

Report of the Performance and Compliance Officer

Subject: Assurance Monitoring Report – Compliance, Public and Statutory Duties and Corporate Improvement

Introduction

The aim of this report is for it to act as one element of our risk management approach and support officers and Members in monitoring, assessing and responding to compliance and corporate improvement areas of work. This should help strengthen and in the future feed into Second Line Internal Assurance within the risk register.

This report remains in its development phase, with further work needed on developing and reviewing triggers, putting in additional monitoring for some areas and looking at how it can support and feed into Second Line Internal Assurance within the risk register. Including taking on board findings from internal audit's risk maturity work. As part of this further engagement work will also be carried out with compliance leads for different areas as capacity allows in Q4.

The aim of the report is to review our current performance across the following compliance, public and statutory duties and corporate improvement areas:

- Governance
- Finance (Please note: Further information on finance performance is provided through budget reports and finance related audit.)
- Sustainability, Section 6 Biodiversity Duty, Net Zero, Socially Responsible Procurement Duty
- Welsh Language
- Public Sector Equality and Socio Economic Duties, Child Poverty
- Safeguarding
- Information Governance, Data Protection and Cyber Security
- Workforce, Health and Safety, Social Partnership Duty (Please note: Currently a separate report is provided on Health and Safety.)
- Planning

It provides resilience scores on:

- Accountability Documentation
- Incidents, engagement with regulators, complaints, monitoring
- Culture and Implementation

Resilience Score		
Vulnerable	Of concern	Resilient

A range of additional information is recorded on the Authority's performance reporting system. Where tolerance levels or triggers have been reached resulting in Vulnerable or Of concern resilience score additional information has been included in relevant section of the report and management response provided.

This report also outlines progress against corporate improvement areas identified within Annual Governance Statement and Authority's Delivery Plans.

This report is supplemented by internal audit activities with agreed actions from audits monitored via the Audit Action Log.

Following request from Operational Review Committee to provide updates on Green Room Development via performance monitoring to Members, this activity has been added to this report. This is because it falls outside scope of Priority Projects/ Indicators in terms of Well-being Objectives.

The reporting period is for the end of quarter 3 2024/25 (December 31).

Planning Statistics

Following upgrade to planning system, issues have arisen in terms of the functionality of the associated dashboard reporting system. Officers have worked on interim solution to be able to provide some data to Welsh Government for Q1, Q2, Q3. However there remains data gaps, in particular for enforcement. Although a new Welsh Government return report for the system has now been issued by the supplier, officers on testing remain concerned of reliability and accuracy of outputs. Officers are exploring options in terms of moving to a different provider due to issues that have arisen during the upgrade.

Activities to improve resilience scores

Since Q2 more policies are now on the new staff intranet in the new template with version control. Performance and Compliance Officer is working on tracker document this will help to identify outstanding priority areas and to inform forward work programme for 2025/26 and future years.

Staff have progressed work to support the Authority to comply with the Social Responsible Procurement duty, with the Socially Responsible Procurement Strategy and Objectives approved at the October NPA.

Head of Decarbonisation has progressed work on the Asset Management Strategy and associated policy. Drafts are in place and are currently going through internal consultation processes before they go for approval.

Updated Retention Schedule approved by Management Team in October and Record Management and Retention Policy approved at October NPA. Now retention schedule has been completed, focus will move to creating up to date record of processing.

A data protection assessments and third party processor register has been created for quarterly review by Management Team. Further work needed to refine register and engage management team with its use on ongoing basis.

92% of staff have now signed the new ICT User Policy, a significant increase on the 71.2% at end of Q2. Staff who have not signed the policy have been identified and this is being followed up with them. Progress being monitored via Management Team.

Disciplinary Procedure has been reviewed and updated by HR team and approved by Management Team. Updated version published on staff intranet.

The Authority received notice of certification of completion of the Audit from Audit Wales for Audit of Accounts 2023/24 on 7/11/24. A copy of the accounts has been published on the Authority's website.

Review of planning enforcement policy has been undertaken, additional assessment work to be carried out prior to policy going to NPA for approval.

An annual training session for all Community Council was held in early November focusing on planning legislation, enforcement and policy. This training is delivered via on-line sessions in the evening to allow for best attendance

RECOMMENDATION:

Members are requested to RECEIVE and COMMENT on the Assurance Monitoring Report.

Assurance Monitoring - Compliance, Public and Statutory Duties and Corporate Improvement

This is supplemented by internal audit activities with agreed actions from audits monitored via the Audit Action Log.

Reporting Period: End of December 2024/25

Resilience Score		
Vulnerable	Of Concern	Resilient

A range of additional information is recorded on the Authority's performance reporting system. Where tolerance levels or triggers have been reached resulting in Vulnerable or Of Concern resilience score additional information has been included in relevant section and management response provided.

This report also outlines progress against corporate improvement areas identified within Annual Governance Statement and Authority's Delivery Plans.

1. Governance

Resilience Area		Resilience Score [Q2 2024/25]	Resilience Score [Q3 2024/25]
AD	Accountability Documentation	Of Concern [1 Trigger]	Of Concern [2 Trigger]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Of Concern [1 Trigger]	Of Concern [1 Trigger]
CI	Culture/ Implementation	Of Concern [1 Trigger]	Of Concern [1 Trigger]
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response	
AD	Minor delay impacting on approval date against initial delivery agreement timescales for NPMP. Approval of NPMP has been delayed until Q4 2024/25, to enable follow up engagement to be carried out with partners who responded to NPMP consultation. [1 Trigger]	Minor delay is enabling wider engagement with NPMP partners in response to their consultation responses and will strengthen the plan going forward in terms of its status as a partnership plan.	
AD	Not all current policies available to staff on staff intranet. Need to address version control, historic issues with document control for remaining policies. [1 Trigger]	Since Q2 more policies are now on the new staff intranet in the new template with version control. Performance and Compliance Officer working on tracker document this will help to identify outstanding priority areas for review/ movement to new template and to inform forward work programme for 2025/26 and future years. Updated scheme of delegation also provides greater clarity in terms of when policy needs to	

		go for NPA approval and when can be delegated to approval to Management Team.	
IRCM	2 Complaints referred to the Ombudsman ytd. Both referred in Q1.	One complaint was referred to the Ombudsman and was not upheld. The Authority it awaiting the outcome of the second complaint referred to the Ombudsman.	
CI	% Member attendance at training ytd remains below 65% target at 56.25% ytd at end of Q3 and within Of concern threshold. [1 Trigger]	Discussed at People Services Committee 18/9/24. Agreed to include as 'in attendance' any Member who advises that they have watched a recording of the session. Trial of half-day rather than full-day study tour resulted in higher attendance and may provide a model going forward. PDR process will help identify training needs and provide opportunity for Members to influence training plan, with training needs to be discussed at the March People Services Committee.	
Improvement Activities Since Previous A & C Committee Meeting			
<ul style="list-style-type: none"> Updated Integrated Assessment Trigger and Guidance document approved by Management Team. NPA approved updated scheme of delegation at October NPA. 			
Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
G20	Finalise set of revised values for the Authority. Carry out range of activities to embed Authority's new values.	Amber	Progress Status: In Progress/ Behind Work to be completed over next few months
G20	Review of integrated assessments template, information provided to Members and development of project checklist or other tools to reflect new priorities and to maintain compliance with relevant statutory duties.	Amber	Progress Status: In Progress/ Behind Revised guidance, trigger document and template approved by Management Team in October. Copy of revised guidance, trigger document and template published on staff intranet. Information on Trigger document and link to templates and guidance included in NPA report deadline notification for officers. Next step to look at development of project checklist.
G20/ AGS	Corporate Improvement Project on Management and Communication of Corporate Policies, Procedures and Templates	Green	Progress Status: In Progress / On Track Updated Managing Stress Policy, Time of for Public Duties Policy, and Disciplinary Procedure was agreed by Management Team in November. Safeguarding policy was presented to December NPA, discussions had at the meeting highlighted need to ensure pre consultation for comments is carried out with Members before a policy goes for NPA approval. Some policies moved into new template for review, further mop up work needed in Q4. Tracker document in development to support forward work programme.

AGS	Implement agreed recommendations from Audit Wales review of Governance	Green	Progress Status: In Progress / On Track Welsh Members Seminar organised by the Authority was well attended and well received. Presentation by the Minister and WG officials. Revised PDR form to be considered by People Services Committee in January for comment. 5/6 Welsh Government Member appraisals undertaken. Training Plan to be prepared for March Committee. Welsh Government Officers are also preparing a guide for Members on NPA Governance upon which officers have had the opportunity to comment.
SD21	PDP for Members capture any skills gaps/ development opportunities linked to new priorities	Green	Progress Status: In Progress / On Track Timetable for PDRs to be agreed at People Services Committee 15/1/25. Member Development Strategy to be reviewed and Member training Plan for 2025 to be presented to the next meeting.

2. Finance

Further information and assurance on finance performance is provided through budget reports and finance related audit.

Resilience Area		Resilience Score [Q2 2024/25]	Resilience Score [Q3 2024/25]
AD	Accountability Documentation	Resilient [0 Trigger]	Resilient [0 Trigger]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Triggers to be developed and agreed.	Triggers to be developed and agreed
CI	Culture/ Implementation		
Improvement Activities Since Previous A & C Committee Meeting			
<ul style="list-style-type: none"> Although statement of accounts was delayed, relevant notifications were put in place as required by Regulation 10(4) of the Accounts and Audit (Wales) Regulations 2014 (as amended). The Authority received notice of certification of completion of the Audit from Audit Wales for Audit of Accounts 2023/24 on 7/11/24. A copy of the accounts has been published on the Authority's website Resolving Of Concern issue in Q2. However, Authority will need to continue to monitor next year any delays around Audit Wales financial audit timetables and how this impacts the signing of draft accounts by May deadline. 			
Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
RBF22/ AGS	Continue to work with Members and Welsh Government to manage mid term financial challenges and pressures.	Green	Progress Status: In Progress / On Track Budget workshop undertaken in December with regular meetings scheduled for 2025.

RBF22	Management Team members to carry out mid/long term financial mapping and scenario planning for Authority and departments to manage future deficits identified in 2024/25 budget planning.	Amber	Progress Status: In Progress/ Behind Management team members completing zero based budgeting approach for their cost centres. Most completed and will be used to form the budget for 25-26. Due to tight timeline, scenario planning to be completed during 25-26 to identify areas of cost saving, discontinuing activities etc.
RBF22	Undertake a Zero Based Funding exercise to reallocate funding to key priorities and also identify funding gaps.	Green	Progress Status: In Progress/ On Track In progress. Management team members completing zero based budgeting approach for their cost centres. Most completed and will be used to form the budget for 25-26.
RBF22	Review project identification/ prioritisation process for funding to align to new priorities and delivery plan funding gaps. Identify flagship/ landscape scale projects linked to actions within Delivery Plans.	Green	Progress Status: In Progress/ On Track Working with staff members to develop concepts for projects for SLSP / SPF and Brilliant Basics.
RBF22	Review and identify commercial opportunities across all Authority activities and assets and develop a commercial opportunity strategy with SMART set of measures.	Green	Progress Status: In Progress/ On Track Work ongoing to be implemented as part of mid term financial work
RBF23	Additional Marketing Support for Centres – Contract for specialist marketing support (Funded – 10K for 2024-25)	Green	Progress Status: Complete/ On Track Funding used to support the filming and production of three promotional films for the visitor attractions and the final films have now been received. The films will be used to market the visitor attractions via social media and media partners in the coming months.
RBF23	Development and delivery of fundraising strategy.	Green	Progress Status: In Progress/ On Track No update during December due to work on grant applications and other Authority priorities.

3. Sustainability / Section 6 Biodiversity Duty / Net Zero / Socially Responsible Procurement

Resilience Area		Resilience Score [Q2 2023/24]	Resilience Score [Q3 2024/25]
AD	Accountability Documentation	Of Concern [2 Trigger]	Of Concern [2 Trigger]

IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Of Concern [1 Trigger]	Of Concern [1 Trigger]
CI	Culture/ Implementation	N/A	Triggers to be developed and agreed.
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response	
AD	Estates/ Asset Management Strategy and up to date Asset Management policy not in place. However work has been progressed on development of the strategy and associated policy with drafts developed. [Trigger 2]	Head of Decarbonisation has progressed work and drafts now in place and currently going through relevant internal consultation processes before going for approval. Strategy and Policy has been shared for comment with Asset Management Group and Management Team.	
IRCM	Invoices paid on time (SRPD – Making payments promptly): Within of concern threshold at 95.43% ytd. However worth noting only slightly below 96% target. [1Trigger]	Supplier payments are made weekly for all approved invoices. Delays can occur when incorrect invoices are received or delays in approvals elsewhere in the organisation. Will monitor due to fall between Q2 and Q3. Authority moving to new finance system, should help with processes in future.	
Improvement Activities Since Previous A & C Committee Meeting			
<ul style="list-style-type: none"> • Socially Responsible Procurement Strategy approved by NPA in October supporting compliance with socially responsible duty and requirements to have strategy and objectives. An associated Socially Responsible and Sustainable Procurement Policy was approved at the same time. • EV minibus has been received. 			
Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
D5	Net Zero Welsh Government Reporting – Recording, analysis, submission and improvements in data collection/ recording.	Green	Progress Status: Complete/ On Track Completed for 2023/24. Reporting submitted and acknowledged 20th August. Attended WG review meeting on public sector submissions. Awaiting report from WG.
G20	Updating of Section 6 Biodiversity Signposting document and raising awareness and understanding of duty as part of this process.	Green	Progress Status: In Progress/ On Track Consideration is needed as whether further amendments may be needed in terms of any changes to the Partnership Plan (when agreed), will apply amendments as needed following NPMP approval and then seek to consult with staff.
G20	Review of Authority's Asset Management/ Estates Strategy – to align it with our new objectives/ priorities. Including considerations around	Green	Progress Status: In Progress/ On Track Draft Asset Management Strategy and Policy shared with Asset Management Group and to go to Management Team in January.

	acquisitions for carbon sequestration.		
SD21	Ongoing Members Training Climate Adaptation	Green	Progress Status: In Progress/ On Track Initial training undertaken in Dec 2023. Have received presentation on Newgale adaptation early 2024. Further training will be provided in future when TAN 15 update is published.
AGS 2024/25	Procurement processes / Socially Responsible Procurement - Review of procurement approach and processes to take account of legal changes at Welsh and UK Government level and challenges of decarbonisation.	Green	Progress Status: In Progress/ On Track Final Contracting Standing Orders (CSOs) not expected until March 2025 allowing for delays tied to the legislation. Astari have commenced work on updating the CSOs. However, the legislation has been delayed until at least February 2025. The advice from Astari would be to wait until the new legislation is in place as this has a massive impact on how we will procure compliantly. The Socially Responsible Procurement Policy and Strategy were approved by Members at the October NPA.
Added following request for monitoring from OR Committee	Green Room Redevelopment	Green	Progress Status: In Progress/ On Track Work due to begin end January/ February. Plans will be printed and displayed in Llanion Staff Room.

4. Welsh Language

Resilience Area		Resilience Score [Q1 2024/25]	Resilience Score [Q2 2024/25]
AD	Accountability Documentation	Resilient [0 Trigger]	Resilient [0 Trigger]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Resilient [0 Trigger]	Resilient [0 Trigger]
CI	Culture/ Implementation	Triggers to be developed and agreed.	Triggers to be developed and agreed.
Improvement Activities Since Previous A & C Committee Meeting			
<ul style="list-style-type: none"> Shwmae day event held for staff – with guided walk providing opportunity for participants to learn simple Welsh words inspired by the nature found on the journey and a cake sale, where people had to order their cakes in Welsh. 			

5. Public Sector Equality and Socio-Economic Duties/ Child Poverty

Resilience Area		Resilience Score [Q2 2024/25]	Resilience Score [Q3 2024/25]
AD	Accountability Documentation	Resilient [0 Triggers]	Resilient [0 Triggers]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Of Concern [1 Trigger]	Of Concern [1 Trigger]
CI	Culture/ Implementation	Triggers to be developed and agreed	Triggers to be developed and agreed
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response	
IRCM	Equality monitoring data for staff held on HR system is within of concern threshold at 70.25%. However overall Authority has seen return to more consistent levels seen before move to the new HR system. [1 Trigger].	Further communication needed with staff. HR to explore with Strategic Advisor best approach to look at how to increase response rates.	
Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
G20	Review of Equality Plan and Objectives	Amber	Progress Status: In Progress/ Behind Draft Equality Plan out for internal and external consultation via online survey. Creation of Easy Read version delayed consultation period slightly and meant plan will need to go to February not December NPA for approval.

6. Safeguarding

Resilience Area		Resilience Score [Q2 2024/25]	Resilience Score [Q3 2024/25]
AD	Accountability Documentation	Of Concern [1 Trigger]	Of Concern [1 Trigger]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Resilient [0 Triggers]	Resilient [0 Triggers]
CI	Culture/ Implementation	Resilient [0 Triggers]	Resilient [0 Triggers]
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response	
AD	Outstanding internal audit action on Safeguarding policy and updated schedule on roles of staff/ volunteers in relation to safeguarding and DBS Checks needed following restructure. [1 Trigger]	The Statement was updated and submitted to the December NPA meeting. Members requested additional changes to statement, and policy went to February NPA and was approved.	

7. Information Governance / Data Protection / Cyber Security

Resilience Area	Resilience Score [Q2 2024/25]	Resilience Score [Q3 2024/25]
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AD	Accountability Documentation	Vulnerable [3 Triggers]	Vulnerable [2 Triggers]
		Of Concern [1 Trigger]	Of Concern [3 Triggers]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Of Concern [1 Trigger]	Resilient [0 Trigger]
CI	Culture/ Implementation	Of Concern [2 Triggers]	Of Concern [2 Triggers]
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response	
AD	Internal Auditors identified several missed opportunities to complete a DPIA. [1 Trigger]	DPO attended Management Team meeting in September to discuss DPIA requirements. DPIA register has been created to help identify and monitor completions of DPIAs. Further work needed to refine register and engage management team with its use on ongoing basis. Wider work to be carried out on reviewing DPIA and workflow and looking at two stage approval process for requests for new systems. In interim CEO requesting DPIAs to be completed prior to agreeing to implementation of new systems. Have seen increase in completions of DPIAs in Q3.	
AD	92% of staff have signed the ICT user policy, below 98% resilient target. Note this is an improvement on end of Q2 where only 71.72% had signed the new ICT User Policy, as a result moved from Vulnerable to Of Concern. [1 Tigger]	Staff who have not signed the policy have been identified and this is being followed up with them. Progress being monitored via Management Team.	
AD	Data Protection Policy was due for review in 2024 (last reviewed 2021). Work didn't commence as planned to move it into new template in Q3 for DPO to review. [1 Trigger]	Policy will be moved into new template and DPO asked to review in Q4 and added to forward work programme for Corporate Policy Review for Q4 2024/25 and Q1 2025/26. Officer capacity impacted on ability to do this in Q3.	
AD	Across Authority up to date records of processing needs to be put in place. [1 Trigger]	This activity has been affected by organisational restructure and impact on record management structures. Officer capacity has also been an issue due to competing priorities. Work will now commence following completion of updated retention schedule, focusing first on Teams who have gone through the F Drive restructure and on areas where new systems are being implemented.	
AD	Publication Scheme significantly out of date and requires review. [1 Trigger]	Democratic Services Officer and Performance and Compliance Officer have met to kick start review. Have looked at format and approach taken by other local Authorities and will look to update and improve Corporate Document section pages of website as part of this process	

			to make it easier for people to find information they need. Further work to progress the review has already commenced in Q4.
CI	Cyber Security Training Completions at 92.12% (88.88% in Q2) and Data Protection Training Completions at 91.41% (92.86% in Q2) are within of concern threshold (76% - 95%). [2 Triggers]		Following internal audit recommendations, we are carrying out full review of Data Protection and Cyber Security Training to look at suitability of training provided, provision of training for all staff and Members and most effective system to use for delivery and monitoring. Refresher Data Protection Training was due for number of staff in December and January. Follow up e-mail sent to Management Team members in January with training status of their team and asked to liaise with relevant staff who have training outstanding. Those with outstanding Data Protection Refresher training should also be receiving reminders weekly from the system.
Improvement Activities Since Previous A & C Committee Meeting			
<ul style="list-style-type: none"> Retention schedule approved by Management Team in October with sharepoint list version shared for staff use on staff intranet. E-mail communication sent out to staff. Record Retention and Management Policy approved by Members at October NPA. Creation of DPIA and third party processor register. Resolving Of Concern issue in Q3. 			
Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
DT29	Develop IT Action Plan into formal strategy (IT Infrastructure & Systems).	Green	Progress Status: Complete/ On Track Strategy approved Audit committee 31/7/24
AGS	Approval of new ICT User Policy and Information and Data Security Policy.	Green	Progress Status: Complete/ On Track Revised ICT User Policy and Information and Data Security Policy approved by Members at May NPA. [Action Complete]
DT29	Review our Cyber Security Training offer and implement new training programme (Digital Skills)	Amber	Progress Status: In Progress/ Behind New IT technician recruited, will review the training on both ELMS and VDPO for comparison. With the view to moving to ELMS platform if suitable. Communications for IT (Cyber security, Data protection and digital skills) to be developed 2025.
DT29	Audit Staff's Digital Skills and implement training Programme (Digital Skills)	Amber	Progress Status: Not Started/ Behind Awaiting new IT technical officer starting.
AGS	Implementation of Microsoft 365 across the Authority.	Green	Progress Status: In Progress/ On Track Some minor progress with regard to ParcNet (Sharepoint) and Teams usage. Compassionate leave within team as well as progressing of departmental re-org files, probably means this is slightly behind where it

			should be. Future IT resource currently being recruited should help here
AGS/ DT29	Record Management Project - Implementation of actions to support improved information governance. Completion of restructure of F/Drive and Movement of Digital Files where needed to Teams/ Sharepoint.	Amber	Progress Status: In Progress/ Behind Updated Retention Schedule approved by Management Team, sharepoint list version available for staff on staff intranet. Record Management and Retention policy approved by Members at October NPA. Further work on F/Drive restructure delayed in Q3 due to officer capacity.
DT29	Development of new business case process/ procedure for approval of new systems and apps. (Improving processes for IT resource requests.)	Green	Progress Status: In Progress/ Behind Draft proforma has been trialed with Head of Engagement and Inclusion. No further updates.
DT29	Development of list of systems / licence requirements for each job role under new structure. Amend request to fill forms to take account of IT related costs for that job role (Improving processes for IT resource requests) .	Amber	Progress Status: Complete/ On Track Request to fill form updated and currently being used taking into account IT related costs for that job role.
DT29	Ensure revised project development process takes account of full cost recovery/ cost implications tied to systems/ licence / IT related costs and any Web Accessibility or Welsh Language compliance issues. (Improving processes for IT resource requests)	Amber	Progress Status: In Progress/ Behind Updated request to fill form to prompt cost implications on IT when recruiting. Project proforma (for IT projects) trailed will be uploaded with process on Parcnet in 2025.

8. Workforce /Social Partnership Duty/ Health and Safety

Please note: Currently a separate report/ dashboard is provided on Health and Safety as a result resilience area triggers for health and safety have not been included in this report, except for RIDDOR incidents. Work will be undertaken to explore inclusion of appropriate triggers in this document, without duplicating what is in the Health and Safety Dashboard/ Report.

Further work is also needed with People Services to align triggers with data reported at People Services Committee and to review mandatory training and monitoring requirements.

Resilience Area	Resilience Score [Q2 2024/25]	Resilience Score [Q3 2024/25]
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AD	Accountability Documentation	Of Concern [2 Triggers]	Of Concern [1 Trigger]
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Resilient [0 Triggers]	Of Concern [1 Trigger]
		Further Triggers to be developed and agreed	Further Triggers to be developed and agreed
CI	Culture/ Implementation	Resilient [0 Triggers]	Resilient [0 Triggers]
		Further Triggers to be developed and agreed	Further Triggers to be developed and agreed
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response	
AD	Issues around historic poor document/ version controls for HR related Policies. Progress has been made on review of HR policies, however a number are still remaining. [1 Trigger]	HR have made progress over Q2 and Q3 of updating HR policies and moving them into new template with improved version control. Outstanding policies for review identified as part of corporate policy tracker and will be added to forward work programme for corporate policies for 2025/26.	
IRCM	2 RIDDOR incident in Q3 - Both incidents involved an employee who as a result of the incident was off work for a period of 8 days or more. Reported as RIDDOR in line with HSE guidelines.	These have been investigated locally. The 2 incidents were not linked. Methods of working and risk assessments have been reviewed. Any lessons to be learnt from 2 RIDDOR incidents will be progressed by Health and Safety Group.	
Improvement Activities Since Previous A & C Committee Meeting			
<ul style="list-style-type: none"> Disciplinary Procedure has been reviewed, updated, approved by Management Team and published on staff intranet – resolving an Of Concern trigger in Q2. 			
Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
DT29	Updating of induction process to reflect new priorities (Staff, Volunteers and Members induction.)	Amber	Progress Status: In Progress/ Behind This work has been allocated resources from mid-January 2025 when the pay & Grading Appeals will have been arranged and largely completed.
DT29	Implementing Management Team Development Programme	Green	Progress Status: In Progress/ On Track Work ongoing with a number of training activities organised
SD1 / AGS	Complete and review outcome of Pay and Grading Review	Red	Progress Status: In Progress/ Behind The deadline for appeals was 6 December 2024. A number of informal appeals took place in December for those 9 posts that had been red circled with remainder scheduled for early January 2025.
SD21	Updating of Annual Appraisal/ Work and Well-	Amber	Progress Status: In Progress/ Behind This work has been put on hold until

	being process to capture progress against new priorities and identify skills gaps and development opportunities for all staff.		January 2025 due to staff turnover and Pay and Grading Review implementation and appeals
SD21/ AGS	Development and delivery of training plan/ programme 2024 - 2027 for all Staff, Members (through Member development training plan) and volunteers incorporating new priorities and reflecting areas identified within Skills and Development Delivery Plan for training.	Green	Progress Status: In Progress/ On Track Policy development work is continuing and the next schedule of policies for review is being compiled with Staff reps Group being asked to inform the priority list. Work on the Training Plan for Volunteers so that we can dovetail with training plans for staff and members is likely to slow down due to the resignation of the Volunteer Development Manager.
SD1	Explore new pathways to employment opportunities through skills development/ training / apprenticeship opportunities. Review our offer for further and higher education students.	Amber	Progress Status: In Progress/ Behind A successful 1 week work placement has taken place within Countryside Management and a Pembrokeshire College student. It is anticipated through the evaluation process that this will generate further requests for placements. Members of Pembrokeshire College staff attended a meeting with several Team Leaders and Managers to meet key players and gain insight into suitable roles for work placements and the limiting factors.
AGS/ DT29	Review of Health and Safety – ensuring we can deliver our new priorities in a way that is aligned to our Health and Safety obligations. Review and update of Risk Assessments to new template following recommendation from Internal Audit.	Green	Progress Status: Complete/ On Track The risk assessments have been standardised, evaluated and uploaded to Teams to provide competent access to risk assessments. Teams also allows PDF versions to be generated which have been uploaded to Parcnet (SharePoint). The control and management of the documents going forward will be limited to certain individuals so that auditing can be achieved. A management document has also been produced to guide users in how to edit and secure their documents for review. IT will issue emails and indicate which risk assessments are out of date if they are not reviewed on time.

9. Planning

Note: Following upgrade to planning system, issues have arisen in terms of the functionality of the associated dashboard reporting system. As a result, not all figures

were available for consideration when producing this assurance report and figures considered have been done so in the context of this wider issue.

Resilience Area		Resilience Score [Q2 2023/24]	Resilience Score [Q3 2024/25]																								
AD	Accountability Documentation	Of Concern [1 Trigger]	Of Concern [1 Trigger]																								
IRCM	Incidents/ Regulators/ Complaints/ Monitoring	Vulnerable [1 Trigger] Please see above note on planning data.	Vulnerable [1 Trigger] Please see above note on planning data.																								
CI	Culture/ Implementation	N/A	N/A																								
Ref	Triggers identified: Vulnerable/ Of Concern	Management Response																									
AD	Planning Enforcement and Compliance Policy last reviewed and adopted 2011. [Trigger 1]	Review has been undertaken, additional assessment work to be carried out prior to policy going to NPA for approval.																									
IRCM	Submission of Quarterly Planning Performance Returns to Welsh Government have been impacted on by issues with data reports/ dashboards as a result of APAS upgrade. [Trigger 1]	<p>Following upgrade to planning system, issues have arisen in terms of the functionality of the associated dashboard reporting system. Officers have worked on interim solution to be able to provide some data to Welsh Government for Q1, Q2, Q3. However there remains data gaps, in particular for enforcement. Although a new WG return report for the system has now been issued by the supplier, officers on testing remain concerned of reliability and accuracy of outputs. Officers are exploring options in terms of moving to a different provider due to issues that have arisen during the upgrade.</p> <p>See below key figures where data has been available:</p> <p>% Planning applications determined within statutory and agreed timescales per quarter</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> </tr> </thead> <tbody> <tr> <td>2024/25</td> <td>77.00 (Amber)</td> <td>80.77 (Green)</td> <td>79.61 (Amber)</td> </tr> <tr> <td>2023/24</td> <td>67.00</td> <td>73.00</td> <td>55.00</td> </tr> </tbody> </table> <p>Average time taken to determine all planning applications in days per quarter</p> <table border="1"> <thead> <tr> <th>Year</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> </tr> </thead> <tbody> <tr> <td>2024/25</td> <td>98</td> <td>99</td> <td>96</td> </tr> <tr> <td>2023/24</td> <td>121</td> <td>123</td> <td>123</td> </tr> </tbody> </table> <p>Note: There has been a positive trend of reduction in time taken to determine all planning applications in days compared to 2023/24 across all quarters.</p>		Year	Q1	Q2	Q3	2024/25	77.00 (Amber)	80.77 (Green)	79.61 (Amber)	2023/24	67.00	73.00	55.00	Year	Q1	Q2	Q3	2024/25	98	99	96	2023/24	121	123	123
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Ref	AGS and Delivery Plan Actions	RAG Status	Progress Commentary
	Review of Adopted Local Development Plan 2	Green	Progress Status: In Progress/ On Track Review of LDP 2 commenced in September 2024. The Strategic Policy team have undertaken a full review of LDP 2 and prepared a Review Report. The Review Report was presented to Members at NPA on 11 December and Members approved public consultation on the Report. Public consultation is being undertaken for a 6 week period from 10 January to 21 February.
	Planning Administrative Process Review	Amber	Progress Status: In Progress/ Behind The delivery of the upgraded data management system signed off by the previous Development Management Manager for planning has resulted in an inability to deliver our Welsh Government returns. Development Management Manager and Director of Placemaking, Decarbonisation and Engagement have been working to try to resolve through the company, and some of the stats have now been sent off manually, but the system is still causing significant difficulties. Development Management Manager and Director of Placemaking, Decarbonisation and Engagement are looking at potential alternative providers - so this is still under review.
	Review of Enforcement Service	Green	Progress Status: In Progress/ On Track A draft revised Enforcement Charter has been written for presentation to NPA in the New Year. The new Enforcement Assistant is working well with the 2 officers to streamline the response time for enforcement complaints.
	Planning – Engagement with Community Councils/ Provision of Training	Green	Progress Status: In Progress/ On Track An annual training session for all Community Council was held in early November focusing on planning legislation, enforcement and policy - this training is delivered via on-line sessions in the evening to allow for best attendance