GOVERNANCE QUARTERLY UPDATE QUARTER 2 2020/21

<u>12 NOVEMBER 2020</u>

REPORT OF CABINET MEMBER: CLLR CUTLER - DEPUTY LEADER AND CABINET MEMBER FOR FINANCE AND RISK

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WARD(S): ALL

PURPOSE

To provide members of the Audit and Governance Committee with a summary overview of the key issues in respect of governance arising during the second quarter of the 2020/21 financial year.

RECOMMENDATIONS:

1. That the Audit and Governance Committee notes the content of the report, the progress against the internal audit management actions and raises any issues with the cabinet member.

IMPLICATIONS:

- 1 COUNCIL PLAN OUTCOME
- 1.1 This summary document supports the council to be open and transparent by reporting the effectiveness of its governance framework and highlighting areas of weakness or issues of concern.
- 2 FINANCIAL IMPLICATIONS
- 2.1 There are no financial implications.
- 3 LEGAL AND PROCUREMENT IMPLICATIONS
- 3.1 There are no legal or procurement implications arising from the content of this report.
- 4 WORKFORCE IMPLICATIONS
- 4.1 None
- 5 PROPERTY AND ASSET IMPLICATIONS
- 5.1 None
- 6 CONSULTATION AND COMMUNICATION
- 6.1 Consultation on the content of the report has been undertaken with the Deputy Leader and Cabinet Member for Finance and Risk, the Chairman of the Audit and Governance Committee and Executive Leadership Board (ELB).
- 7 ENVIRONMENTAL CONSIDERATIONS
- 7.1 None
- 8 EQUALITY IMPACT ASSESSEMENT
- 8.1 None arising from the content of the report, although officers will have regard to the considerations as set out in the Equalities Act 2010 and whether an equality impact assessment will be required to be undertaken on any specific recommendations or future decisions made. This report is not making any decisions and is for noting and raising issues only.
- 9 DATA PROTECTION IMPACT ASSESSMENT
- 9.1 None
- 10 RISK MANAGEMENT
- 10.1 This report presents a summary update on how the council is performing against the governance processes and procedures that are in place and set

out in the Local Code of Corporate Governance. Independent assurance provided by the council's internal and external auditors evidence where there are weaknesses in the council's governance arrangements and are highlighted in this report.

11 SUPPORTING INFORMATION:

11.1 This report sets out the summary information in respect of the second quarter of the 2020/21 financial year concerning governance.

Annual Governance Statement

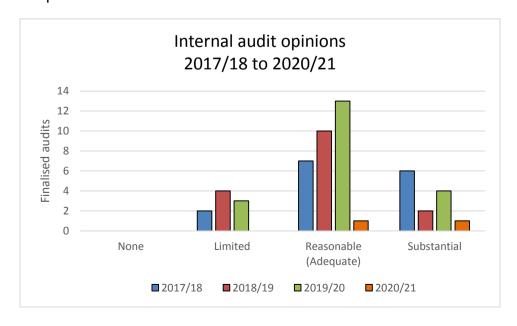
11.2 Progress against the actions included in the 2019/20 Annual Governance Statement is included in appendix 1 to this report.

Declarations of gifts and hospitality

- 11.3 During the period of June to September 2020 (Q2), the following declarations by officers were recorded.
 - One declaration by an officer who received a box of chocolates, biscuits and fruit squash from a business.
 - One declaration by an officer who received a bouquet of flowers from a member of the public.
- 11.4 Members have accordingly each updated their register of interest forms and there were no declarations of gifts or hospitality during the Q2 period.

12 Internal Audit Assurance Reports

12.1 The graph below shows the assurance levels of the completed internal audits that were included in the 2017/18, 2018/19, 2019/20 and 2020/21 (to date) audit plans.



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- 12.2 There have been no published audit reports that concluded with a 'no' assurance opinion.
- 12.3 Since the last Audit and Governance Committee meeting on 28 July 2020 there have been three internal audits completed and their reports published. These are:
 - Working in Partnership 19-20 (Limited Assurance Opinion)
 - Building Control 20-21 (Reasonable Assurance Opinion)
 - Business Continuity 20-21 (Substantial Assurance Opinion)
- 12.4 Appendix 2 provides an update on the progress that has been made since 1 April 2020 against the audit reviews included in the 2020/21 Audit Plan.
- 12.5 Included in the Audit Plan for 2020/21 was a review of the council business continuity framework and was brought forward to take place during June/July to provide the opportunity for an independent review of the plans and highlight any areas that can be improved, this is particularly being mindful and in readiness should there be a second wave of the pandemic later in the year. The audit offered a substantial assurance, the highest available.
- 12.6 Areas assessed to be working well/ control are effective included:
 - The council's Business Continuity and Crisis Management Plans, in place since 2017, were reviewed in July 2020 to include new council services identified as critical. This followed work earlier in the year undertaken with colleagues at HCC on improving key elements of the business continuity framework.
 - Business impact analysis was completed by officers in the Policy and Performance Team, who identified 13 critical services to be prioritised for recovery if they become unavailable. Standard templates were used ensuring relevant details were captured. The Policy and Performance Team, working together with service leads, have reviewed and updated the various critical functions plans to incorporate the COVID-19 response plans. Responsibility for maintenance and update of the critical function plans have been appropriately assigned. Copies of the plans are kept on Resilience Direct to ensure accessibility outside council offices and IT systems.
 - There is a lessons learnt document in place which captures learning points identified because of the COVID-19 pandemic as well as actions taken which are deemed to have worked well. There are plans to incorporate these points into the business continuity plans during the annual reviews.
- 12.7 The audit concluded with substantial assurance being offered with no areas where the framework of governance, risk management and control could be improved.

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Internal Audit Management Tracking

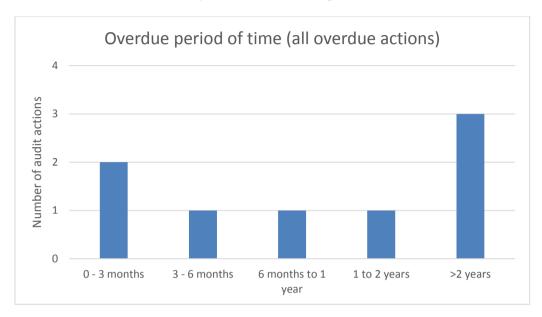
- 12.8 Progress against the management actions that are included in the internal audit reports (since May 2016) are regularly reviewed by managers. A new approach to the management of actions included in the internal audit reports has been introduced with increased Executive Leadership Board (ELB) visibility.
- 12.9 A summary table showing the status of these actions is reported on a quarterly basis. These recommendations are kept under regular review to assess where some are superseded by external or internal factors.
- 12.10 To support the committee to quickly identify where there are overdue actions, the progress table on the next page includes only those audits where there are overdue actions. It remains a priority for officers to focus on completing their actions within agreed timescales and progress continues to be made to reduce the total number of overdue actions.
- 12.11 The outbreak of the COVID-19 pandemic has inevitably had an impact on staff capacity and a number of staff have been actively supporting the council's response during the last six months, many almost exclusively.
- 12.12 A number of internal audit actions were due to be either progressed or completed during this period and due to the pandemic there has been some slippage.
- 12.13 An additional narrative is included to the table to provide a brief explanation of the overdue audit actions and the reasons for the delay in completion including where the delay is caused by the COVID-19 pandemic
- 12.14 There are currently 8 overdue audit actions with 2 being high priority. This is the same as was reported to the committee in July.

Audit Review	Report Date	Audit Sponsor	Assurance Opinion	('High Priority')							
				Reported	Not Accepted	Pending	Cleared	Overdue	LOW	MEDIUM	HIGH
Hampshire Cultural Trust	24/05/16	SDP	Limited	3 (0)	0 (0)	0 (0)	2 (0)	1 (0)			
Update: The pand repair resalso form the binstruct lawyer council and the F2 storage face	ponsibilities pasis of the s, or review e trust took	have been two new ag the propos	agreed betwe greements are sed new legal	een WCC an close to bei documentat	nd HCT, whi ing finalised ion internall	le the Head . HCT will a y. A meetin	ls of Terms Idvise whe g between	s that will ther it will the		1	
Information Governance	28/03/17	SDR	Adequate	11 (1)	0 (0)	0 (0)	9 (1)	2 (0)			
Update: Acce system, while						cy docume	nt manage	ment		1	
IT Software Licensing and IT Asset Management	12/03/18	SDR	Adequate	3 (0)	0 (0)	0 (0)	2 (0)	1 (0)			
Update: The of one centralise due to be comis now due to	d system fo pleted by Ju	r Wincheste une 2020 b	er City Counci ut owing to the	I and Test V e impact of t	alley Boroughe COVID-1	gh Council.	This proje	ct was	1		

Audit Review	Report Date	Audit Sponsor	Assurance Opinion	Management Actions ('High Priority')							
				Reported	Not Accepted	Pending	Cleared	Overdue	LOW	MEDIUM	HIGH
Digital Agenda	05/02/19	SDR	Adequate	3 (0)	0 (0)	0 (0)	2 (0)	1 (0)			
Borough Cou The project is scoping docu process over In the meant templates via A new access areas of con- specific contri	Update: The overdue action relates to website accessibility. The council is working with Test Valley Borough Council to procure a new website. The new website will satisfy all accessibility requirements. The project is progressing, following a hiatus due to our COVID-19 response. We have signed off a scoping document and are moving forward to go to market for tender and will progress this procurement process over the upcoming months (minimum 3 months) In the meantime, the council has worked with its present provider to improve the accessibility of the page templates via improved colour contrast and HTML rectifications relating to the corporate brand guidelines. A new accessibility statement has been prepared and is available on the website – this identifies some areas of content we know are not accessible with contact numbers provided should the visitor require that specific content in a certain format. We are identifying the 3 rd party providers through whom we can engineer amends to their 'portals' which										
use the council's "template" to make them compliant. For any provider that sits outside this group we are putting in place a plan to achieve full accessibility via the new website implementation – this is in line with guidance from our legal team.											
	vements so	that change	ng further acc s can be mad								

Audit Review	Report Date	Audit Sponsor	Assurance Opinion				agement <i>A</i> High Prior				
				Reported	Not Accepted	Pending	Cleared	Overdue	LOW	MEDIUM	HIGH
IT - Mobile Devices	18/07/19	SDR	Limited	5 (3)	0 (0)	0 (0)	3 (1)	2 (2)			
Update: IT has now successfully installed Intune and is using it now for the managing and controlling new laptops, as a part of Windows10 project.								rolling			
Based on the detailed plans a) priority relatestandard for the	for this are ted to laptor	currently be replacement	eing prepared ents, b) mobile	 decision to devices are 	to do them s e coming to	eparately v a renewal a	vas taken l	based on			2
WCC Recruitment 19/20	29/01/20	SDR	Adequate	4 (0)	0 (0)	0 (0)	3 (0)	1 (0)			
Update : The recan examine A proposed.			•		•	•	_	until they		1	
WCC Programme & Project	11/06/20	SDR	Adequate	6 (0)	0 (0)	0 (0)	5 (0)	1 (0)			
Update: 1 ove	Update: 1 overdue audit action relating to the ongoing monitoring of the Wrike project management system. Funding for Wrike is currently under review given current budget pressures.							nent	1		

- 12.15 Committee members previously requested a chart be included in the quarterly governance monitoring reports that show the period of time that the outstanding audit management actions have been overdue.
- 12.16 There are currently 8 overdue actions and the chart below provides details of amount of time that has lapsed since the target date for each of these actions.



12.17 The chart above shows there are three management actions overdue by more than two years. The oldest action relates to the audit that reviewed the transfer between the council and the Hampshire Cultural Trust and was issued in May 2016. Council officers continue to liaise with the trust. The position on the leases for the two museums is that schedules of respective maintenance and repair responsibilities have been agreed between WCC and HCT, while the Heads of Terms that will also form the basis of the two new agreements are close to being finalised. HCT will advise whether it will instruct lawyers, or review the proposed new legal documentation internally. A meeting between the council and the Trust took place in early October to discuss moving the contents of the Bone Store to F2 storage facility.

Risk Management

- 12.18 A risk management workshop was held jointly with members of cabinet and the Audit and Governance Committee on 12 October and was facilitated by representatives from the council insurer to support their knowledge and understanding of risk management and the council's risk appetite.
- 12.19 Further work on the risk appetite is being discussed with cabinet members and the revised Risk Management Policy will be brought to this committee for consideration and comments before adoption by cabinet.
- 13 OTHER OPTIONS CONSIDERED AND REJECTED
- 13.1 None.

BACKGROUND DOCUMENTS:-

Previous Committee Reports:-

AG028 Governance Quarterly Update Q4 2019/20 and Q1 2020/21, 28 July 2020

Other Background Documents:-

None.

APPENDICES:

Appendix 1 – Annual Governance Statement 2019/20 – progress update

Appendix 2 – Internal Audit Progress Report

Appendix 3 – Code of Conduct complaints

<u>Annual Governance Statement 2019/20 – Action Plan update – September 2020</u>

No.	Issue	Actions	Progress Update	Lead Officer	Target Date	Current Status
1.	Partnership working – the need to ensure that the council maintains effective partnership working	Review partnerships to ensure all required documents are in place and up to date	Work has begun on reviewing the council's partnership register however the team responsible for this has delayed this piece of work due to other priorities including supporting businesses through the pandemic.	Corporate Head of Engagement	September 2020	RED
		Annual report covering the performance of key partnerships scheduled to be considered at The Scrutiny Committee.	The annual report will be completed once the review of partnerships has been completed and presented to scrutiny committee in the new year.	Corporate Head of Engagement	September 2020	RED
		Complete Partnership Working Guide for Managers	Work on this has been delayed to the staff supporting the council's response to the pandemic.	Corporate Head of Engagement	September 2020	RED
2.	Business Continuity - ensuring that the council has robust and adequate plans in place to maintain business critical services	Review of business continuity framework and response to COVID-19 pandemic by internal audit	Audit completed late summer and concluded with Substantial Assurance and no weaknesses identified.	Senior Policy & Programme Manager	31 August 2020	Complete
	following the event of a crisis or disruption affecting its operations	Business Continuity training plans developed and testing scheduled	Training programme being developed and will be undertaken virtually using MS Teams during December.	Senior Policy & Programme Manager	31 December 2020	GREEN
3.	Equality Impact Assessments (EqIA) reviewing the current	Review and update current EqIA guidance and templates and brief out to staff ensuring that the council	A report on Public Sector Equality Duty will come to this committee shortly. It will recommend a revised	Service Lead – Legal	30 September 2020	AMBER

No.	Issue	Actions	Progress Update	Lead Officer	Target Date	Current Status
	arrangements in place ensuring the council meets the requirements of the Equalities Act 2010	meets the requirements of the Equalities Act 2010	corporate approach to implementation of the public sector equality duty. Work on this has been delayed to the staff supporting the council's response to the pandemic.			
4.	Restoration & Recovery Plan – COVID-19 to develop and implement a full Restoration and Recovery Plan for the ongoing provision of council services	Detailed report to Cabinet that sets out the council's high level restoration and recovery approach/high level plans.	First draft of COVID-19 Restoration and Recovery Plan included with Responding to the Coronavirus outbreak report presented to cabinet on 21 May 2020 (report CAB3244 refers)	COVID-19 GOLD Group	May 2020	Complete
		Develop and implement a full restoration and recovery plan that takes into consideration the impacts on council services from the COVID-19 pandemic.	Restoration and Recovery Plan actions currently being reviewed by corporate heads of services as they begin updating the actions in service plans for 2021/22	Executive Leadership Board	30 October 2020 (plans approved	AMBER
5.	Finance Recovery Plan COVID-19 review the council's Medium Term Financial Strategy and the financial impact of COVID-19 ensuring that the a balanced budget is maintained	Full review of the impact of the COVID-19 pandemic on the council's finances and an updated budget for 2020/21 taking in revised projections approved.	Revised budget for 2019/20 considered by Scrutiny Committee on 7 September and approved by Council on 23 September 2020 (report CAB3246 refers)	Strategic Director: Services (S151 Officer)	September 2020	Complete

Internal Audit Progress Report (September 2020)

Winchester City Council





Assurance through excellence and innovation

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1. Role of Internal Audit

The requirement for an internal audit function in local government is detailed within the Accounts and Audit (England) Regulations 2015, which states that a relevant body must:

'Undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.'

The standards for 'proper practices' are laid down in the Public Sector Internal Audit Standards [the Standards – updated 2017].

The role of internal audit is best summarised through its definition within the Standards, as an:

'Independent, objective assurance and consulting activity designed to add value and improve an organisations' operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes'.

Winchester City Council is responsible for establishing and maintaining appropriate risk management processes, control systems, accounting records and governance arrangements. Internal audit plays a vital role in advising the Council that these arrangements are in place and operating effectively.

The Council's response to internal audit activity should lead to the strengthening of the control environment and, therefore, contribute to the achievement of the organisations' objectives.

2. Purpose of report

In accordance with proper internal audit practices (Public Sector Internal Audit Standards), and the Internal Audit Charter the Chief Internal Auditor is required to provide a written status report to 'Senior Management' and 'the Board', summarising:

- The status of 'live' internal audit reports;
- an update on progress against the annual audit plan;
- a summary of internal audit performance, planning and resourcing issues; and
- a summary of significant issues that impact on the Chief Internal Auditor's annual opinion.

Internal audit reviews culminate in an opinion on the assurance that can be placed on the effectiveness of the framework of risk management, control and governance designed to support the achievement of management objectives of the service area under review.

CIPFA have recently released a paper which examined the case for standardising the terminology and definitions used in internal audit engagements across the whole of the public sector and has subsequently recommended a standard set of opinions and supporting definitions for internal audit service providers to use. To ensure we continue to conform to the best practice principles, we will be adopting the standard definitions for our 2020-21 work and moving forwards. The assurance opinions are categorised as follows:

Substantial A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

Reasonable There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.

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

No Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

^{*} Some reports listed within this progress report (pre 2020-21 audit plan) refer to categorisations used by SIAP prior to adoption of the CIPFA standard definitions, reference is provided at Annex 2

3. Performance dashboard





Compliance with Public Sector Internal Audit Standards

An External Quality Assessment of the Southern Internal Audit Partnership was undertaken by the Institute of Internal Auditors (IIA) in September 2020. The report concluded:

'The mandatory elements of the IPPF include the Definition of Internal Auditing, Code of Ethics, Core Principles and International Standards. There are 64 fundamental principles to achieve with 118 points of recommended practice. We assess against the principles.

It is our view that the Southern Internal Audit Partnership conforms to all 64 of these principles.

We have also reviewed SIAP conformance with the Public Sector Internal Audit Standards (PSIAS) and Local Government Application Note (LGAN).

We are pleased to report that SIAP conform with all relevant, associated elements.'

4. Analysis of 'Live' audit reviews

Audit Review	Report Date	Audit Sponsor	Assurance Opinion	Total Management Actions (s)	Not Accepted	Not Yet Due	Complete		Overdue	
								L	M	Н
Hampshire Cultural Trust	May 16	SDP	Limited	3	0	0	2		1	
Information Governance	Mar 17	SDR	Adequate	11	0	0	9		1	
Cyber Security*	Sep 17	SDR	Adequate	5	0	0	5			
Working in Partnership*	Oct 17	SDP	Limited	6	0	0	6			
IT Software Licensing and IT Asset Management	Mar 18	SDR	Adequate	3	0	0	2	1		
Business Continuity*	Apr 18	SDS	Limited	9	0	0	9			
Digital Agenda	Feb 19	SDR	Adequate	3	0	0	2	1		
Information Governance – GDPR*	Apr 19	SDR	Adequate	2	0	0	2			
Licencing*	May 19	SDR	Substantial	1	0	0	1			
Mobile Devices	Jul 19	SDR	Limited	5	0	0	3			2
Planning and Open Spaces (CIL)	Oct 19	SDR	Adequate	8	0	1	7			
Ethical Behaviours*	Oct 19	SDR	Adequate	4	0	0	4			
Recruitment	Jan 20	SDR	Adequate	4	0	0	3		1	
Programme and Project Management	Jun 20	SDR	Adequate	6	0	0	5	1		
Payroll*	Jun 20	SDR	Adequate	1	0	0	1			
Back Ups*	Jun 20	SDR	Limited	4	0	0	4			
Housing Finance – Garage Rents	Jul 20	SDR	Adequate	3	0	2	1			
Working in Partnership	Sep 20	SDR	Limited	12	0	10	2			
Building Control	Sep 20	SDR	Reasonable	10	0	5	5			
Total								3	3	2

^{*} Denotes audits where all actions have been completed since the last progress report

Audit Sponsor (Director)	
Chief Executive	CX
Strategic Director - Resources	SDR
Strategic Director - Services	SDS
Strategic Director – Place	SDP
Service Manager (Legal & Procurement)	СХ

5. Executive Summaries of reports published concluding a 'Limited' or 'No' assurance opinion

There have been no 'Limited' or 'No' assurance opinion reports issued as part of the 2020-21 audit work.

6. Planning & Resourcing

The internal audit plan for 2020-21 was approved by the Council's Management Team and the Audit and Governance Committee in March 2020.

The audit plan remains fluid to provide a responsive service that reacts to the changing needs of the Council. Progress against the plan is detailed within section 7.

7. Rolling Work Programme

Audit Review	Sponsor	Scoping	Audit	Fieldwork	Draft	Final	Assurance	Comment
			Outline		Report	Report	Opinion	
2019-20								
Financial Stability	SDR	✓	✓	✓	Jun 20	Jul 20	Substantial	2019-20 Opinion
Working in Partnership	SDR	✓	✓	✓	Feb 20	Jul 20	Limited	2019-20 Opinion
Procurement	SDR	✓	✓	✓	Jun 20	Jul 20	Adequate	2019-20 Opinion
2020-21								
Strategic Objectives and Corporate Cross Cutting Reviews								
Programme & Project Management	SDR							Q3
Transformation	SDR							Q3
Housing Management	SDS							Q4
Housing Asset Management – Gas Safety	SDS	✓	✓	✓	Sep 20			
Environmental Services Contract	SDS	✓	✓	✓				Q1-4
Building Control	SDS	✓	✓	✓	Aug 20	Sep 20	Reasonable	
Capital Programme and Monitoring	SDS							Q3
Business Continuity	SDR	✓	✓	✓	Sep 20	Sep 20	Substantial	
Governance								
HR - Performance Management	SDR	✓	✓	✓				
HR – Review TBC	SDR							Q4
Fraud Framework - NFI	SDS	n/a	n/a	✓				Q1-4
Fraud Framework – CIPFA Fraud Survey	SDS	n/a	n/a	✓				
Contract Management	SDR							Q3
Health and Safety	SDP	✓	✓	✓	Sep 20			
Information Governance - Records Management	SDR							Q4

Audit Review	Sponsor	Scoping	Audit	Fieldwork	Draft	Final	Assurance	Comment
			Outline		Report	Report	Opinion	
Risk Management	SDS							Q4
Core Financial Systems								
Housing Benefits	SDS							Q4
Accounts Receivable	SDS	✓	✓	✓	Sep 20			
Treasury Management	SDS	✓	✓	✓				
Information Technology								
Secure e-mail	SDR	✓	✓	✓				
Patch management	SDR	✓	✓	✓				
Cyber Security	SDR	✓						
Network Management	SDR							Q3
ICT Business Continuity	SDR							Q4
Certification Audits								
Bus Service Operator Grant	SDS	n/a	n/a	✓	n/a	Sep 20	n/a	Certification audit
Mayor's Charity Account	SDS	n/a	n/a	✓	n/a	Sep 20	n/a	Certification audit

^{*} Denotes plan additions

Annexe 1 - Adjustments to the plan

Audit reviews added to the plan (included in	
rolling work programme above)	
None	

Proposed October 2020 *

Audit reviews removed from the plan	
(excluded from rolling work programme)	
None	

Proposed October 2020*

Annexe 2 - Assurance opinions and definitions used by SIAP prior to adoption of the CIPFA standard definitions

Substantial	A sound framework of internal control is in place and operating effectively. No risks to the achievement of system objectives have been identified
Adequate	Basically a sound framework of internal control with opportunities to improve controls and / or compliance with the control framework. No significant risks to the achievement of system objectives have been identified
Limited	Significant weakness identified in the framework of internal control and / or compliance with the control framework which could place the achievement of system objectives at risk
No	Fundamental weaknesses identified in the framework of internal control or the framework is ineffective or absent with significant risk to the achievement of system objectives.

CODE OF CONDUCT COMPLAINTS

The following table provides a summary of new Code of Conduct complaints received since the last meeting of Audit & Governance Committee and those that remain outstanding as at 22 October 2020

Date contact first made with Monitoring Officer	Complaint against district or parish/town councillor	Details
30 June 2020	District Councillor	Complaint received 30 June 2020 which is under assessment by the Monitoring Officer and awaiting comment from the Independent Person.
26 June 2020	District Councillor	Complaint received 26 June 2020 which is on hold by the Monitoring Officer.
1 August 2020	District Councillor	Complaint received 1 August 2020 which is under assessment by the Monitoring Officer and advice of the Independent Person has recently been received.
30 September 2020	District Councillor	Complaint received 30 September 2020 which is under assessment by the Monitoring Officer.
5 October 2020	Parish Councillor	Previous complaint submitted 8 September 2020 and then withdrawn and resubmitted 5 October 2020 which is under assessment by the Monitoring Officer and awaiting comment from the Independent Person.