Performance Management Assurance from KLOEs Compliance with Planning & Performance Management Framework Target performance levels to deliver Council Plan Effective performance management Accountability for performance Use of benchmarking Actual performance levels achieved Progress of transformation programme 2nd Line 3rd Line 1st Line Positive assurance Positive assurance Monthly report to Corporate Leadership Team on 37 key Council-wide service No recent assurance available Planning & Performance Most recent Internal Audit Report and strategic performance measures Management Framework was in on performance management: operation and complied with in May 2016: Not classified Medium Risk 2018/19 REASONABLE ASSURANCE Actions in place/under observation 21% Corporate Directors' Annual **Assurance Statements** Performance management No/Low Risk & benchmarking processes 65% quarterry reporting or children's & rannies bepartinent core data sets to service **Assurance** Dept committee Level Better than Neutral Not Worse than **ASCPH** Substantial Benchmark Benchmark compared to benchmarked C&F Substantial benchmark Place Reasonable 19 10 3 20 Chief Exec's Substantial Use of benchmarking to drive improvement: > ASCPH department using a report (Feb 2019) to its Transformation Team on priority initiatives where CIPFA comparative councils are doing well - to be used as a basis for contacting and learning from those councils

> Stakeholder engagement to

Performance Management Assurance from KLOEs Compliance with Planning & Performance Management Framework Target performance levels to deliver Council Plan Effective performance management Accountability for performance Use of benchmarking Actual performance levels achieved Progress of transformation programme 1st Line 2nd Line 3rd Line inform change proposals > Similar report is being used in C&F Department Dept Assurance Level **ASCPH** Substantial Mixed assurance C&F Substantial Place Substantial Half-Yearly Reports to the Improvement & Change Subcommittee on the Council Chief Exec's Substantial Plan, covering 65 measures > Use of core business systems Not applicable Not Clear 2% 7% for performance information Meeting Target 25% Dept Assurance Level **ASCPH** Reasonable C&F Substantial Place Substantial Not Meeting No Target Chief Exec's Substantial Target 48% 18% Quarterly reporting of Adults Social Care & Public Health Department and Place

Performance Management Assurance from KLOEs

Compliance with Planning & Performance Management Framework Effective performance management

Use of benchmarking

Target performance levels to deliver Council Plan Accountability for performance Actual performance levels achieved

Progress of transformation programme 2nd Line 3rd Line 1st Line Department core data sets to service committees: **ASCPH** Place Meeting Not Meeting Target Not Meeting Not Meeting Target Not Target Target set Target Target set 10 1 10 9 13 Scope to make improved use of benchmarking tools as part of routine, corporate performance reporting Evidence showing no or limited assurance Quarterly reporting of Chief Executive's Department core data set to service committees: data not consolidated in one place - reported to different committees department transitioned from former Resources Department in 2018/19 first strategy for new department was being finalised for implementation in 2019/20 and will incorporate a new operating model. PIP Team reports on data quality but no assurance on how they are used by the business e.g. for Mosaic (Adult Social Care records system) a General Data Quality report identified 4,785 issues (e.g. missing or incompatible fields). Greater priority is to be given to these issues in 2019/20.

Developments in 2019/20:

Performance Management Assurance from KLOEs

Compliance with Planning & Performance Management Framework Effective performance management Use of benchmarking

Target performance levels to deliver Council Plan Accountability for performance Actual performance levels achieved

Progress of transformation programme

1 st Line	2 nd Line	3 rd Line
 Refreshed Planning & Performance Management Framework Simplified service planning template 	 Implementation of a hierarchy approach to performance measures to clarify progress reporting against the Council Plan Revised arrangements for quarterly reporting of progress against the Chief Executive's Department strategy Revised arrangements for monthly performance board reporting in the Place and Chief Executive's Departments Co-ordinate CIPFA benchmarking reports and consider its use within the performance management framework, along with other benchmarking tools (eg CFO Insights) Greater priority to be given to addressing data quality issues in Mosaic 	Internal audit of service planning & performance management

Risk Management Assurance from KLOEs

Risk management strategy & framework Established risk appetite Risk mitigation actions carried out Exposure to significant risks is minimised

National, regional and local horizon scanning Risk registers maintained Focus on high priority risks

Risk management informs key decision-making Prompt actions taken where risks materialise 3rd Line 1st Line 2nd Line Positive assurance Positive assurance Positive assurance ➤ Risk Management Framework > Risk, Safety and Emergency Management Board (RSEMB) met quarterly and Internal audit review of risk was in operation and covered key risk issues management (Sep 2017) complied with in 2018/19 Corporate risk register maintained up to date for 11 key risks—latest position ☑ Risk Management Strategy on inherent, current and residual risk shows demonstrates active management & Framework approved by REASONABLE ASSURANCE **Governance & Ethics** Inherent Current Residual Committee (March 2018) ☑ Risk Management Policy Implementation of agreed actions: approved by Policy **Priority 1 Priority 2** Committee (May 2018) Actioned 2 2 In 3 ➤ Risk, Safety & Emergency progress Management Groups (RSEMGs) in operation > Internal audit review of Health & > Regular updates to Corporate Leadership Team on the work of RSEMB > Appropriate insurance cover Safety (May 2018) in place during 2018/19 > 6-monthly updates on risk management to Governance & Ethics Committee > Corporate Risk Team active in REASONABLE ASSURANCE responding to significant incidents > Active participation in the Local Resilience Forum for Nottinghamshire - 57

Risk Management Assurance from KLOEs Risk management strategy & framework National, regional and local horizon scanning Established risk appetite Risk registers maintained Risk mitigation actions carried out Risk management informs key decision-making Exposure to significant risks is minimised Focus on high priority risks Prompt actions taken where risks materialise 3rd Line 1st Line 2nd Line Corporate Directors' Annual risks managed, with the following risk ratings: **Assurance Statements Priority 1** Priority 2 60 Actioned 3 > Corporate risk register 3 1 50 30 progress mitigations carried out 40 Assurance Dept > External health & safety reviews Level 30 by BSI on 6 aspects of H&S **ASCPH** Substantial C&F Substantial 20 Place Substantial Chief Exec's Substantial 10 Low Medium High Very High Opportunity for Improvement > Internal Health & Safety inspections In 2018/19 internal audit inspections were carried out at 12 Council sites and 80 > Care Quality Commission report schools. These identified 29 'Major Nonconformities', and follow-up activity has on Start Service in Broxtowe/ confirmed that corrective actions for 21 of these have already been Gedling/Rushcliffe (Dec 2018) implemented. ✓ 'Good' rating > Periodic review by Council's Annual Review of Health & Safety report to Policy Committee – due May

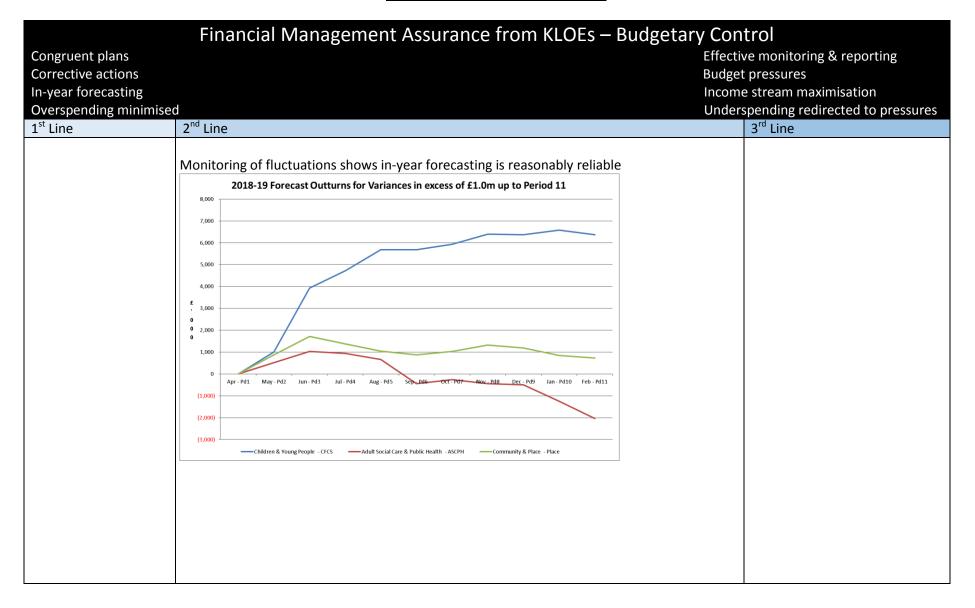
Risk Management Assurance from KLOEs

Risk management strategy & framework Established risk appetite Risk mitigation actions carried out Exposure to significant risks is minimised National, regional and local horizon scanning Risk registers maintained Risk management informs key decision-making Focus on high priority risks

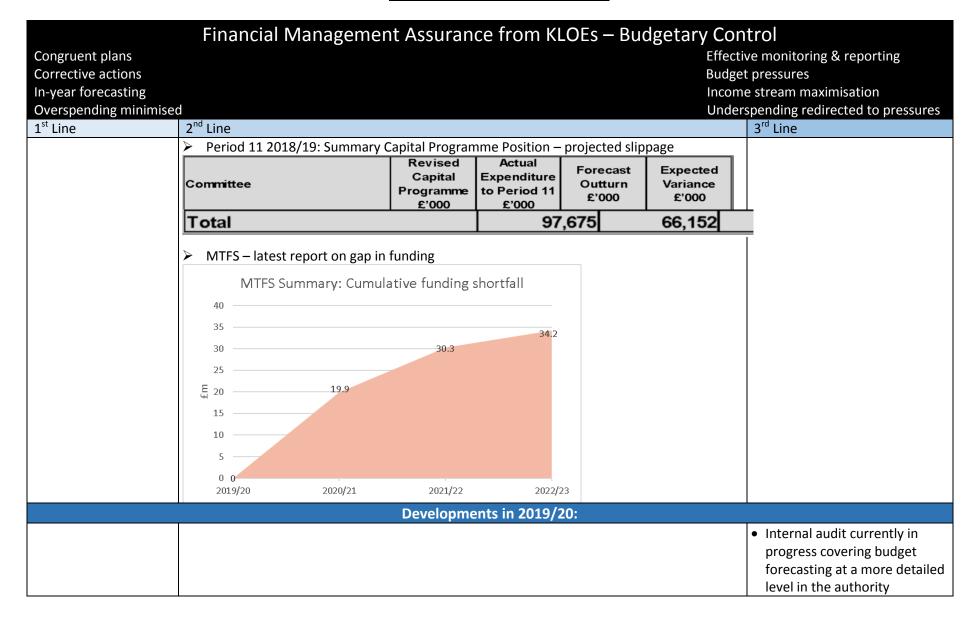
	ant risks is minimised Focus on highen where risks materialise	n priority risks
1 st Line	2 nd Line	3 rd Line
	2019	insurer 7 property reviews in 2018 with following issues identified:
	Evidence showing no or limited assurance No established procedure to determine the Council's corporate risk appetite	Advisory 3 Important 18 Critical 0
		Actions are assigned timescales for implementation. ➤ Motor Fleet Risk Audit Report 2018/19
		✓ Overall standard of general flee management rating: 'Very Good'
		Evidence showing actions in progress to address

Risk Management Assurance from KLOEs Risk management strategy & framework National, regional and local horizon scanning Established risk appetite Risk registers maintained Risk mitigation actions carried out Risk management informs key decision-making Exposure to significant risks is minimised Focus on high priority risks Prompt actions taken where risks materialise 3rd Line 1st Line 2nd Line recent concerns > Internal audit review of vacant property management (Mar 2018) Limited assurance Progress with implementation of the agreed recommendations (8 Priority 1 & 7 Priority 2) is being monitored by the Governance & Ethics Committee. Developments in 2019/20: • Development of an approach to establishing the Council's risk appetite Governance & Ethics Committee will receive a further progress report on vacant property management in July 2019

Financial Management Assurance from KLOEs – Budgetary Control Congruent plans Effective monitoring & reporting Corrective actions **Budget pressures** In-year forecasting Income stream maximisation Overspending minimised Underspending redirected to pressures 3rd Line 1st Line 2nd Line Positive assurance Positive assurance Positive assurance > Close in-year budget monitoring and reporting – monthly financial monitoring report to Corporate Directors' **Annual Assurance** the Finance & Major Contracts Management Committee Internal audit of budgetary control and forecasting (Feb Statements ➤ Balanced budget agreed for 2019/20: The Council is raising £344.1m in 2019/20 from Council Tax. 2018) ➤ Budgetary control The Government is providing £117.6m from local government grants processes carried Where the money comes from How the money is spent out £ 4.4m £63.1m £ 175.1m Running the Council SUBSTANTIAL ASSURANCE Local Government Grant Other Government Community and Dept **Assurance** place services Level £356.1 m £103.1m £25.7m Adult Social Care ASCPH Substantial Charges for Adult Social and Public Health Care Precept C&F Substantial Place Substantial £344.1m £321.1m Council Chief Substantial Dedicated Schools Grant Exec's & Other School Grants Grant £ 163.6 m Children and £40m £ 321.1 m £5.6m **Public Health Grant** Young People Use of Reserves Schools Compliance with forecasting system - % budget lines approved without intervention



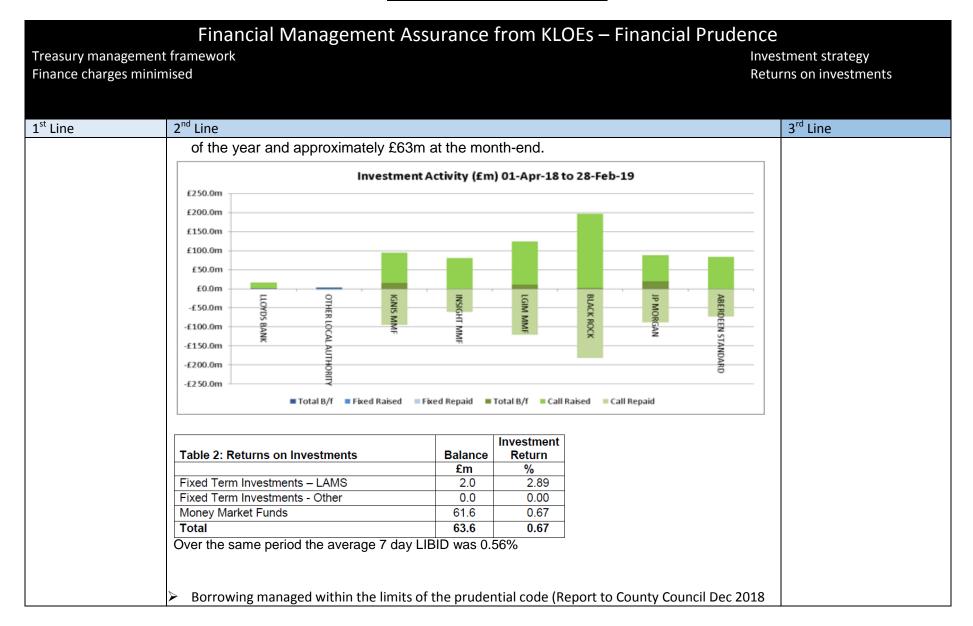
	Financial Management Assurance from KLOEs – Budgetary Control								
Congruent plans	Effective monitoring & reporting								
Corrective actions	Budget pressur						pressures		
In-year forecasting								Income	e stream maximisation
Overspending minimise	d							Unders	spending redirected to pressures
1 st Line	2 nd Line								3 rd Line
		od 11 20:	showing current level of bud 18/19: Summary Revenue Positio	_	llenge				
	Variand as at Period 1	Comn	nittee	Annua Budge £'000	t Peri	ual to iod 11 000	Year-End Forecast £'000	Latest Forecast Variance £'000	
	5	,682 Ne	t County Council Budget Requir	ement	481	,230	431,270	486,75	6
	> Deta	iled focu	s on the most volatile budgets– i	reactive	and den	nand le	d budgets		
	Previous forecast Variance	Change in forecast	Department		Annual Budget	Actual t Period 1		I Forecast I	
	£000	£000			£000	£000	£ 000	£000	
	C&YP Cor	<u>mmittee</u>	•						
	6,689		Total "Volatile Budgets"		37,416	37,2	_		
	(112)	(283)	All Other Budgets		83,973	76,2	24 83,57	8 (395)	
	6,577	(211)	Forecast prior to use of reserves		121,389	113,43	36 127,75	6,366	
	ASC&PH Committee					_			
	461	(831)	Total "Volatile Budgets"		174,03	8 151,	,681 173,6	668 (370)
	(1,709)	(337)	All Other Budgets		28,82	_	,481 27,1	_	→
	(1,248)	(1,168)	Overall Forecast prior to use of reserve	s	202,86	6 174,	,162 200,8	331 (2,035)

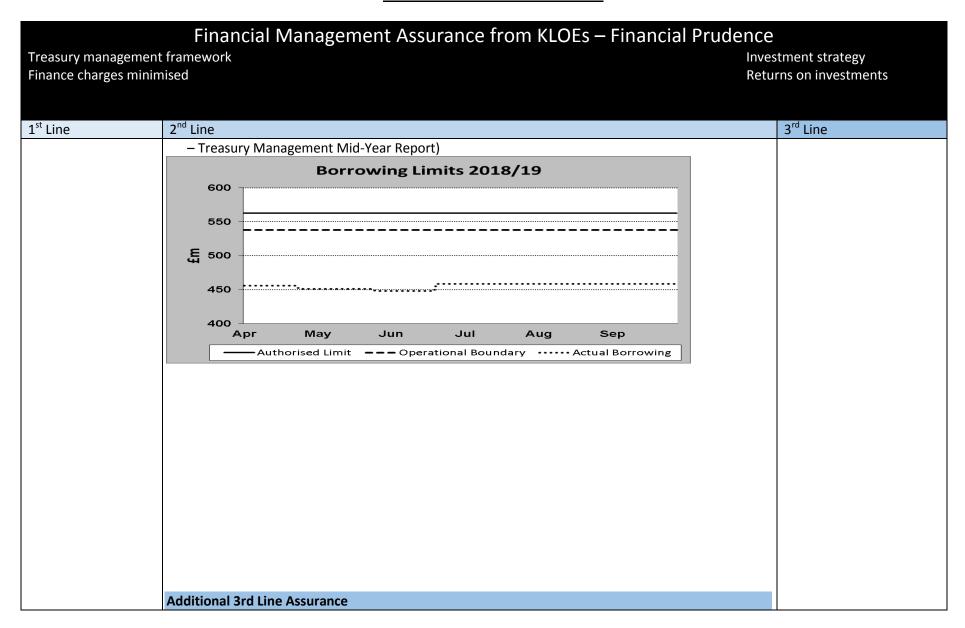


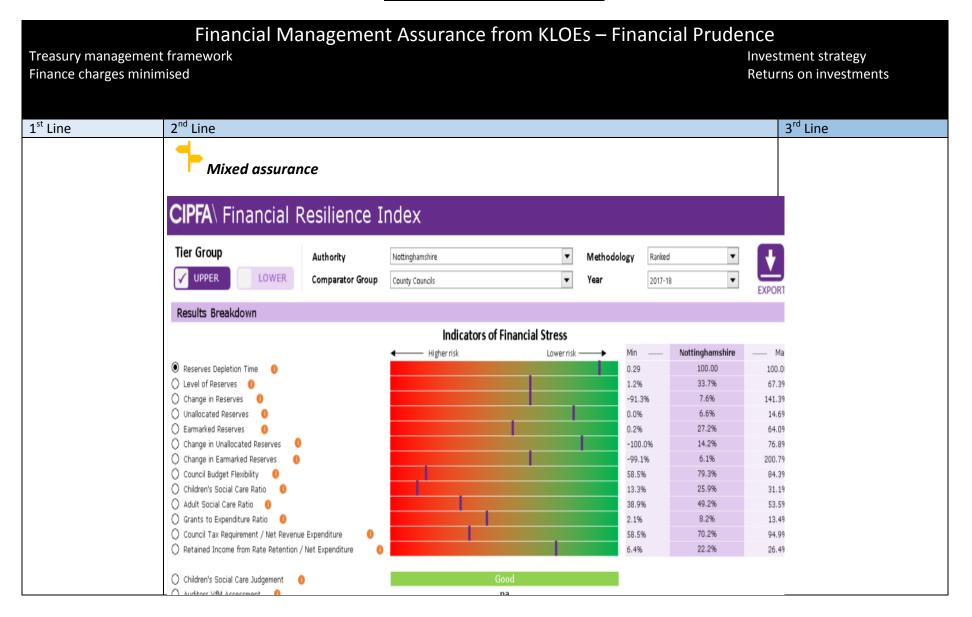
Financial Management Assurance from KLOEs – Financial Compliance				
Compliance with budget holder 1 st Line	duties Fir 2 nd Line	nancial Regulations compliance 3 rd Line		
1 Line	Z Line	3 Line		
Positive assurance Corporate Directors' Annual Assurance Statements ➤ Compliance with Financial Regulations	 Positive assurance The Chief Executive's Department is comprised of a range of professional staff delivering routine and ad hoc advice to other managers and Councillors. An important focus of this input is to assist the organisation in complying with internal and statutory regulations. Financial, constitutional and HR-related comments are provided for all 	Positive assurance ➤ Chief Internal Auditor (Group Manager – Assurance) provides a rolling 12-month opinion of the adequacy of the Council's system of internal control, governance		
Dept Assurance Level ASCPH Substantial C&F Substantial Place Substantial Chief Exec's Substantial	committee reports as a matter of routine. Financial Control Statement - reported monthly within the Chief Executive's Department, to provide a focus on a range of compliance issues. The latest evidence available from the period 11 report is summarised as follows: ✓ Effective use of accounting procedures - Control applied over accounting code maintenance - % budget lines <£1,000 − 27% - % virement lines <£1,000 − 24% - % journal transfer values posted to direct pay codes − 0.17% of debit values & 0.14% of credit values - % journal transfer lines <£100 − 63%	and risk. The latest opinion was provided to the Governance & Ethics Committee in March 2019. *a satisfactory level of internal control continues to be in operation in the Council.'		

Financial Management Assurance from KLOEs – Financial Compliance			
Compliance with budget holder d	uties Fi	nancial Regulations compliance	
1 st Line	2 nd Line	3 rd Line	
	- Low number and value of open invoices and invoices entered over 30		
	days		
	✓ Monitoring of sales ledger debt		
	- % of total outstanding debt over 6 months old (by value) – 23%		
	✓ Bad and doubtful debts monitoring		
	- The number and value of write-offs is not excessive		
	√ Payroll monitoring		
	- Total value of net pay – regular monthly pattern		
	- Low number and value of net pay advances		
	√ Payovers monitoring		
	- Statutory payovers (tax, national insurance, statutory maternity pay,		
	etc) are up to date		
	✓ <u>VAT issues</u>		
	- No significant issues have arisen		
	✓ <u>Capital issues</u>		
	- No significant issues have arisen		
Developments in 2019/20:			
	• Consider options to reduce the number of journals for transfers under £100, to		
	maximise efficiency		

Financial Management Assurance from KLOEs – Financial Prudence Treasury management framework Investment strategy Finance charges minimised Returns on investments 1st Line 2nd Line 3rd Line Positive assurance Positive assurance Positive assurance 1st Line staff provide > Strong compliance with the Council's Treasury Management Strategy, as reported to the Finance Internal audit of assurance that the & Major Contracts Monitoring Committee each month. treasury management Council's Treasury (Oct 2018) Management Effective cashflow management (March 2019 Committee report): Framework and NCC Cash forecast 2018/19 **Investment Strategy REASONABLE ASSURANCE** 120,000 is applied on a daily Number of basis Priority level 100,000 Recommendations Priority 1 Priority 2 80,000 E000 40,000 20,000 Available Cash —Net New Borrowing Prudent investment activity – outstanding investment palances totalied £54m at the start







Financial Management Assurance from KLOEs – Financial Prudence			
Treasury manag	gement framework	Investment strategy	
		Returns on investments	
1 st Line	2 nd Line	3 rd Line	
	Developments ir	2019/20:	
		Internal Audit of	
		financial resilience is in	
		progress at the turn of	
		the year	

Financial Management Assurance from KLOEs – Value for Money

Service provision review Options for change

Use of benchmarking Value for money achieved

Transformation programme delivering

1st Line

Positive assurance

Corporate Directors' Annual **Assurance Statements**

> Ongoing review of services and use of benchmarking

Dept	Assurance Level	
ASCPH	Substantial	
C&F	Substantial	
Place	Reasonable	
Chief Exec's	Substantial	

Partnerships and collaborations to aid VFM

Dept	Assurance Level
ASCPH	Substantial
C&F	Substantial
Place	Substantial
Chief Exec's	Substantial



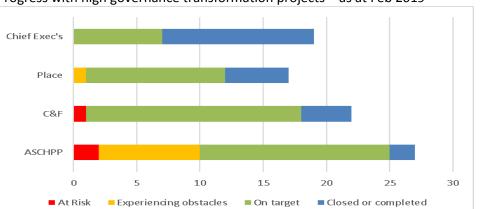
2nd Line

Mixed assurance

ECLT reports – Feb set on performance, finance and transformation progress

Dept	CLT Performance Dashboard Summary Feb 2019	Budget forecast Feb 2019
	% measures on track	£m overspend /£m underspend
ASCPP	50%	6.5
C&F	69%	-0.8
Place	86%	-1.25
CEX	55%	-0.8
Total	65%	3.65

Progress with high governance transformation projects – as at Feb 2019



3rd Line 16

Positive assurance

External audit opinion annual letter 2017/18

Value for Money conclusion

Unqualified conclusion:- the Authority had appropriate arrangements for securing economy, efficiency and effectiveness in the use of its resources

Value for Money risk are

Medium Term Financial Planning -The Authority continues to face similar financial pressures and uncertainties to those experienced by others in the local government sector.

IMPOWER INDEX

Drawing on 30 publicly available datasets, the iNDEX ranks 150 councils using 49 outcome indicators.

Top 10 most improved councils

Authority	ority Overall 2018 rankin	
	2018	2017
Nottinghamshire	22	54

Financial Management Assurance from KLOEs – Value for Money					
Service provision review Options for change Transformation programme del	vering	Use of benchmarking Value for money achieved			
1 st Line	2 nd Line	3 rd Line			
	Developments in 2019/20:				
	Implementation of co-ordinated monthly business reporting to Extended Corporate Leadership Team, providing an integrated view of finance, performance and transformation in each department.				