Brecon
Beacons
National
Park
Authority
Annual
Governance
Statement
2013-14



BRECON BEACONS NATIONAL PARK AUTHORITY

Annual Governance Statement 2013-14



I. Introduction

The Brecon Beacons National Park Authority ("the Authority") is responsible for ensuring that its business is conducted in accordance with the law and proper standards, that public money is safeguarded and properly accounted for and used economically, efficiently, and effectively. It is a Welsh improvement authority under section I of the Local Government (Wales) Measure 2009 and as such has a general duty under section 2 to make arrangements to secure continuous improvement in the way in which its functions are exercised.

In 2010/11 the Authority approved a Code of Corporate Governance, which is consistent with the principles of the CIPFA/ SOLACE Framework 'Delivering Good Governance in Local Government'. The Code of Governance sets out how we aim to provide public services and our accountability to our stakeholders and the wider community. It outlines the systems and processes, cultures and values by which decisions are made and functions undertaken to deliver the purposes and duty of the National Park Authority.

The CIPFA guidance recommends that the review of effectiveness of the system of internal control that local authorities are required to undertake in accordance with the Accounting and Audit Regulations should be reported in an Annual Governance Statement. In Wales the inclusion of the Annual Governance Statement in the Statement of Accounts is voluntary. In 2009/10 CIPFA also published an "Application Note to Delivering Good Governance in Local Government: A Framework". This note has been developed to advise on the application of the "Statement of the Role of the Chief Financial Officer on Local Government" under the CIPFA/SOLACE Framework "Delivering Good Governance in Local Government". The Authority has decided to adopt the CIPFA framework and Annual Governance Statement approach for 2013/14.

A review of effectiveness uses the work of the Authority, its members, committees and senior managers, as well as the work of internal and external auditors, to examine its structures and processes in order to demonstrate both compliance and improvement.

2. The Purpose of the Governance Framework

The governance framework comprises the committees, systems and processes, cultures and values, by which the Authority operates, and the way in which it is accountable to, engages with and leads the community. It enables the Authority to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

Internal controls are a significant part of that framework and are designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness. The Authority's risk process is designed to identify and prioritise the risks to the achievement of

its objectives, and to evaluate the likelihood of those risks occurring and the potential impact, through regular review of mitigating actions. The notion of robust organisational resilience is seen as the primary indicator of the Authority's ability to respond positively should damaging events occur.

3. What is the Framework?

The Governance Framework comprises the six CIPFA principles of good governance:

- Principle I: Focusing on the Authority's purpose, on outcomes for the community including citizens and service users and creating and implementing a vision for the local area
- **Principle 2**: Members and Officers working together to achieve a common purpose, with clearly defined functions and roles
- **Principle 3**: Promoting Values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour
- **Principle 4**: Taking informed and transparent decisions which are subject to effective scrutiny and managing risk
- **Principle 5**: Developing the capacity and capability of members and officers to be effective
- **Principle 6**: Engaging with local people and other stakeholders to ensure robust public accountability

4. Action against Audit Recommendations 2012-13

In the Annual Governance Statement for 2012-13 the following governance and audit issues were identified and actions identified. The following sets out progress made to address these issues:

Action taken		
Identified by WAO Annual Improvement Report issued April 2013		
The methodology to validate and monitor performance indicators has been established. Compliance will be monitored at Directorate and CMT level with a full review of the process		
and detail by CMT in June 2014		
The three Parks attended a WAO workshop and the three responsible officers subsequently held a video conference and a meeting to agree a common format for the Annual Governance Statement and possible methods of evaluation		
The Annual Audit Plan approved by the Audit and Scrutiny Committee for 2013/14 included a follow-up audit of the management actions agreed in relation to 2012/13 Audits. The findings were reported to the Committee in May 2014.		

Governance /Audit issues identified	Action taken
CMT needs to avoid late publication of the	Corporate Improvement Plans (I and 2)
Corporate Improvement Plan by ensuring	complied with reporting requirements
officers comply with reporting requirements	
Compliance by officers in reporting	CMT has reiterated that non-compliance is a
performance on Ffynnon or to Committee	performance issue addressed through the
needs to be strengthened	Performance Management Review process and
	will be checking this at year end PMRs. A
	mandatory drop in session has also been
	scheduled to ensure all PIs are logged and
	indicator sheet completed.
Need for more feedback from the public to	Full residents survey carried out early in
provide evidence of impact of services and	2013/14 which has informed subsequent
perception of the Authority	objectives and work programmes. Surveys also
	carried out during all scrutiny reviews and
	members of the public sit on Scrutiny Panels. Survey carried out on the scrutiny process.
	Customer satisfaction survey conducted by the
	planning directorate
Lack of clarity on effectiveness of partnership	Generic role description in place for members
working by members representing the	representing the Authority on outside bodies,
Authority on outside bodies	and ongoing review of the value of external
, , , , , , , , , , , , , , , , , , , ,	representation before AGM in June 2014. Not
	all members are reporting back to the
	Authority but there are good examples of
	effective reporting.
Need to review the effectiveness of decision	Review of effectiveness of Audit and Scrutiny
making structures – self evaluation	Committee completed and an action plan is
	being implemented. This will be a template for
	future reviews of the Authority and PAROW.
	Review of working groups carried out and
	changes agreed to reduce duplication and
	maximise member and officer resource.
	Changes to Scheme of Delegation (planning and
	rights of way, and enforcement) to improve
	efficiency of decision making. Changes to terms of reference of National Park Management Plan
	Steering Group to include State of the Park
	Report and to oversee review of Plan
Ensure members are aware of and using new	Member development session delivered on new
protocols and procedures to comply with high	ethical protocols agreed in 2013 (Local
standards of conduct	Resolution, and Declaration of Interests)
Evaluate effectiveness of scrutiny process in	Annual evaluation of scrutiny (process and the
securing improvements to service delivery and	outcomes) has been scoped and will commence
ensuring that members are able to monitor	April 2014
performance	
Need to ensure up to date Communications	Updated Communications Strategy to be
Strategy to include how the Authority will	completed in 2014
communicate with the public and how it will	
engage through scrutiny reviews	

5. Review of Effectiveness

Principle I: Focusing on the Authority's purpose, on outcomes for the community including citizens and service users and creating and implementing a vision for the local area

What's in Place	How do we know it's working?	How have we evaluated and improved?
National Park Management Plan 5 year plan 2010-2015	A working group of officers and members monitors progress of the actions in the current NPMP.	The remit of the working group has been extended to include the State of the Park report and oversight of the production of a revised NPMP.
	All corporate goals and objectives now emanate from the NPMP so the Improvement Plan part 2 reports on achievements against measures of success that relate back to the NPMP actions via Improvement Objectives and the role of teams in progressing these is monitored through the PMR process. A new "State of the Park Report", linking to themes in the management plan, will be published in 2014. A draft version with a clear structure and robust set of measures has been reviewed by the management team.	Work to deliver the revised NPMP in 2015 is underway with a new consultation and engagement strategy in development. Members recognised that actions might need to span financial years and approved continuation of NPMP themes as corporate goals for the life of the Plan, but with more clearly defined outcomes and measures as seen in the latest Improvement Plan part 1. Gaps in the suite of indicators for the State of the Park report have been identified, captured in a "wish list" and linked to the Research Prospectus. Residents Survey has given useful information about what is important to communities and individuals, which is being used to inform policy and priorities. A scrutiny study on inspiration and benefit of Park designation has informed strategic priority setting. A review of "orphan actions" has been carried out and most have been or are being progressed with a view to completion by 2015.
Local Development Plan LDP Adopted December 2013	To effectively assess the ability of the LDP to implement its policies, the plan will be subject to review every four years. This provides the opportunity to review the progress in	An Annual Monitoring Report will not be produced and submitted to the Welsh Government until 31st October 2015 as the plan was only Adopted four months prior to the end of the financial year.

implementing the policies and make modifications where appropriate.

The National Park is required by the Welsh Government to produce an Annual Monitoring Report (AMR) to be submitted to the Welsh Government by 31st October each year following the adoption of the LDP.

LDP.

The monitoring exercise will

assist the National Park to:-

- Identify where certain policies are not being successful in delivering their intended objective
- Identify gaps in the evidence base, perhaps through a change in the economy, which need to be addressed and reflected in the LDP:
- Identify areas of success which could be used as an example for change throughout the LDP;
- State the intended actions that the NPA will take in rectifying any issues to ensure the successful implementation of the policy or any revision that needs to take place.

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The National Park has constructed a set of targets and indicators which act as a benchmark against which performance can be measured. Targets may relate to the achievement of certain levels of development and may be set annually or at an interim point within the plan period. The target for the whole of the plan is to achieve the implementation of the LDP Strategy.

A range of Supplementary Planning Guidance (SPGs) have been produced to aid policy implementation and will be considered by the Authority on 11 July 2014.

Business Improvement Plan

Both are audited by WAO. Performance management

Have followed advice from WAO to make objectives more outcome

BIP I and BIP2 prepared in line with Local Government Measure.	reviews with staff (87% completed) monitor progress	based. Scrutiny reviews of two improvement objectives (planning paid advice service and archaeology) with action plans for service improvement; Audit and Scrutiny Committee considers and challenges performance exceptions.
Corporate Business Cycle Key decision and review dates identified to ensure compliance with governance and regulatory requirements	Key dates are logged on the Agenda Builder to ensure items are timetabled appropriately.	Internal Audit of governance tracked examples of these in 2012 and found it an effective process. Still issues with timing to enable issues to be discussed by CMT before the appropriate committee. Will be reviewed as part of the work to set up Modern.gov

Principle 2: Members and Officers working together to achieve a common purpose, with clearly defined functions and roles

What's in Place	How do we know it's working?	How have we evaluated and improved?
Role descriptions for all members and specific roles	Members carry out their roles appropriately; Senior Salary holders provide leadership. IRPW recognized the key role of senior members of NPAs and recommended increased remuneration. Personal Development Interviews for all members identify any issues with role, development and effectiveness	Role descriptions approved for Standards Chairman and Member sponsors appointed to support and raise the profile of the Research Prospectus in partnership with Cardiff University. Increasing lack of capacity of members has prompted a review of working groups to encourage members to target their skills where they can be most effective.
Scheme of Delegation in place	Effective and compliant decision making without challenge. No delays through inadequate delegation arrangements.	Changes made to Scheme of Delegation in 2013 to improve workstreams eg. In planning and access issues and enforcement, as well as changes to committee and working group terms of reference to reflect the needs of the organisation. Key role of Corporate Governance Working Group in reviewing delegation changes
Decision and Action Tracking All decisions and actions logged and updated by officers	All incomplete actions monitored by Audit and Scrutiny Committee	CMT now also monitor the database and Directors hold staff accountable for incomplete or unrecorded implementation
· '		of decisions.
Financial and procedural advice in place	Section 151 Officer attends all Authority and Audit and Scrutiny Committee meetings to give	On resignation of Solicitor, a review of legal needs undertaken and SLA now in

What's in Place	How do we know it's working?	How have we evaluated and improved?
Monitoring Officer and Section 151 Officer employed	appropriate advice. Monitoring Officer in place to give legal and procedural advice at all committee meetings. Members are able to seek advice as required.	place with Carmarthenshire CC legal services giving a range of legal advice and effecting savings. This has been reviewed and is working well. On retirement of S151 Officer May 2014 the Authority appointed the Finance Manager as S151 Officer, effecting savings of c£10,000 per annum for the first couple of years and providing full-time support and advice
Working together Members and officers work effectively through working groups and using individual skills to add value and progress objectives.	Member initiated recommendations made to NPA. Member Officer Protocol in place which has not been invoked to date.	Role of Future Directions Forum (members and CMT) in setting budget priorities, followed by workshop with all managers – ensured strategic approach (Oct – Dec 2013). Review of Effectiveness of Audit and Scrutiny Committee January 2014 carried out by members, officers and internal auditors and action plan for improvements approved and is being implemented. Recent review of working groups and NPA approval of mergers will maximize member and officer resource and avoid duplication
Process of two scrutiny reviews each year linked to improvement objectives, report and recommendations approved by NPA.	Public endorsement of process in improving transparency and commitment to service improvements. Action plans for each scrutiny review are developed by officers to deliver the recommendations, approved by CMT and progress regularly monitored by Audit and Scrutiny Committee	Full evaluation of process scheduled for April 2014. Survey carried out in Jan/Feb 2014 of all members, officers and public who had contributed to the process – positive response. Scrutiny leading to improvements eg. Review of charges and increase in fees for planning paid pre-application advice service approved March 2014.

Principle 3: Promoting Values for the Authority and demonstrating the values of good governance through upholding high standards of conduct and behaviour

What's in Place	How do we know it's working?	How have we evaluated and improved?
Strong leadership and culture	Chairmen are elected for successive terms on the strength of their performance and through making a case	Member PDIs have highlighted development needs included additional guidance on chairing /
Members carry out roles appropriately and provide	for re-election at the AGM. No challenges have been made to Authority	presentation skills which will be delivered in July 2014.

What's in Place	How do we know it's working?	How have we evaluated and improved?
strategic direction. Supported by member induction and development framework through which the culture is communicated and endorsed, and a member mentoring scheme is in place	decisions. The webcasting has provided evidence of effective leadership. The Member Development Programme reflects training needs identified through their Personal Development Interviews.	Webcasting has encouraged Chairs to review their own performance.
Regulatory Advice All appropriate protocols in place and published on website eg. Standing Orders, Code of Conduct, Member Officer Protocol, Planning Protocol.	Number of complaints upheld by Ombudsman (two in 2013/14), no member on member complaints. Reviewed every two years by Corporate Governance Working Group but interim changes considered if needed. The Standards Committee has not needed to convene to consider any breaches of the Code of Conduct or Member Officer Protocol.	Ombudsman's recommendations to amend procedures in relation to two upheld complaints have been implemented to improve the areas of complaint. Two new protocols approved in 2013: Members Dispensation Protocol (in response to a systemic failure which prevented some NPA members seeking dispensation to speak on a planning application from their host authority) and Local Resolution Protocol in response to advice from the Welsh Government that Standards Committees should consider member on member complaints rather than the Ombudsman. Member Development sessions delivered on these.
Good Governance Standing Orders, Terms of Reference & Scheme of Delegation in place	Standing Orders subject to regular review, which are followed in all meetings led by strong chairs. WAO Annual Improvement Report 2013-14: "The Authority has made significant progress in its aim of improving public confidence in, and accessibility to, the Authority's conduct of business and governance." Auditor General's opinion on the Authority's accounts as satisfactory.	The webcasting of all meetings has enabled members and officers to review their own performance (some mentoring to take place in 2014) and the public to view the Authority's governance in action. Members and Officers have provided extensive guidance to other local authorities embarking on webcasting in 2013 and hosted the first meeting of the Wales User Group in April 2014. While not required to provide remote attendance facilities for members, the Authority has opted to trial this for the Standards Committee and has approved a protocol for this. It was trialled successfully on 3 June 2014 and will facilitate attendance of two Cardiff based members via video conference

What's in Place	How do we know it's working?	How have we evaluated and improved?
		from the Association of National Park Authorities office in Cardiff.

Principle 4: Taking informed and transparent decisions which are subject to effective scrutiny and managing risk.

What's in Place	How do we know it's working?	How have we evaluated and improved?
Informed and transparent decision	Reports for decision contain all information needed for member	Review of corporate implications started – to be
making	decisions, including a checklist of	completed as part of
Effective, clear decision making, with decisions and	financial, legal, and sustainability implications, and an equality impact assessment, but members challenge if	preparation for Modern.gov installation. Democratic Services have worked with
actions monitored by CMT and Audit and Scrutiny	necessary.	report writers on effective presentation of information (eg.
Committee	All decisions (apart from those exempt under the Local Government Act 1972) taken in public and webcast live.	LDP where there are multiple parts). The NPA has recognised where process could have been
	A survey of webcast users (internal and external) in 2013 showed that overall	better and has taken steps to improve (eg. Writing to all owners/occupiers of Local List
	82% of respondents felt the service was useful or very useful, with the figure for members and external respondents	properties to explain the implications as a result of the adoption of the LDP).
	being higher at 89%. At May 2014 total views stood at 28,707 with an	Development of a Members Dispensation Policy to ensure
	continuous steady increase. This has reduced the cost from £2.45 per view to just 82p.	that members of local authorities submitting planning applications with potential gains are able to apply for
	All decisions and actions logged and monitored by CMT and Audit and Scrutiny Committee and officers held to account for any incomplete actions.	dispensation to speak. Training has been delivered on this by the Monitoring Officer.
	WAO Annual Improvement Report	Committee management system procured which will facilitate
	2013-14: "The Authority is a good example of how a local authority can encourage more stakeholder engagement	access by the public to all committee agendas and decisions
	with its planning and decision making."	Webcasting has encouraged
	"the Authority's approach to evaluating and reporting on its performance continues	Chairs to explain meeting procedure for the benefit of the
Well-defined budget-setting and virement processes	to improve, supported by its inclusive approach to governance."	public eg. why members are leaving the room having made declarations of interest.
within the framework provided by Financial Regulations and the Scheme	Internal audit reports relating to budget management system noted that 'budget information is provided to management in	Budget profiling has been
of Delegation, recorded both	a timely manner to provide a sound basis	extended and purchase order

What's in Place	How do we know it's working?	How have we evaluated and improved?
internally on the financial ledger (available to all budget holders), in summary in CMT minutes and externally through Authority agendas/minutes. A fully transparent electronic purchase order system is in place which records clear workflows for each	for control and decision making' Copy documents are readily available for auditors and grant claims. Recent audit visit by EU audit team of Rural Alliances project led to compliments on the systems and information in place.	commitments are included in monitoring reports, together with prior year comparatives. The Agresso finance system is used to provide more sophisticated analysis of particular areas such as gross retail profit and staff costs. Feedback is sought from Members, CMT and managers on the usefulness of budget reports. Summary budget reports to
purchasing decision. Authorisation limits and access are set for each individual. All creditor and debtor invoices, plus purchase order documents are stored in electronic form and can be accessed by all system users, facilitating the audit process.		CMT and Authority are more accurate. Substantial increase in recorded commitments in the current finance system in comparison with the previous system Feedback from managers and administrative staff on access to transaction information.
facilitating the audit process Scrutiny	Very positive anecdotal feedback from	A full review of the scrutiny
Scrutiny reviews of two improvement objectives carried out each year with significant input from the public who sit on the panels to provide objectivity and challenge.	the public as well as members and officers. Williams Commission asked for additional report on the model, and scrutiny is providing evidence for internal and external audit A recent survey of external contributors, Authority members and officers concluded:	process has just been completed and members are expected to highlight whether the current topic selection gives sufficient flexibility to address any areas of concern not covered by improvement objectives. Each scrutiny review builds on the process of the
Audit and Scrutiny Committee receives detailed progress reports on improvement objectives which are not the subject of scrutiny reviews	 85% agree that the scrutiny process is objective and transparent 65% agree that it leads to service improvements and 90% felt it added value to service users 90% agree that it encourages constructive criticism internally and externally 85% agree that contributions from external partners and the public are valued 55% agree that the process has given them a better understanding of what the Authority does and how it operates 68% would be happy to contribute to future scrutiny reviews 	previous one to support continuous learning and improvement. It will also consider whether the process provides value for money, The Authority submitted an entry to the Centre for Public Scrutiny 'Good Scrutiny Awards' but was not shortlisted on this occasion.

What's in Place	How do we know it's working?	How have we evaluated and improved?
Risk A central risk register is held on Ffynnon and CMT make recommendations to Audit and Scrutiny Committee based on likelihood, impact and mitigating action Members and officer receive training in Data Protection Act compliance and members review examples of planning decisions through a Further Improvement Plan site visit.	Mitigating actions and regular review by CMT ensure that risk is managed to an acceptable level Staff have been trained in, and the Authority encourages, individual dynamic risk assessments The Authority's brokers are due to liaise with us over liability and there will be a public liability review this year	Responded to Internal Audit recommendations in 2012/13 by linking risks to corporate goals on the risk register. Risk management workshop with members held Sept 2013 to discuss risk tolerance level which will inform the emerging risk management strategy due by June 2014. Improvements made to risk reporting from June 2014 based on member requests for more information on mitigating actions The adverse weather conditions in early 2014 allowed testing of business systems after successive power cuts. Continuity arrangements have been reviewed in light of lessons learned.
Internal Audit Internal audit annual programme agreed by Audit and Scrutiny Committee based on the themes and risk analysis prepared for the 2012-2015 three year audit plan	Reports and action plans monitored by Audit and Scrutiny Committee. Internal Auditors carried out 9 audits, I of which gained 'Full Assurance' and 8 'Substantial Assurance'. No high priority recommendations were made, but 17 medium priority and 7 low priority recommendations were highlighted. Of the two follow up audits, 9 out of 13 recommendations have been implemented, 2 will not be re-raised and 2 have been partially implemented. Internal Audit Annual Report 2013/14: " (the Authority) has a basically sound system of internal control, which should provide substantial assurance regarding the achievement of the Authority's objectives."	Action plans drawn up and agreed by committee, and implemented by officers. Improved 3 year audit plan agreed to give a more strategic approach to audit and to address capacity issues. As a consequence of self evaluation it is proposed that CMT receive a quarterly update on internal audit action plans to ensure that the Authority complies with all recommendations.
Wales Audit Office		
Nationally determined areas of risk, are the focus of specific national studies which provide comparative information across Wales	Reports lead to improvement recommendations in areas such as asset management, vehicle fleet management.	Recommendations made by WAO specifically to the Authority are implemented as noted in section 4 above.

What's in Place	How do we know it's working?	How have we evaluated and improved?
Risk areas identified by WAO, such as the impact on financial systems and controls of staffing reductions and major restructuring in many Welsh Authorities are the focus of increased audit scrutiny in the annual systems and financial accounts audits.	WAO reporting and follow-up in the Annual ISA260 Report.	There is an opportunity here for the Wales Audit Office to highlight examples of good practice across Wales

Principle 5: Developing the capacity and capability of members and officers to be effective

What's in Place	How do we know it's working?	How have we evaluated and improved?
Member Induction and Development Framework Four year programme of objective based modules	Monitoring completion of each module and stage in the framework. Members carry out roles effectively without challenge	Responded to members' capacity issues in 2013/14 and focused development on essential legal, ethical and corporate needs. This has been further focused for 2014/15 based on feedback through PDIs
Personal Development Interviews All members have an annual PDI with one of the Chairmen or the Member Development Champion	Through the PDI process all members are encouraged to review their roles, responsibilities and skills and identify future training needs which informs the Member Development Programme	The process has been modified this year taking account of length of service and roles. While 'light touch' the process is valued, identifies gaps, encourages aspiration and gives feedback on wider governance issues and enables a Training Needs Analysis to be prepared. Feedback from the three chairs will help to improve the process if needed. In response to difficulties in attendance at short notice the Authority is trialling a remote attendance scheme for its Standards Committee.
Member Development Working Group / Member Champion	The Working Group makes recommendations to the Authority on relevant issues. Member Champion presents and supports these at Authority meetings and represents the Authority at WLGA Member Support Network. Members are engaged with and supportive of what is in place.	The Champion role continues to develop and is valuable in building a cohesive Authority and promoting the value of member development. Authority agreement to merge the working group with the Corporate Governance Working Group will strengthen the role of member development in supporting good governance and will have wider

What's in Place	How do we know it's working?	How have we evaluated and improved?
		benefits in terms of national issues (Williams Report, Welsh Government review of Governance).
		With the demise of the Regional Tourism Partnerships the Authority has opted to defer a decision on appointing a tourism champion or working group pending Wales wide decisions on future tourism structures
WLGA Advanced Charter The Authority gained the Advanced Charter in 2011 and is due to be reassessed in Autumn 2014.	All elements of the Charter criteria are still in place and working effectively. There is strong anecdotal evidence through the PDI process and informally to suggest that members feel supported in their role on the Authority	An evaluation will be carried out against the criteria for the award to demonstrate sustained and high quality support for members
Review of working groups The Authority has a range of member/officer working groups	At the latest review of the effectiveness of working groups it was concluded that some groups have not been working as effectively as expected evidenced by difficulty in scheduling meetings due to member capacity and the fact that some groups rarely meet or are no longer relevant to the Authority's business.	Light touch review of working groups recommended mergers and deletions to maximize member and officer resource and avoid duplication. New Governance and Member Development Working Group will have a key governance role in taking forward new areas of work such as the use of social media as well as governance issues. This represents better use of financial resources and provides better clarity for the public. Recognition of the role of working group chairs as preparation for committee chairs (succession planning). Better reporting of complaints to Audit and Scrutiny Committee and new role of committee in making decisions on Stage 2 complaints allowing overview of detail and trends
External Representation	Reports from members are placed on	The Authority is increasingly
Members represent the Authority on a range of outside bodies	the Members Portal as well as being reported at NPA meetings. There is some inconsistency in the level of reporting back from external meetings	reviewing value for money in determining attendance at external events (eg. ANPA Workshop – restricted to one

What's in Place	How do we know it's working?	How have we evaluated and improved?
	which raises the question of value for money.	member only rather than the four recommended by ANPA Exec). It is currently reviewing all representation on outside bodies in order to maximize and better target member effort and assess value for money to the Authority
Officer Development Line Managers are developed through structured accredited training programmes	The multi-skilling approach as officers broaden their skills and responsibilities has enabled services to be delivered with fewer resources	Continuing to encourage a multi-skilling approach will help the Authority to withstand further financial challenges and maintain service delivery. Capacity within CMT remains an issue.
	Officers have learning opportunity by being involved in a scrutiny review of work in other directorates. They have also developed their presentation skills through webcast meetings, and members have worked with officers who initially expressed concern about being filmed.	
Changes to Scheme of Delegation	Officers review processes and suggest changes to the Delegation Scheme to improve workflow where there are delays or issues	Changes made to the Authority and PAROW Delegation Scheme in December 2013. Further changes may be necessary to take account of staff redundancies/ restructures
Committee Management System	Increasing officer time spent in preparing agendas and chasing reports has reduced efficiency and impacted on progress in other key areas of work.	To address the problem we have procured the Modern.gov committee management system which we anticipate will free up a substantial amount of officer time to fill gaps elsewhere and allow objectives to be met. CMT has agreed to maximize benefits of this system across all directorates for internal meetings. Full training for members and officers will be delivered. This system will provide significant benefits for the public in accessing agendas, minutes and all decision making/democratic information which should also reduce officer time spent on Fol requests.

Principle 6: Engaging with local people and other stakeholders to ensure robust public accountability

What's in Place	How do we know it's	How have we evaluated
	working?	and improved?
Carried out this year for LDP, Local List, Residents Survey, scrutiny surveys, Beacons Bus Social Inclusion & Child Poverty Strategy and Action Plan, Town & Community Council Charter Action Plan	External verification eg. From the LDP Inspector, Planning Aid Wales, feedback from the public that they have been given the opportunity to contribute their views, through consultation, public speaking scheme. The 2013 Residents Survey (householder) had a 21.6% response rate – this is a very good rate for this type of survey, where 10-15% would be the expected response rate. In addition to the excellent response rate, respondents were given the opportunity to sign up to be contacted in the future and over 1,000 did so.	Feedback from communities resulting from the LDP consultation process will be used to inform the development of the next Community Involvement Strategy for the next Delivery Agreement. Local List? The Crickhowell Local List will be progressed as part of the Village Plan process for the town, although this is unlikely to be until 2015/16. Survey of planning customers showed that 91% rated the planning service as satisfactory or better (against a target of 80% and an improvement on 88% in 2011-12. Three Park study on joint working opportunities for planning departments (August 2013) has made recommendations which are being considered for implementation, including joint approaches to reviewing LDPs, consultation and options for shared services and staff. Data from the 2013 Residents Survey (householder) has already been used in feeding back to other consultations and with our engagement with local communities and to inform work on Visitor Management and more widely across the Authority.
Equality Impact	For the first time recently a full	The EIA carried out and process
Assessment	impact assessment was needed for	tested and found to be effective. Public consultation informed the
A screening process is	the proposal to cease the operation of Beacons Bus	report to the NPA to enable a
carried out for all decision	or beacons bus	decision to be taken. The
reports		process will be used should
. 500. 50		future EIAs be required.
Scrutiny Process	Positive anecdotal feedback from	A recent survey of external
Cel dellij 1 1 occis	public (including town and	contributors, Authority members
Public vote on which	ļ · · · · · · · · · · · · · · · · · · ·	and officers concluded:
Public vote on which	community council cluster meetings)	and officers concluded:

How do we know it's working?	How have we evaluated and improved?
that the Authority is more open, transparent and willing to engage and to invite criticism where appropriate. Total of 516 individuals have contributed to scrutiny reviews either as panel members, participated in the public vote or submitted evidence, and we have requests to be a part of future scrutiny reviews. Some panel members have been openly critical in the past about the Authority's governance and openness and now publicly state how much this has improved.	85% agree that the scrutiny process is objective and transparent 65% agree that it leads to service improvements and 90% felt it added value to service users 90% agree that it encourages constructive criticism internally and externally 85% agree that contributions from external partners and the public are valued 55% agree that the process has given them a better understanding of what the Authority does and how it operates 68% would be happy to contribute to future scrutiny reviews 73% would watch the Authority's webcasts on other topics in future. A full evaluation of the scrutiny process will be produced by June 2014and a submission to the Centre for Public Scrutiny for a Good Scrutiny Award has been made.
Effective partnerships established and objectives Performance monitored by Audit and Scrutiny Committee. SLA with TGVs is formally approved each year, with a quarterly reviewed work programme; research partnership led by research workshops and project bids, Glastir contracts are legally binding, BBNPA undertakes works under an SLA with graziers, SLA with NRW for Waterfall Country is formally agreed and reviewed each year, Reservoir	Reviews of projects inform future projects (eg. the proposed LAND Interreg project) Based on successful research partnership model with Cardiff University, working towards an agreement with Trinity St David's University. Glastir – graziers divided into groups to allow more funding opportunities Annual review of SLA with TGV
	that the Authority is more open, transparent and willing to engage and to invite criticism where appropriate. Total of \$16 individuals have contributed to scrutiny reviews either as panel members, participated in the public vote or submitted evidence, and we have requests to be a part of future scrutiny reviews. Some panel members have been openly critical in the past about the Authority's governance and openness and now publicly state how much this has improved. Effective partnerships established and objectives Performance monitored by Audit and Scrutiny Committee. SLA with TGVs is formally approved each year, with a quarterly reviewed work programme; research partnership led by research workshops and project bids, Glastir contracts are legally binding, BBNPA undertakes works under an SLA with graziers, SLA with NRW for Waterfall Country is formally agreed

What's in Place	How do we know it's	How have we evaluated
	working?	and improved?
NPAs), Skills in Action Partnership(BBNPA, PCNPA Torfaen Council, HLF funded)	an annual report to DCWW, regular liaison with NRW for Black Mountains, KESS studentship is monitored by Swansea University, Calch Project is led by third party, Offa's Country Project input was to complete capital footpath works (completed), volunteers projects are managed by staff,	improves the SLA in subsequent years. Work with the Black Mountains Partnership has been instrumental in encouraging the Welsh We have worked with Government to help identify ideas for the £6m Fund for Nature, the result of which is that the Brecon Beacons has been identified as a Nature Action Zone eligible for funding under the scheme (WG and NRW)
	Social Inclusion & Child Poverty	Experience learned in the widespread wild fires of 2011 led to improved working relations, improved protocols, better equipment and we continue to build on this.
	Mosaic Partnership: Annual Partner action plan (PAP) for BBNPA +Partnership project plan with annual review, and external evaluation for Lottery funders. Community Champions have made presentation to the NPA in support of the partnership. Skills in Action (SIA) project Delivery phase starts summer 2014. Regular review meetings with HLF funder	Members development day included presentations from community groups and individuals so that members could hear feedback on the Authority's role in projects Social Inclusion & Child Poverty action Plan: 2 year plan with end of plan review and stakeholder consultation every 2 years to update Plan. Consultation winter 2013/14 for 2014-16 Plan Mosaic: Regional and Annual Feedback Forums highlight areas for Organisational Change. Main recommendations expected in Year 3 of project (2014) Skills in Action (SIA) project Delivery phase project plan build on evaluation and research in 2013 Development Phase. Baseline, mid project (2015) and end of project external evaluation built in.
Tourism		
Interreg Projects		
COLLABOR8 and Rural Alliances projects co- funded by EU/WG and working with 10-12	Report on 6 monthly basis against major indicator set. Feedback from Secretariat ensures projects stays on track. Work programme and	Feedback from the project to Members via local community groups highlighted the success of local action supported by

What's in Place	How do we know it's working?	How have we evaluated and improved?
partners across the EU including local businesses	outputs managed by Transnational Steering Group chaired by the NPA.	volunteers.
and people on local tourism development. Each worth c€1 million over 3 years	Steeling Group chaired by the rary a	Lessons learned in COLLABOR8 stimulated Rural Alliances, which in turn informed the project now in development, LAND
		12 Rural Alliances formed with at least 8 anticipated to continue beyond the project, with a strong legacy of local community development. Where a group does not continue, the spirit of co-operation will.
Monitoring Interreg Programmes		
Rural Alliance project worth €1 million over 3 years	Management and scrutiny of importance to risk management. Closely managed by officers to oversee spend profiling and currency fluctuation issues – proven to be effective. All claims independently audited. Regular reports to Audit	Experience of participating in the Collabor8 project provided us with the skills and confidence to act as Lead partner for Rural Alliances. Similarly experience gained in
	and Scrutiny Committee. Interreg programme audit found no errors on a 100% audit of a year's spend. Third Level Audit may be undertaken at any time over the next 5 years	developing the administrative systems and processes for Collabor8 has informed the administration of Rural Alliances both as Lead and Project Partner.
Brecon Beacons Sustainable Destination Partnership	Partnership's work managed by an Executive and judged against the work programme and a set of indicators. Chair makes annual	In 2013 the Partnership reviewed its structures and approaches and is revising these as a result of the outputs of that work.
Cross organizational/ thematic working by 35 organisations to increase sustainability of tourism in economic, environmental and community terms (public, private and voluntary sectors). Established by BBNPA now with Independent Chair.	presentation to NPA	This Partnership is felt to be an example of good practice in engaging with key stakeholders around a theme which may be appropriate elsewhere.
	Regular partnership meetings with BBT to monitor and manage the relationship and develop joint action plans.	Regular review meetings leading to change in both partners' practice.
BBNPA delivers c25 training events per year for the private sector including the Brecon Beacons Ambassador Scheme	Over 160 Ambassadors trained with 130 remaining in the scheme (losses due to retirement or business closing). High levels of satisfaction recorded. Regular feedback	Engagement with Ambassadors and consideration of key areas of work for the Tourism Team has resulted in the original Ambassadors Scheme being

What's in Place	How do we know it's working?	How have we evaluated and improved?
	received from Ambassadors	extended into a suite of new areas (Geopark Ambassadors and Dark Skies Ambassadors) and a Schools Ambassadors programme is in development
Communicating with local communities A wide range of liaison groups has been established eg. Town and Community Council Clusters	Clusters have had positive effect on public engagement in terms of information exchange, promoting understanding, progressing projects, seeking views on policy. Rural Alliances has encouraged significantly more cooperative working both within local communities and between them and ourselves. Currently over 10,000 Facebook followers and three Twitter feeds. Supporting local businesses by inviting telecommunications, developers and utilities to Planning Committee meetings to make presentations widely available via webcasting meetings	Consultation exercise with former Eastern and Western Area Advisory Fora following decreasing attendance resulted in a Joint Forum. Following further decreases as people engage in other ways, the Authority has now accepted a recommendation from the Forum to discontinue it. All members have been advised of alternative methods of engagement and contact details. Currently exploring how social media can further engage the public. The proposed LAND project would allow the relationships developed through Rural Alliances to be developed further.
The Authority actively seeks partnerships with other organizations to provide value for money in procuring services – eg. SLA with Cardiff Council for payroll, with the Welsh Parks for insurance services and with Carmarthenshire CC for legal services.	Regular reviews of income streams (the need for managers to this has been reiterated by CMT). Also regular review of charges and comparisons with providers of similar services to ensure a fair but commercial rate. Room hire scheme now embedded and bring in an income (£4000 in 2013/14 plus £1200 for webcasting. This income will fund committee management system	Review of the legal SLA carried out and NPA agreement on 9 May 2014 to continue this for a further three years following the successful trial period. This model is likely to be used to address similar issues in future. Reciprocal agreement with Pembrokeshire Coast NPA on the role of Deputy Monitoring Officer

6. Significant Governance Issues

The Wales Audit Office Annual Improvement Report for 2013-14 (draft issued in April 2014) did not make any recommendations but made two proposals for improvement.

Governance / Audit issues identified		
Identified by WAO Annual Improvement Report issued May 2014		
RI Take steps to mitigate the risks that can	To review any appeal decisions where	

result from losing planning appeals in the
context of reduced budgets

costs have been awarded against the Authority in the last 5 years – to understand common pitfalls. To ensure that all future appeals are handled in an objective and professional manner to minimize the probability that an award of costs could ensue.

R2 Develop an action plan for implementing the proposals for improvement set out in the Wales Audit Office's Review of Asset Management The Director of Countryside and Land Management is planning a multi-year project to address the recommendations. The Authority will learn from positive examples in Pembrokeshire Coast and Snowdonia National Park Authorities

Identified by Internal Audit Reports

Internal Auditors carried out 9 audits, I of which gained 'Full Assurance' and 8 'Substantial Assurance'. No high priority recommendations were made, but 17 medium priority and 7 low priority recommendations were highlighted.

Of the two follow up audits, 9 out of 13 recommendations have been implemented, 2 will not be re-raised and 2 have been partially implemented. The principal management actions raised are highlighted right.

Ensure that all recommendations are implemented (CMT and Audit and Scrutiny to monitor this)

HR will now receive an exceptions report which highlights variances in salary payments over two consecutive months.

Asset records for property, plant and equipment other than land and buildings will be enhanced to improve location, condition and other information for each asset.

Procedure documents to be updated to reflect improvements made to asset management

Owners to be identified for all action points arising from the National Park Management Plan – this is being progressed by the NPMP working group and CMT.

processes.

Improved documentation of review dates for Authority policy and procedure documents.

Risk Management Strategy to be produced and approved by the Authority by June 2014.

Planning condition compliance monitoring to be strengthened subject to resource constraints.

Additional guidance to be given to planning staff on the correct fees chargeable, with advice from senior staff where required.

Enhanced record keeping and supervision of Historic building grants advised to ensure policies are followed and communication with applicants is timely and fully documented.

Some improvements in health and safety procedures and equipment relating to fire risks

	and manual handling have been identified and implemented.
Issues identified in the Authority's self-	-evaluation
Issue	Proposed Action
Actions from internal audit reports not being	Finance Manager and Democratic Services
monitored and signed off when completed	Manager to liaise on system (so that actions
	can be completed before the internal audit
	follow up exercise). CMT to consider
	quarterly updates on internal audit action plans
Performance Indicator sheets need to be	CMT to monitor regularly and Directors to
completed for all PIs to ensure outcome	ensure compliance through the PMR process
focused and measurable	
Officer capacity (CMT in particular)	Implement and review the committee
	management system to assess efficiency and
	increased capacity across the organisation, as
	well as increased accessibility for the public
Risk	Systems will continue to be tested and changes
	implemented as needed
New working groups	Will be monitored and reviewed to ensure
	that they are working effectively

7. Opinion

We propose over the coming year to take steps to address the matters referred to in Part 6 above to further enhance our governance arrangements. We are satisfied that these steps will address the need for any improvements identified in our review of effectiveness and will monitor their implementation and operation as part of our next annual review.

Mrs Julie James Chairman, BBNPA	Mrs Elaine Standen Section 151 Officer
Date:	Date: