal risks</p>	<p>Corporate Risk register sets out principal risks and sets out key controls</p> <p>Corporate Risk Register and controls are reviewed as part of the Corporate Plan review annually to identify projects to reduce / mitigate risk.</p> <p>Service Plans reported to EMT monthly and include review of risks.</p> <p>Environmental Monitoring System</p>	
<p>11. Key risk indicators have been drawn up to track the movement of key risks and are regularly monitored and reviewed.</p>	<p>Corporate risks are reviewed annually and projects identified to mitigate and control risks are monitored through the PMF.</p> <p>Project Risks are managed through the life of the project. The Procurement Project in particular is closely managed.</p> <p>Risk Management Strategy specifies risk analysis criteria.</p> <p>Internal Audits based on risk.</p> <p>Annual audit undertaken and report/opinion by Chief Internal Auditor.</p> <p>External audits undertaken by Audit Commission including risk-based audit plan, published reviews and annual letter submitted to Members at full Authority meeting or Audit and Governance Committee where appropriate</p>	<p>CG10 – Review of Performance Reporting</p> <p>CG32 - Review of Procurement Risk Register Process</p>
<p>12. The authority's internal control framework is subject to regular independent assessment</p>		



	<p>Assessment of Internal Audit by External Auditor</p> <p>ISO 14001 Audits</p> <p>Subject to Environment Agency Inspections</p> <p>Internal Audit review corporate governance systems review (last audited 2009)</p> <p>An approved Health and Safety Policy exists.</p> <p>Included within an Employee Handbook which is available to all staff.</p>	
<p>13. A corporate health and safety policy has been drawn up, formally approved, is subject to regular review and has been communicated to all relevant staff</p>		<p>CG37 - Health and Safety Policy Review</p>
<p>14. A corporate complaints policy/procedure has been drawn up, formally approved, communicated to all relevant staff, the public and other stakeholders is regularly reviewed</p>	<p>An approved Comments and Complaints Policy and Procedure exists.</p> <p>Procedure is available on the Authority's website, or upon request and is advertised through the Authority's contractor at HWRC's.</p> <p>User surveys undertaken to inform complaints process.</p> <p>Complaints reported within EMT Exceptions Reports.</p> <p>Contractual Complaints Reporting</p>	<p>CG24 - Promotion of Comments and Complaints System</p>

**Objective 4: Obtain assurance on the effectiveness of key controls:**

Examples of assurance:	Evidenced by:	Areas of Improvement
<p><b>Step 1: In support of objective 4 – Appropriate assurance statements are received from designated internal and external assurance providers:</b></p> <ul style="list-style-type: none"> <li>• The authority has identified appropriate sources of assurance</li> <li>• Appropriate external assurances are identified and obtained</li> </ul>	<p>Director's Assurance Statement – informed by PAG</p> <p>Internal Audit (provided by St Helens MBC service level agreement – Corporate Governance audited in 2009)</p> <p>External Audit provided by Audit Commission</p> <p>Environment Agency for environmental works</p> <p>Statement of Assurance obtained from Mersey Waste Holdings Limited and Bidston Methane Limited</p> <p>Environmental Monitoring System audited internally with external assessment to maintain ISO 14001 accreditation.</p> <p>Employee Handbook contains approved procedures and policies.</p> <p>Code of CG Action Plans implemented and monitored by the Primary Assurance Group (PAG).</p> <p>Environmental Monitoring System control mechanisms</p> <p>Director's meeting with PAG to challenge/confirm assurances.</p>	<p>CG33 - Establishment of Service Level Agreement with St Helens MBC</p>
<p>2. Appropriate key controls on which assurance is to be given have been identified and agreed</p>	<p>Single service authority therefore para 1 above provides sufficient controls.</p>	
<p>3. Departmental assurances are provided</p>	<p>Audit reports submitted to Authority and Action Plans approved.</p>	<p>CG10 – Review of Performance Reporting (to include audit/inspection outcomes)</p>
<p>4. External assurance reports are collated centrally</p> <ul style="list-style-type: none"> <li>• Reports are reviewed by</li> </ul>		

<p>relevant senior management team and reported to appropriate committee</p> <ul style="list-style-type: none"> <li>Action plans are prepared and approved as appropriate</li> <li>Follow up reports on recommendations are requested and reviewed by relevant senior management team and progress is regularly reported to relevant committee</li> </ul>		
<p>5. Internal Audit Arrangements</p>	<p>Provided by St Helens MBC</p>	<p>CG33 - Establishment of Service Level Agreement with St Helens MBC</p>
<p>6. Corporate Governance Arrangements</p>	<p>Corporate Governance reviewed by Audit Commission annually.</p>	
<p>7. Performance monitoring arrangements.</p>	<p>Quarterly Performance Reports published on website and circulated to key stakeholders.</p> <p>Monthly Management Team performance reports produced.</p> <p>Environmental performance reported to Senior Officers Working Group.</p> <p>Budget Monitoring reports produced and published</p> <p>Performance reviewed at Executive Management Team meetings, Senior Officers Working Group</p>	<p>CG10 - Review of Performance Reporting</p>

### Objective 5: Evaluate assurances and identify gaps in control/ assurances:

Step 1: In support of objective 5 – The authority has made adequate arrangements to identify, receive and evaluate reports from the defined internal and external assurance providers to identify areas of weakness in controls		Areas of Improvement
Examples of assurance:	Evidenced by:	
<p>1. Responsibilities for the evaluation of assurances are clearly defined throughout the organisation.</p>	<p>Primary Assurance Group established.</p> <p>All internal and external audit reports agreed with the Director / Assistant Directors where appropriate.</p> <p>Lead Member for Audit consulted where appropriate.</p> <p>Action Plans identify responsible officers.</p>	
<p>2. Mechanism established for collecting governance assurances</p> <ul style="list-style-type: none"> <li>• Overall responsibility allocated to governance senior officer group</li> <li>• Required assurances are agreed and recorded</li> <li>• Central record of all assurances (either evidence file, or showing clear link to where evidence is held)</li> <li>• Clear guidance as to evaluation procedure including assurance over risks, independence and objectivity of assurances</li> <li>• Defined evaluation mechanism</li> <li>• Timetable for completion by statutory deadline</li> <li>• Gap assessment – performed and challenged</li> </ul>	<p>Terms of Reference established for Primary Assurance Group.</p> <p>Findings of PAG Annual Assessment considered by Director and the Authority</p>	<p>CG38 - Assistant Director Job Description update in relation to responsibilities for inspections and audits</p>

**Objective 6: Action plan to address weaknesses and ensure continuous improvement of the system of corporate governance:**

<b>Step 1: In support of objective 6 – There is a robust mechanism to ensure that an appropriate action plan is agreed to address identified control weaknesses and is implemented and monitored</b>		
<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
1. An action plan is drawn up and approved	A PAG Action Plan is produced annually and is approved by the Authority.	CG38 - Assistant Director Job Description update in relation to responsibilities for inspections and audits
2. All actions are 'SMART': <ul style="list-style-type: none"> <li>• Specific</li> <li>• Measurable</li> <li>• Achievable</li> <li>• Realistic</li> <li>• Time-bound</li> </ul>	Each action compliant with 'SMART' test	
3. Actions communicated and responsibilities assigned	Responsibilities for each action identified	CG39 - Senior Management Team Meeting to discuss implementation of Corporate Governance Action Plan
4. Implementation timescales agreed	Timescales for each action identified in action plan	
5. Ongoing review of progress and of continuing appropriateness of action	Monitored through PAG	

**Objective 7: Annual Governance Statement:**

<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
<p>1. Responsibility for the compilation of the Annual Governance Statement has been assigned</p>	<p>Primary Assurance Group (PAG) Terms of Reference.</p>	
<p>2. There is an Annual Governance Statement production timetable that meets the statutory deadline</p>	<p>Annual Governance Statement approval included in Forward Plan.</p>	
<p>3. The Annual Governance Statement is reviewed, challenged and approved by the authority</p>	<p>Annual Governance Statement reported by PAG to Director and considered by the Authority.</p>	
<p>4. Governance assurance statement is prepared, incorporating all the required elements of the statement on internal control</p>	<p>Format of governance assurance statement clearly incorporates required elements of the statement on internal control, is prepared by PAG and delivered within statutory deadlines.</p>	

**Step 1: In support of objective 7 – An Annual Governance Statement has been drafted in accordance with the statutory requirements and timetable set out in the Accounts and Audit Regulations 2003, as revised by the Accounts and Audit (Amendment) (England) Regulations 2006, and is in accordance with CIPFA guidance.**

**Objective 8: Report to cabinet / executive committee:**

<b>Examples of assurance:</b>	<b>Evidenced by:</b>	<b>Areas of Improvement</b>
1. Responsibility for reporting is clearly defined	Contained within Code of Corporate Governance and PAG Terms of Reference.	
2. The signatories to the annual governance assurance statement and SIC are defined and are appropriate in accordance with statutory requirements (i.e. Most senior officer and most senior member of the organisation)	Director and Chairman sign Annual Governance Statement.	
3. The report is likely to be published in a timely fashion with the statutory accounts	Approval to statement sought prior to the approval of the Statement of Accounts.	