

Sheffield City Region Mayoral Combined Authority and South Yorkshire Passenger Transport Executive

Public Engagement and Consultation December 2020

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Responsible Executives:

- Stephen Batey, Director of Mayors Office Group (MCA)
- Tim Taylor, Director of Customer Services (SYPTTE)

This report is confidential and is intended for use by the management and directors of Sheffield City Region Mayoral Combined Authority (MCA) and South Yorkshire Passenger Transport Executive (SYPTTE). It forms part of our continuing dialogue with you. It should not be made available, in whole or in part, to any third party without our prior written consent. We do not accept responsibility for any reliance that third parties may place upon this report. Any third party relying on this report does so entirely at its own risk. We accept no liability to any third party for any loss or damage suffered or costs incurred, arising out of or in connection with the use of this report, however such loss or damage is caused.

It is the responsibility solely of the Authority's and Executive's management and directors to ensure there are adequate arrangements in place in relation to risk management, governance, control and value for money.

Executive Summary

Background

Engagement creates a stronger two-way relationship between an organisation and the community. There may be many occasions when more detail about what residents, partners and the wider communities think about specific issues or changes that affect them. This is known as consultation. Consultation is technically any activity that gives local people a voice and an opportunity to influence important decisions.

Ongoing dialogue between an organisation and its stakeholders is an important part of policymaking. This dialogue will, at times, need to become more formal and more public. There are many occasions where there is a statutory requirement to carry out formal consultations. Statutory consultations are bound by legal requirements, and can have strict rules surrounding how they should be conducted. Failing to run a statutory consultation in line with those rules could lead to being liable for a judicial review.

The Government's Code of Practice on Consultation, underpinned by specific consultation principles, sets out how consultation exercises are best run and what people can expect.

There are also a range of other non-statutory consultation and engagements exercises. Non-statutory consultations have no legal status but do enable organisations to hear from a representative cross-section of the population.

Objectives

The objective of the review was to provide an independent assessment of the design and operational effectiveness of the MCA's and PTE's frameworks in place for conducting statutory and non-statutory consultation and engagement exercises.

Objectives (continued)

Our review focused on the following potential risk areas:

- Policies and procedures do not adequately set out the arrangements in place for conducting statutory and non-statutory consultation and engagement exercises, and are not sufficiently clear as to what type and scale of consultation is required proportionate to the nature of the change or issue to be consulted on.
- Governance arrangements are not robust; roles and responsibilities, management oversight, monitoring and reporting arrangements are not effective.
- The current internal processes are not aligned with the Government's Code of Practice on Consultation, and consultation principles.
- Operational managers do not comply with agreed processes.

Limitations of scope

Our findings and conclusions will be limited to the risks identified above. The scope of this audit does not allow us to provide an independent assessment of all risks and controls associated with consultation and engagement.

Where sample testing is undertaken, our findings and conclusions will be limited to the sample tested only. Please note that there is a risk that our findings and conclusions based on the sample may differ from the findings and conclusions we would reach if we tested the entire population from which the sample is taken.

This report does not constitute an assurance engagement as set out under ISAE 3000.

Executive Summary

Conclusion

Significant assurance with some improvement required

We have reviewed the key risks and operational effectiveness of the MCA's and PTE's framework in place for conducting statutory and non-statutory consultation and engagement exercises. The scope of the audit is set out in our Audit Planning Brief dated August 2020.

We have concluded that the processes provide **Significant assurance with some improvement required** to the Committee.

We have provided this opinion based on the fundamentals and key elements in place, while acknowledging that both organisations currently have their own approach and processes in place. Our review has reported similar themes throughout and recognise there is an opportunity for the MCA and PTE to work together and build on their existing arrangements and build an integrated approach moving forwards.

Good practice

- The PTE has robust policies and procedures in place around the process of undertaking consultations, including a clear procedure flowchart outlining the arrangements and timescales from the point it is identified that a consultation is required. There is an opportunity to share and further develop this across the group.
- For those consultations reviewed as part of our sample testing, all had been conducted in line with government-published principles and all were supported by communication plans.
- Reports are prepared detailing the findings and outcome of the consultation and outlining any changes made as a result of the consultation. These are published on the Authority's websites.

Areas requiring improvement

- The MCA do not currently have a public engagement and consultation policy or procedures to support a consistent approach. Consequently, there is no standard documentation in place such as a flow chart to help guide the user on whether a consultation would be appropriate or what type of consultation it should be. There is a risk that an ad-hoc approach may develop or decisions are not consistently made and approved at an appropriate level.
- While there are policies and procedures in place within the PTE, these are around the process of undertaking consultations, there is currently no guidance in place to document how service areas identify whether a consultation is required, the size of any potential consultation or the decision process in place.
- Communications plans are in place for all consultations, however these can be further enhanced to include specific roles and responsibilities to ensure there is accountability, ownership and oversight at an appropriate level.

Recommendations

Based on our findings, we have made nine recommendations the grading is shown:

	High	Medium	Low	Improvement
PTE	-	-	4	-
MCA	-	1	4	-

Acknowledgement

We would like to take this opportunity to thank your staff for their co-operation during this internal audit.

Action Plan - SYPTE

In this section we set out the detailed findings arising from our work. Details of what each of the ratings represents can be found in Appendix 2.

Risk Issue	Findings and Recommendation	Action Plan
<p>Policies and procedures do not adequately set out the arrangements in place for conducting statutory and non-statutory consultation and engagement exercises and are not sufficiently clear as to what type and scale of consultation is required proportionate to the nature of the change or issue to be consulted on.</p>	<p>Key Findings</p> <ul style="list-style-type: none"> • The statutory guidance is clear where mandatory consultations are required in general areas such as major projects requiring planning consent or grant funding, but requirements around areas more specific to a transport executive, such as bus reviews, are unclear. The closest statutory guidance is within Section 4 of the Communications Guide published by the Local Government Association, however this is more applicable to councils and not specific to transport executives. • The communications team have tried to encourage the completion of consultations where possible, even if not a statutory requirement, as this is good practice. However, this is resource driven and has recently been limited in terms of staffing. • Occasionally the PTE and operators will work together on consultations or the PTE will perform consultations on behalf of operators. However, these can be lacking in effectiveness, as the commercial operators are not required to implement actions arising from a consultation, therefore rendering the consultation a box ticking exercise. Furthermore, the bus partnership agreements in place with providers do not clearly outline situations in which a consultation would be required and whether this should be carried out by the PTE, the operator or jointly. • We have reviewed the policies and procedures in place around the undertaking of consultations and have found that there is a clear procedure flowchart in place outlining the arrangements and timescales from the point it is identified that a consultation is required. The flowchart covers the process of creating a plan, designing a consultation, promotion of the consultation and publication. There is also a 'Guide to Stakeholder Communications' which outlines how to approach communications with different groups and a 'Consultation Principles' document which defines the general principles to adhere to when conducting a consultation. • However, there are no formal policies or procedures in place to document how service areas identify whether a consultation is required and the size of any potential consultation. This is currently carried out independently by the service area and then brought to the communications team if a consultation is deemed to be required. There is a risk that the risk appetite of the service area managers may differ and hence inconsistency as to when a consultation of a certain scale is applied. • We were also advised that senior management involvement within the initial stages of the consultation process can be limited, therefore creating a risk that decisions regarding the need for consultations may not be made at the appropriate level. 	

Action Plan - SYPTE

Risk Issue	Findings and Recommendation	Action Plan
<p>Policies and procedures do not adequately set out the arrangements in place for conducting statutory and non-statutory consultation and engagement exercises and are not sufficiently clear as to what type and scale of consultation is required proportionate to the nature of the change or issue to be consulted on.</p>	<p>Issues Identified:</p> <ul style="list-style-type: none"> The PTE does not have a documented approach in place to provide guidance or instruction on how service areas identify whether a consultation is required and the size of any potential consultation, particularly around areas where the statute does not identify the requirement for a mandatory consultation. <p>Risk:</p> <ul style="list-style-type: none"> Inconsistent, ineffective or inappropriate approach to consultations. Ineffective management including lack of approval and sign-off at an appropriate level and monitoring. Lack of awareness within the Authority and potential opportunities for consultation not identified. <p>Recommendation:</p> <ul style="list-style-type: none"> The PTE to develop a documented standardised approach which outlines where consultations should be considered and carried out and the approval process, particularly identifying areas that are not required by statute. As the criteria for consultations may not be uniform across all areas, this approach could contain subsections for areas where the criteria diverges. 	<p>Agreed Action:</p> <p>There are a number workstreams involved in the integration process and this is an area which would benefit from a joint approach between SYPTE and SCRMCMA</p> <p>Develop a joint Consultation Policy and Procedures which brings together the issues raised by this audit.</p> <p>Responsible Officer: Darshana Dholakia, Head of Marketing and Communications</p> <p>Executive Lead: Tim Taylor, Director of Customer Services</p> <p>Due date: 30 June 2021</p>
	<p>Issues Identified:</p> <ul style="list-style-type: none"> The bus partnership agreements in place with providers do not clearly outline situations in which a consultation would be required, whether this should be carried out by the PTE, the operator or jointly or the responsibilities for the implementation of any outcomes. <p>Risk:</p> <ul style="list-style-type: none"> Consultations are not performed when required and the best interests of the public identified as part of these reviews are not being appropriately considered. <p>Recommendation:</p> <ul style="list-style-type: none"> As part of the partnership agreement, the PTE to clarify where consultations are required and the roles and responsibilities of each party. The PTE to implement contract language into partnership agreements that allows them to effectively challenge operators when the recommendations of a consultation are not implemented. 	<p>Agreed Action:</p> <p>This will be undertaken in relation to the action above. Once the policy is defined, the authority will then inform operators of how it will be applied.</p> <p>Responsible Officer: Darshana Dholakia, Head of Marketing and Communications</p> <p>Executive Lead: Tim Taylor, Director of Customer Services</p> <p>Due date: 30 June 2021</p>

Action Plan - SYPTE

Risk Issue	Findings and Recommendation	Action Plan
<p>Governance arrangements are not robust; roles and responsibilities, management oversight, monitoring and reporting arrangements are not effective.</p>	<p>Key Findings</p> <ul style="list-style-type: none"> • As part of the agreed communications procedures flowchart, a communication plan is created for each consultation and includes outlining the roles and responsibilities for the consultation. • As part of our testing we reviewed a sample of communications plans in place and have noted that whilst there is a clear delivery plan and timescale in place, responsibilities are documented generally at team level rather than individuals. • For the majority of consultations, the service area which requires the consultation works in conjunction with the data analytics team and the communications team. However, there are no formal procedures in place, either in general or specifically within each individual communications plan, around how each team should interact and their corresponding roles and responsibilities. • The communications team write up a report on the findings of the consultation and this is shared with the relevant stakeholders. A final report is also published on the PTE website in line with the internal process, in a 'you said we did' approach to the public, outlining the changes as a result of the consultation. 	
	<p>Issues Identified:</p> <ul style="list-style-type: none"> • Responsibilities are only documented generally at team level rather than at role level. <p>Risk:</p> <ul style="list-style-type: none"> • Inconsistent or inappropriate approach to managing consultations. • Lack of accountability, ownership or oversight at an appropriate level. <p>Recommendation:</p> <ul style="list-style-type: none"> • Responsibilities should be allocated at a role level within the communications plan. 	<p>Actions:</p> <p>All future communications delivery plans to support consultations will allocate responsibilities at a role level, where possible.</p> <p>Responsible Officer:</p> <p>Darshana Dholakia, Head of Marketing and Communications</p> <p>Executive Lead:</p> <p>Tim Taylor, Director of Customer Services</p> <p>Due date: To be undertaken during next consultation.</p> <p>Action considered complete.</p>

Action Plan - SYPTE

Risk Issue	Findings and Recommendation	Action Plan
<p>The current internal processes are not aligned with the Government’s Code of Practice on Consultation, and consultation principles.</p>	<p>Key Findings</p> <ul style="list-style-type: none"> • The communications team have developed a guide to stakeholder communications and a set of Consultation Principles as part of the policies and procedures around consultations. These are distributed to all communications team members and are accessible on the Intranet to all staff members. • The internal Consultation Principles, which are based on the Government’s Code of Practice on Consultation and Cabinet Office Consultation Principles, includes the majority of recommended practices as well as additional principles centred on good practice. However, the internal guidance are lacking principles around ‘Formal consultation should take place at a stage when there is scope to influence the policy outcome’ and ‘Officials running consultations should seek guidance in how to run an effective consultation exercise and share what they have learned from the experience.’ to fully align with the Cabinet Office principles. • The procedure flowchart for consultations incorporates the best practice outlined within the Consultation Principles, aligning internal processes with the Government’s Code of Practice on Consultation. Whilst the process flowchart identifies examples of what may constitute a major or minor project and gives a corresponding timeline for the different types of project, the requirements of the undertaking for each type of project is the same, therefore ensuring that all consultations meet the principles. <p>Issues Identified:</p> <ul style="list-style-type: none"> • Not all principles within the Government’s Code of Practice on Consultation are included within the internal Consultation Principles. <p>Risk:</p> <ul style="list-style-type: none"> • Consultations may not be carried out in line with government guidance and best practice, therefore they may be lacking in effectiveness. <p>Recommendation:</p> <ul style="list-style-type: none"> • The PTE to update their internal Consultation Principles to include principles around ‘Formal consultation should take place at a stage when there is scope to influence the policy outcome’ and ‘Officials running consultations should seek guidance in how to run an effective consultation exercise and share what they have learned from the experience.’ to fully align with the Government’s Code of Practice. It should be noted that these principles are applicable to all stakeholders at all stages within the consultation process. 	<p>Agreed Action:</p> <p>Review and refresh the organisation’s principles for consultation for executive sign off and disseminate to service areas across the organisation for adoption and application.</p> <p>Responsible Officer: Darshana Dholakia, Head of Marketing and Communications</p> <p>Executive Lead: Tim Taylor, Director of Customer Services</p> <p>Due date: 31 March 2021</p>

Action Plan - SYPTE

Risk Issue	Findings and Recommendation	Action Plan
<p>Operational managers do not comply with agreed processes.</p>	<p>Key Findings</p> <ul style="list-style-type: none"> • As part of this review we have undertaken sample testing to assess whether internal processes are being complied with in practice. We reviewed the following consultations: <ul style="list-style-type: none"> – Future of Supertram project carried out Sept-Oct 2016 – Future of Supertram project carried out Sept-Nov 2018 – Changes to Bus Services consultation carried out Dec 2019–Feb 2020. • We did not identify any issues or occurrences where the procedure flowchart was not followed. Communications Plans were created, Consultation Questions were developed, the consultations were promoted, results reported and published all within the 12-week timeframe. • As part of our sample testing we have reviewed the outcome of consultations and implementation of these recommendations. As two of our reviews are part of a larger 'Future of Supertram' project, this has not reached the implementation point. Our review of the Feb 2019 Bus Service Changes showed good documentation of consultation findings, summarisation and publication of these findings and a summarisation of the implementations as a result of the recommendations. 	

Action Plan - SCRMCAs

In this section we set out the detailed findings arising from our work. Details of what each of the ratings represents can be found in Appendix 2.

Issue	Findings and Recommendation	Action Plan
<p>Policies and procedures do not adequately set out the arrangements in place for conducting statutory and non-statutory consultation and engagement exercises, and are not sufficiently clear as to what type and scale of consultation is required proportionate to the nature of the change or issue to be consulted on.</p>	<ul style="list-style-type: none"> • The MCA does not currently have a public engagement and consultation policy and procedures. There are no guidance notes, process flow chart or checklist to support the consultation process and indicate the different routes depending on the scale and complexity of the issue or consultation. • We selected three consultations for review, each followed a different path as dictated by the nature and complexity of the consultation: <ul style="list-style-type: none"> – Devolution This consultation was mandated by law with specific requirements and timeframe. – Bus Review This consultation was conducted by an independent panel at the request of the Mayor with administrative support from the Authority. – Strategic Economic Plan (SEP) This consultation is currently ongoing and is led by the Authority. • We recognise that there is no “one size fits all” and would expect a principles-based rather than rules-based approach to developing the policy and procedures. <p>Issue identified:</p> <ul style="list-style-type: none"> • There is no public engagement and consultation policy and procedures. <p>Risks:</p> <ul style="list-style-type: none"> • Inconsistent, ineffective or inappropriate approach to consultations. • Ineffective management including lack of approval and sign-off at an appropriate level and monitoring. • Lack of awareness within the Authority and potential opportunities for consultation not identified. 	

Action Plan - SCRMCAs

Issue	Findings and Recommendation	Action Plan
<p>Policies and procedures do not adequately set out the arrangements in place for conducting statutory and non-statutory consultation and engagement exercises, and are not sufficiently clear as to what type and scale of consultation is required proportionate to the nature of the change or issue to be consulted on.</p>	<p>Recommendations:</p> <ul style="list-style-type: none"> • An overarching policy document to be produced, setting out the consultation principles to consider and the process to follow. The procedures to include; <ul style="list-style-type: none"> – A flow chart to help guide the user on whether a consultation would be appropriate and what type of consultation it should be depending on the scale and complexity of the consultation. – A checklist to ensure all key elements have been considered and are in place such as working group set-up, financial budget, SMART implementation or action plan etc. – The governance framework including roles and responsibilities, reporting, oversight, and for each stage of the process, the decision-making and accountability and approval arrangements. 	<p>Actions:</p> <p>There are a number workstreams involved in the integration process and this is an area which would benefit from a joint approach between SYPTE and SCRMCAs.</p> <p>Develop a joint Consultation Policy and Procedures which brings together the issues raised by this audit.</p> <p>Responsible Officer: Claire James, Head of Governance</p> <p>Executive Lead: Stephen Batey, Director of Mayors Office Group</p> <p>Due date: 31st December 2021</p>

Action Plan - SCRMCAs

Issue	Findings and Recommendation	Action Plan
<p>Governance arrangements are not robust; roles and responsibilities, management oversight, monitoring and reporting arrangements are not effective.</p>	<p>Our discussions and review of documentation for the three consultations in our sample identified that governance is provided through development of a Communications Plan and the processes in operation in carrying out a consultation:</p> <ul style="list-style-type: none"> • Roles and responsibilities are established within the consultation working group and in line with job roles. • A consultation working group is established to monitor progress with monitoring and reporting undertaken through email and working group meetings. • Oversight is provided by senior management and the Board / committees through reports presented at these forums at key stages of the process, e.g. approval of consultation questions. <p>However, whilst the Communications Plan provides a summary of the key stages and actions, it does not formalise all the elements of a governance framework:</p> <ul style="list-style-type: none"> • Roles and responsibilities and meeting arrangements are not established through a formal terms of reference for the consultation working groups. • Working group meetings are not minuted or supported by an action log and updates and progress may be shared verbally rather than through formal progress reports. <p>Issue identified:</p> <ul style="list-style-type: none"> • The governance arrangements supporting individual public consultations are not formally set out. <p>Risks:</p> <ul style="list-style-type: none"> • Inconsistent or inappropriate approach to managing consultations. • Lack of accountability, ownership or oversight at an appropriate level. <p>Recommendations:</p> <ul style="list-style-type: none"> • Each consultation to be supported by formal governance arrangements (TORs) and an overarching plan which incorporates the communication plan and the governance framework. 	<p>Actions: Policy and procedures will be developed to include guidance on having an overarching consultation plan which sets out the governance arrangements including TOR for working groups.</p> <p>Responsible Officer: Claire James, Head of Governance</p> <p>Executive Lead: Stephen Batey, Director of Mayors Office Group</p> <p>Due date: 31st December 2021</p>

Action Plan - SCRMCAs

Issue	Findings and Recommendation	Action Plan
<p>The current internal processes may not be aligned with the Government's Code of Practice on Consultation, and consultation principles.</p>	<ul style="list-style-type: none"> • Our discussions with officers identified that the Cabinet Office Consultation Principles (dated March 2018) together with the experience and expertise of staff are used to conduct consultations. The Cabinet Office Consultation Principles cover 11 areas including that consultations should be clear and concise, targeted, last for a proportionate amount of time and be agreed before publication. • Other guidance which is available is the Government Code of Practice on Consultation (dated July 2008). Together with the areas in the Cabinet Office Consultation Principles, this code adds that consultation exercises would normally last for at least 12 weeks, should be accessible and lessons learnt should be shared. • Our review of the consultations in our sample confirmed that, on the whole, these principles have been applied. We noted the following; <ul style="list-style-type: none"> – A shorter duration than the recommended 12 weeks was applied to the devolution and SEP consultations; we consider this adequate in a more digital environment. We note that the Bus Review consultation lasted 21 weeks, following an extension requested by the Chair of the consultation panel; this time period was considered proportionate. – We were advised that lessons learnt / post-consultation analysis is discussed within the working group and communications team but any key messages arising are not formalised. Improvement opportunities may be missed, including if existing expertise / experience in the team is not available (for example if staff are absent or leave). • We consider that implementation of a checklist, based on these principles would support staff to ensure that all areas / principles are adequately considered / addressed. 	

Action Plan - SCRMCAs

Issue	Findings and Recommendation	Action Plan
<p>The current internal processes may not be aligned with the Government's Code of Practice on Consultation, and consultation principles.</p>	<p>Issue identified:</p> <ul style="list-style-type: none"> No checklist available to ensure consultation principles are followed. <p>Risk:</p> <ul style="list-style-type: none"> Inconsistent, ineffective or inappropriate approach to consultations. <p>Recommendations:</p> <ul style="list-style-type: none"> As part of the policies and procedures, develop a consultation checklist detailing the principle considerations in line with current government guidance. 	<p>Actions:</p> <p>A checklist, covering consultation principles in current government guidance will be included in the procedures..</p> <p>Responsible Officer:</p> <p>Claire James, Head of Governance</p> <p>Executive Lead:</p> <p>Stephen Batey, Director of Mayors Office Group</p> <p>Due date:</p> <p>31st December 2021</p>

Action Plan - SCRMCAs

Issue	Findings and Recommendation	Action Plan
<p>Operational managers may not comply with agreed processes leading to an inconsistent approach and ineffective consultations.</p>	<ul style="list-style-type: none"> • Some of the key consultation documentation was not readily available for review for the three consultations selected. This included: <ul style="list-style-type: none"> – Formal evidence of approval by the working group of consultation questions, and communication and promotional material. – Lack of detail in the communications plans about resources or budgets. • In addition, we identified that: <ul style="list-style-type: none"> – There is no programme of potential future consultation areas or issues identified at the start of the year which can then be used to monitor and follow-up appropriateness if they don't go ahead. – There is no guidance or set of procedures for service areas which outline how to identify the need for a public consultation when developing their project plan. As a result, an ad-hoc approach to consulting may develop across the Authority. 	
	<p>Issue identified:</p> <ul style="list-style-type: none"> • There is a lack of documentation to provide assurance that good practice is followed and that processes are applied consistently across consultations. <p>Risk:</p> <ul style="list-style-type: none"> • Inconsistent and ineffective consultations. <p>Recommendations:</p> <ul style="list-style-type: none"> • Procedures to set out the key documents required to demonstrate compliance with the process and to support effective reporting and monitoring. 	<p>Actions:</p> <p>Guidance on what key supporting documents are required to demonstrate compliance (including a financial breakdown), will be set out in the Consultation Policy and Procedures.</p> <p>Responsible Officer:</p> <p>Claire James, Head of Governance</p> <p>Executive Lead:</p> <p>Stephen Batey, Director of Mayors Office Group</p> <p>Due date:</p> <p>31st December 2021</p>

Action Plan - SCRMCMA

Issue	Findings and Recommendation	Action Plan
<p>Operational managers may not comply with agreed processes leading to an inconsistent approach and ineffective consultations.</p>	<ul style="list-style-type: none"> A report is prepared detailing the findings of the consultation and this, together with the action planned to address issues arising is presented to the Board. The report is also published on the Authority’s website. However, we identified that there is currently no schedule of past consultations, for example a web-page on the corporate site citing the importance of consultations, current ongoing consultations and past consultations. <p>Issue identified:</p> <ul style="list-style-type: none"> There is a lack of information on current and past consultations on the website. <p>Risk:</p> <ul style="list-style-type: none"> Lack of public and stakeholder awareness of consultations or missed opportunity to promote importance of public engagement to the Authority. <p>Recommendations:</p> <ul style="list-style-type: none"> Include a section on consultations on the MCA website, developing a ‘you said we did’ approach to the public. 	<p>Management Response:</p> <p>There will be time lag between concluding the consultation and putting outcomes into practice. Information on the website will need to be reviewed and updated as progress is made on implementation.</p> <p>Actions:</p> <p>A process will be developed to include and regularly review information on past and present consultations on the website.</p> <p>Responsible Officer:</p> <p>Daniel Wright, Head of Communications</p> <p>Executive Lead:</p> <p>Stephen Batey, Director of Mayors Office Group</p> <p>Due date: 31st December 2021</p>

Appendices

Appendix 1 – Staff involved and documents reviewed

Staff involved

PTE

- Darshana Dholakia
- Victoria Greenwood

MCA

- Daniel Wright
- Fiona Bowden
- Anita Dell
- Claire James

Documents reviewed

- Cabinet Office Consultation Principles (dated March 2018)
- Government Code of Practice on Consultation (dated July 2008)

PTE

- A Guide to Stakeholder Communications
- Consultation Flowchart
- Consultation Principles
- Future of Supertram and changes to Bus Services Consultation Evidence

MCA

- Communications Plan & Strategy – Devolution, Bus Review, Strategic Economic Plan (SEP)
- Progress papers to the MCA Board

Appendix 2 - Our assurance levels

The table below shows the levels of assurance we provide and guidelines for how these are arrived at. We always exercise professional judgement in determining assignment assurance levels, reflective of the circumstances of each individual assignment.

Rating	Description
Significant assurance	<p>Overall, we have concluded that, in the areas examined, the risk management activities and controls are suitably designed to achieve the risk management objectives required by management.</p> <p>These activities and controls were operating with sufficient effectiveness to provide significant assurance that the related risk management objectives were achieved during the period under review.</p> <p>Might be indicated by no weaknesses in design or operation of controls and only IMPROVEMENT recommendations.</p>
Significant assurance with some improvement required	<p>Overall, we have concluded that in the areas examined, there are only minor weaknesses in the risk management activities and controls designed to achieve the risk management objectives required by management.</p> <p>Those activities and controls that we examined were operating with sufficient effectiveness to provide reasonable assurance that the related risk management objectives were achieved during the period under review.</p> <p>Might be indicated by minor weaknesses in design or operation of controls and only LOW rated recommendations.</p>
Partial assurance with improvement required	<p>Overall, we have concluded that, in the areas examined, there are some moderate weaknesses in the risk management activities and controls designed to achieve the risk management objectives required by management.</p> <p>Those activities and controls that we examined were operating with sufficient effectiveness to provide partial assurance that the related risk management objectives were achieved during the period under review.</p> <p>Might be indicated by moderate weaknesses in design or operation of controls and one or more MEDIUM or HIGH rated recommendations.</p>
No assurance	<p>Overall, we have concluded that, in the areas examined, the risk management activities and controls are not suitably designed to achieve the risk management objectives required by management.</p> <p>Those activities and controls that we examined were not operating with sufficient effectiveness to provide reasonable assurance that the related risk management objectives were achieved during the period under review</p> <p>Might be indicated by significant weaknesses in design or operation of controls and several HIGH rated recommendations.</p>

Appendix 2 - Our assurance levels (cont'd)

The table below describes how we grade our audit recommendations.

Rating	Description	Possible features
High	Findings that are fundamental to the management of risk in the business area, representing a weakness in the design or application of activities or control that requires the immediate attention of management	<ul style="list-style-type: none"> ▪ Key activity or control not designed or operating effectively ▪ Potential for fraud identified ▪ Non-compliance with key procedures / standards ▪ Non-compliance with regulation
Medium	Findings that are important to the management of risk in the business area, representing a moderate weakness in the design or application of activities or control that requires the immediate attention of management	<ul style="list-style-type: none"> ▪ Important activity or control not designed or operating effectively ▪ Impact is contained within the department and compensating controls would detect errors ▪ Possibility for fraud exists ▪ Control failures identified but not in key controls ▪ Non-compliance with procedures / standards (but not resulting in key control failure)
Low	Findings that identify non-compliance with established procedures, or which identify changes that could improve the efficiency and/or effectiveness of the activity or control but which are not vital to the management of risk in the business area.	<ul style="list-style-type: none"> ▪ Minor control design or operational weakness ▪ Minor non-compliance with procedures / standards
Improvement	Items requiring no action but which may be of interest to management or which represent best practice advice	<ul style="list-style-type: none"> ▪ Information for management ▪ Control operating but not necessarily in accordance with best practice



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