

North York Moors National Park Authority Finance, Risk, Audit and Standards Committee

6 February 2017

Annual Standards and Ethical Review

1.	Purpose of the Report
1.1	To provide Members with the annual review of the Authority's performance on Standards and Ethical Issues.

2. Background

2.1 The Scheme of Delegation to this Committee states the following;

Standards and Ethics

Without diminishing the responsibility of the Authority as a whole, the Committee will steer the organisation towards the highest ethical standards and the fullest possible compliance with Nolan Principles and the organisation's Values and Codes of Conduct. It will consider how best to communicate achievements in this sphere, and any failings, to the public.

On at least one occasion each year the Committee shall undertake an overall review of standards issues and report on any matters of significance to the Full Authority. This review will involve the Independent Person(s) who may, in addition, be consulted on individual issues as and when required. (Members Handbook - Scheme of Delegation 5 pg 4.5)

2.2 It has previously been agreed that the annual review should be conducted at the February Meeting of this Committee each year.

2.3 The Annual Governance Statement will be based on the discussion relating to this paper and a draft version of this will be presented to the May meeting of this Committee for discussion prior to approval before the end of September.

2.4 The Values are embedded into the culture of the organisation and influence the way in which Members and, increasingly, Volunteers as well as the staff carry out their work. They are displayed in prominent places and form part of the induction and training programme. The Staff Appraisal process was significantly adjusted for 2016/17 with the behaviours implicit in our Values featuring prominently in the revised Competency Framework.

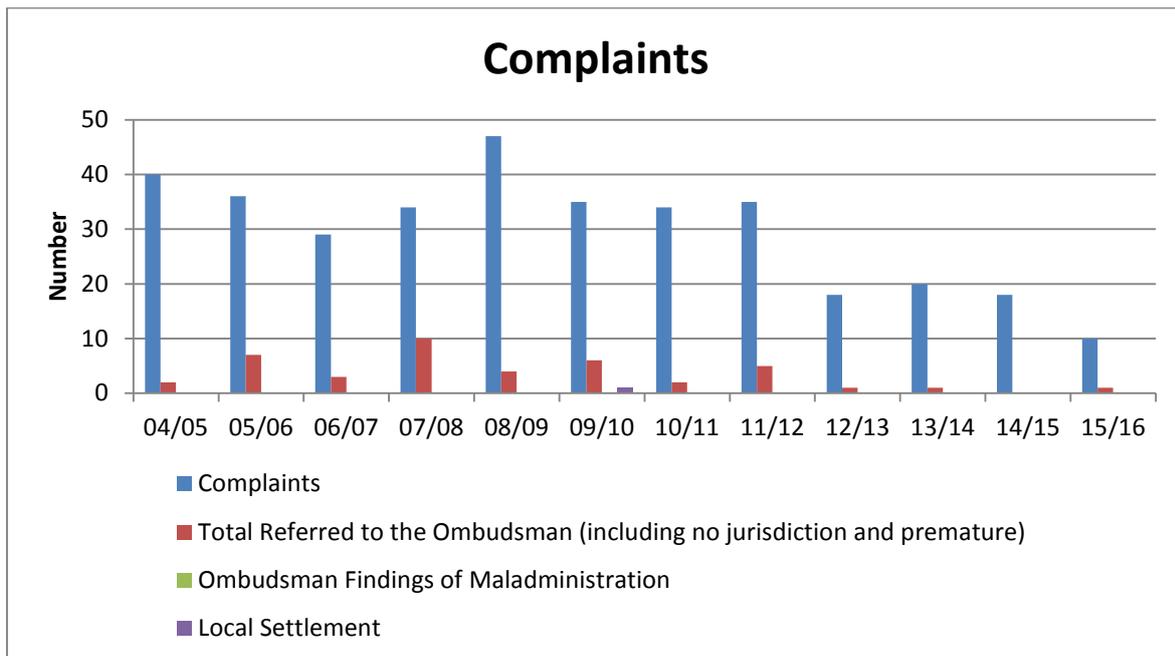
2.5 Members continue to receive training in governance, standards and ethics issues when appropriate.

2.6 During 2016/17, the Authority has had no issues raised through the formal 'Whistleblowing Policy' which provides a mechanism for individuals to report potential fraudulent and other activity in a confidential manner. The Authority is also subject to regular review by both internal and external auditors who advise on the adequacy of systems to mitigate the risk of fraud.

- 2.7 Members will be aware that the Authority has an excellent record in achieving, maintaining and improving performance against the assessment criteria for both Charter Mark (over a fourteen year period) and Customer Service Excellence over the last six years, for the whole organisation. This serves as an external validation of the Authority's approach to customer service and the 2016 assessment resulted in more aspects of the service provided being regarded as 'best practice'.
- 2.8 Sections 3 to 7 below detail statistics which demonstrate that the Authority is operating in a way that is consistent with its Codes of Conduct and Ethical Framework.

3. Complaints and Compliments

- 3.1 Officers report quarterly on Complaints and Compliments which have been received during the year and also report on complaints to the Local Government Ombudsman. The graph below details the Complaints registered between 2004/05 and 2015/16 and the Ombudsman Complaints. The volume of complaints is relatively low and during this period the Ombudsman has only found against the Authority's position on one occasion and that was agreed as a Local Settlement.
- 3.2 The total number of compliments received over the same period is nearly 1,500. While there have been changes in the criteria for recording correspondence as a compliment which makes year on year comparisons difficult, the continued high volume of compliments should be seen as highly encouraging.
- 3.3 In 2015/2016 the Authority received 10 complaints of which, 2 were justified or partially justified and two were referred to Members for consideration. In the same time period the Authority also received 62 compliments. The Local Government Ombudsman received one complaint about the Authority in 2015/16 which was then referred back for local determination under the Authority's complaints process.
- 3.4 The year to date performance for 2016/17 is included in more detail at Item 12 on this agenda and full year data will be reported to the May meeting of this committee.



- 3.5 Officers clearly welcome the trend towards a reducing number of formal complaints which does indicate strong levels of service. They are, however, mindful that the way in which customers interact with the Authority has changed significantly which means that formal written complaints are much less likely than, say, 10 years ago. Work will be undertaken to ensure that complaints which ought to have been recorded and dealt with via the complaints process are being 'captured' even though they may have been received via a staff member's email address or social media.
- 3.6 Dealing with Freedom of Information Act (Fol) requests are a regular feature of the Authority's work (28 were responded to in 2015/16 and 14 in the year to date). While these are mostly straightforward in their nature, there are inevitably more complex requests as well. In answering requests, the Authority is obliged (with certain exceptions) to provide the information that it holds which means that data management systems should be efficient at both retaining and disposing of information. In addition, all staff need to be aware that care should be exercised in the content, tone and language used in all communications as these may need to be released in responding to an Fol request.

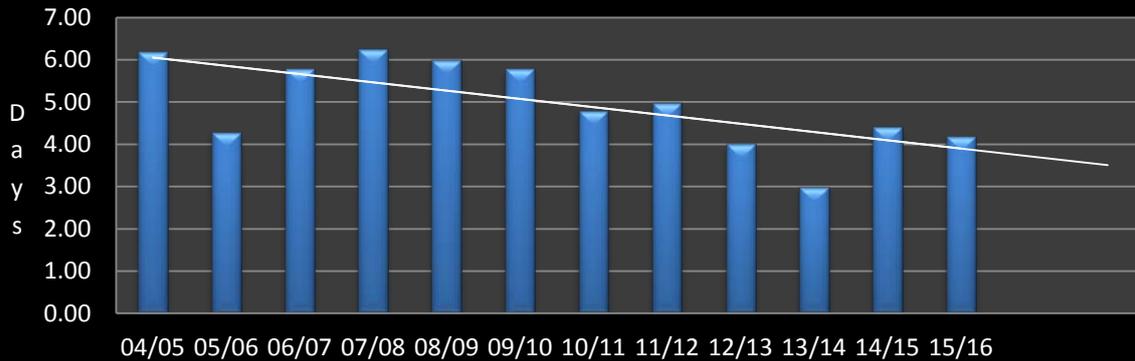
4. **Member Complaints**

- 4.1 The Authority has adopted a Member Code of Conduct which was updated in June 2012 in accordance with the new Standards regime arrangements. It substantially exceeds the minimum requirements of the legislation. The Monitoring Officer and Independent Person reviewed the Code of Conduct in the light of the outcome of the Member Complaints received in 2013. A number of clarifications were proposed which were approved by the Authority in September 2014.
- 4.2 There were no complaints regarding Members in 2016.

5. **Staff Health, Safety and Well Being**

- 5.1 The number of working days lost to sickness is usually considered to be an indicator of the working environment within an organisation and the chart below details the Authority's sickness absence performance indicator since 2004/05. These results continue to compare favourably with other organisations.
- 5.2 The Authority has a long term target of 4 days absence (1.5%) per full time equivalent. The actual figure achieved in 2015/16 was 4.2 days (1.6%) which represented a minor decrease from the previous year's figure. Taking long term absence out of the 2015/16 figures reveals an underlying absence rate of less than 1.0% for the year which is unchanged from the previous year. An analysis of the causes of sickness absence shows no discernible pattern of illness that suggests a work related cause affecting a number of people.
- 5.3 The most recent data available from the Chartered Institute for Personnel and Development (October 2016) reported that average sickness absence in the public sector across the UK is 8.5 days per person (3.2%), while the corresponding figure in the private sector is currently 5.2 days per person (2.2%). These figures showed a slight decrease from the previous year.

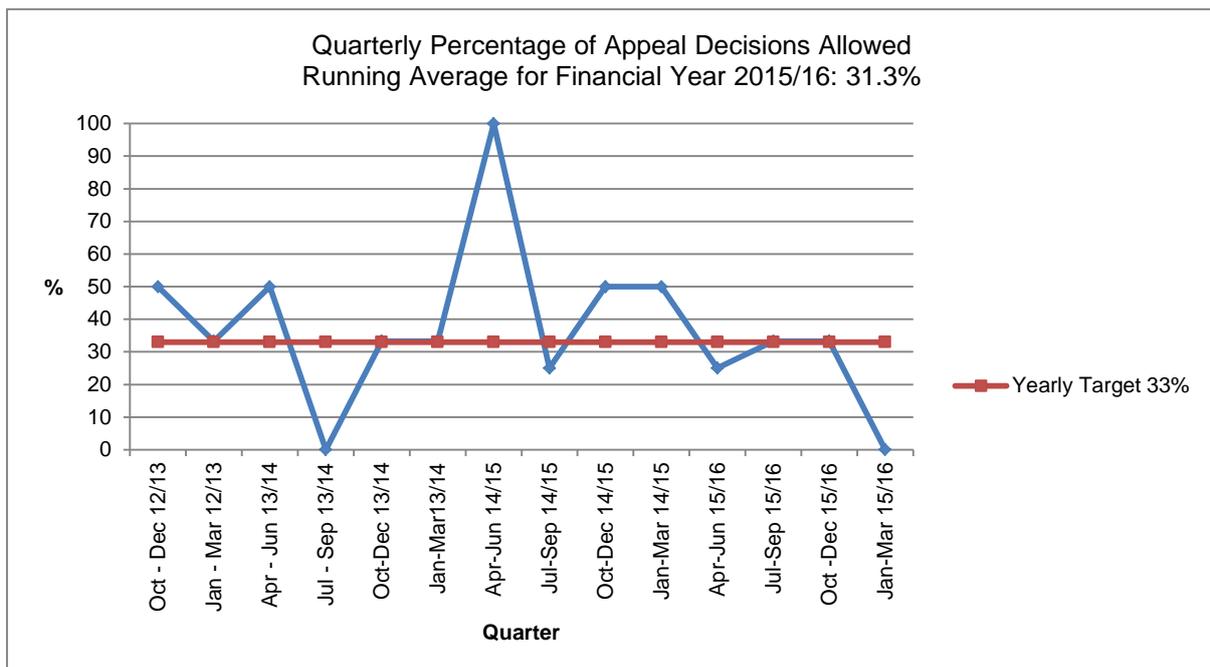
Sickness Absence vs 4 day target



- 5.4 Staff from Veritau are conducting an audit into the way in which the Authority is managing Health and Safety with specific regard to the Volunteer Service. As a significant expansion of the Volunteer Service is underway, Officers were keen to receive an external view as to whether the way in which health and safety is organised is sound and fit for purpose as the number of volunteers grows.
- 5.5 Detailed Health and Safety Reports are provided to Members at each FRASC meetings (see agenda item 13) and annually to NPA. The report elsewhere on this agenda deals with performance with regard to accidents, the 2016/17 action plan and proposals for the 2017/18 action plan.

6. Planning Performance

- 6.1 The Authority monitors the number of planning appeal decisions allowed against the Authority's decision to refuse planning applications as this is an indicator of the quality and consistency of its decision making. Members are regularly updated on this indicator and the chart below illustrates the results on a quarterly basis over recent years. The national average varies from year to year years but is normally about 35%.



6.2 The Authority's target is 33% of appeal decisions allowed. In 2015/16, the number allowed was 2.5 out of 8, giving the percentage of appeals allowed as 31.3% and within target. This represents the second best year since the publication of the NPPF in 2012.

6.3 The Planning Customer Satisfaction Survey was undertaken in 2016. Results have historically been strong and the Authority's performance indicator for satisfaction with the planning service is set at a high level of 85%. The result from the 2016 survey gave an overall satisfaction rating of 93%. This means that the challenging target has again been met and is particularly noteworthy following a year in which pre-application advice charging was introduced.

7. **Media Coverage**

7.1 The Authority monitors the press coverage received and analyses whether the coverage is positive, negative or neutral. Between 2010/11 and 2013/14 the percentage of positive coverage decreased from 66% to 53%. This improved significantly, however, to 63% in 2014/15 while negative coverage decreased to 1%.

7.2 In 2015/16, positive coverage fell slightly to 56%, but the remainder was all neutral. Officers consider this to be an excellent achievement given that this was the year in which the York Potash planning application was determined. The figures for the year to date are 79% positive and 21% neutral coverage confirming the high quality press coverage generated.

8. **Staff Code of Conduct and Ethical Framework**

8.1 Both of these documents have been reviewed, amendments proposed and subsequently approved by Members at the March 2015 meeting of the National Park Authority. The Code and Framework were well publicised at the time. While there have been no significant issues arising from this, Officers are mindful that there are a number of new staff at all levels and, although this subject is covered in induction, it would be appropriate to give contents of the Staff Code further publicity to all staff.

9. **Volunteer Strategy**

9.1 Members approved a new Volunteers Strategy in early 2015, reviewed progress in 2016 and a considerable amount of work has been undertaken to implement this. One of the outcomes has been closer engagement with volunteers, including a number of them attending staff meetings and engaging in staff training days. This involvement has proved to be very useful as volunteers are effectively 'semi-independent' and they have been able to stimulate good debate with their comments and questions.

9.2 Members will be aware that there has been considerable staff change within the Volunteer Service for a variety of reasons. This has now been resolved, albeit on a temporary basis, and Officers are confident that the management of the service and delivery of the strategy remain on a sound footing.

10. **Annual Governance Review**

10.1 The Authority formally approves an Annual Governance Statement for publication alongside the Statement of Accounts. This includes a summary of the work undertaken in the financial year ended the 31 March and it also indicates areas to be addressed in the forthcoming year to further enhance the governance arrangements. Below is an extract from the current statement.

The review of effectiveness has identified the following areas to be addressed in 2016/17:

- Ensuring that Members have the information and opportunity to make good, clear decisions on their priorities for the Business Plan and the type and level of public input needed for this, including in relation to Performance Indicators.
- Improving communications and avoiding duplication in the publication of various vehicles for sharing information with Members, volunteers and staff.
- A fourth survey of residents' satisfaction with the work of the Authority will be undertaken allowing comparative data to be collected including an assessment of satisfaction and fairness in decision making. This will also be utilised to consult with residents on issues in the emerging Business Plan.
- Work flowing from the volunteer strategy will continue to be a priority as volunteers become involved in more parts of the Authority.
- The review of the appraisal scheme will seek to ensure a balanced approach to performance assessment combining work output with standards of behaviour as outlined in the Values.
- Further work on the review of the Scheme of Delegation, Standing Orders and Financial Regulations will be undertaken in particular to reflect the impact of the ongoing collaborative working with North Yorkshire County Council and other minor changes which have been identified by Officers.
- Ensuring suitable public input to the new Local Plan and review of the Management Plan.
- Review the arrangements for managing Fraud and Corruption Risk.
- Review the Strategic Risk Register taking into consideration the priorities emerging from the new Business Plan.

10.2 Excellent progress has been on the majority of these items during 2016/17. Members were engaged through much of 2016 in making decisions for priorities in the new Business Plan approved in December; work has been done to ensure there has been better use made of information and sharing this across a variety of formats for Members, volunteers and staff; the residents' satisfaction survey was undertaken, the results analysed, presented to Members and used in helping to determine Business Plan priorities; work on the Volunteer Strategy has continued with volunteers playing an ever wider role in the Authority's work; the revised appraisal scheme has been implemented with minor revisions to be made for 2017/18; public and partner input into the Local Plan and review of the Management Plan has been well planned and extensive; and the review of the Strategic Risk register which incorporates the Business Plan strategic priorities is considered elsewhere on the agenda for this meeting.

10.3 Work on reviewing the Scheme of Delegation, Standing Orders and Financial Regulations has been postponed, ensuring that work did not potentially need to be done twice, pending confirmation of the way in which the Financial Collaboration Agreement with NYCC will be delivered from April 2017 onwards. A paper will be presented to FRASC in May reviewing the arrangements for managing Fraud and Corruption Risk.

10.4 In terms of the actions for 2017/18 to be included in the Annual Governance Statement, Officers suggest the following areas for further development;

- Completion of the work highlighted in Paragraph 10.3 above.
- Give increased prominence to the Officers' Code of Conduct to ensure that Officers are clear about its contents and fully comply with their obligations.

- Improve Officers' awareness of their obligations with regard to the Freedom of Information and Data Protection Acts. In particular, this relates to both the retention/disposal of data and to reinforce the message that care needs to be used in the language used and opinions expressed in all email messages.
- Update the Authority's Customer Service Standards to reflect the changed ways in which our customers want to interact with us – for example the current standards refer extensively to how we should reply to written correspondence and while there is some guidance on email communication, no mention is made of social media.
- Review the complaints process to ensure that complaints coming into the Authority from a wide variety of sources (including social media and emails) are being properly captured to give certainty that they are dealt with effectively and any opportunities for improving the way in which we work are taken.
- Given the expansion of the Authority's operations, notably in delivering externally funded projects and in undertaking mitigation work via the Sirius Minerals Section 106 Agreement, ensure that the resources deployed in key areas are sufficient to support the greater volume of legal and governance work.
- Continue to integrate volunteers into all of the Authority's work teams and ensure that volunteers are properly considered and consulted when key decisions are made.
- Continue the development of the financial collaborative working arrangements with NYCC to deliver high quality information to facilitate Member and officer decision making.

Members may wish to suggest other work which can then be subject to discussion at the meeting.

11. **Financial and Staffing Implications**

11.1 There are no direct additional financial or staffing implications arising from this report.

12. **Legal Implications**

12.1 There are no legal or sustainability implications arising from this report.

13. **Recommendation**

13.1 That Members comment on the Authority's performance in these areas, note the contents of the report, make suggestions for further work on the draft content of the annual governance statement and request Officers to make progress on the actions suggested in paragraph 10.4.

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Background documents to this report

File Ref.