## **Accountable Officer Governance Assurance Statement questionnaire**

This questionnaire should be submitted alongside your declaration that you have complied with your appointment as set out in your Accountable Officer appointment letter and the Public Finances (Jersey) Law 2019; or express any deviations from that which have been made known or otherwise to the Principal Accountable Officer.

This questionnaire forms part of the body of evidence used for the Annual Governance Review, which as an ongoing process, and contributes to the Governance Report – part of the Annual Report and Accounts. The scope of your responsibility as Accountable Officer is outlined in your appointment letter.

Any questions in respect to the declarations should be sent to the Head of Financial Governance or Head of Group Reporting.

Please return your questionnaire to governancereturn@gov.je.

Financial year 2024	Area of Accountable Officer responsibility:	
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Principle 1. Accountability, Decision Making and Scrutiny – Crown, Assembly, Government and States Employment Board relationships and accountability are clear and subject to appropriate scrutiny.								
Question	Cross- reference to Governance Framework	2024 or ongoing?	Comply? Y/N only	Please use for additional information if you wish. Evidence need not be supplied but must be available on request.	Brief detail of known non- compliance			
Are you clear who you are accountable to, and why? Please specify.	1.1	0						
2. Is there any document, protocol or legislation in place to define this relationship or set out how it should operate? Please attach copies here, or explain briefly	1.1	0						

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	how the relationship operates in				
	practice.				
3.	Have you been Accountable	1.1	2024		
	officer throughout the whole of				
	the year? If not please attach or				
	explain what assurances are				
	available for the period prior to				
	your appointment.				
4.	Is there a scheme of delegation	1.1	0		
	in place setting out levels of				
	decision-making/authority/areas				
	of responsibility/accountability				
	within your department which				
	has been approved by the				
	Treasurer in accordance with				
	PFM requirements?				
5.	Are there processes in place to	1.1	0		
	ensure that key decisions in your				
	department comply with Jersey				
	law?				
6.	Are there arrangements in place	1.1	0		
	to ensure that all statutory				
	obligations in your service area				
	have been complied with? If so,				
	please describe how this is done				
	and how new statutory				
	obligations or requirements are				
	identified and implemented.				
7.	Have formal Ministerial	1.2	2024		
	Instructions been made for any				
	areas where the legal				
	responsibilities of the				

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	Accountable Officer were				
	considered to be infringed?				
8.	Are there arrangements in place	1.3	0		
	to document all key decisions in				
	your area of responsibility? Are				
	these decisions accessible if				
	access to them is required?				
9.	Is there a forward programme of	1.5	2024		
] .	new or amended legislation to	1.5	2024		
	be developed for your area of				
	responsibility?				
10	Are there documented	1.6	0		
10.		1.0	U		
	arrangements in place for the				
	relationship of your area of				
	responsibility with other public				
	bodies, boards, committees and				
	arm's length bodies? Please list				
	the most significant of these.				
11.	Are there arrangements in place	1.9	0		
	to ensure that you meet all				
	reporting requirements to the				
	public and States Assembly?				
	Please list these.				
12.	Have any internal audit or	1.12	2024		
	external inspection reports				
	(including Scrutiny, PAC and				
	C&AG) been carried out for your				
	service during the year? Please				
	list.				
13.	Have all outstanding weaknesses	1.12	2024		
	and matters from any internal				
	audit or external inspection				
	reports (including Scrutiny, PAC				
	reports (melaaning seraeniny) i Ae	l			

and C&AG) been resolved,					
including those from previous years?					
14. Since the last Governance	1.12	2024			
Statement have you carried out					
any other assurance work to					
ensure that systems of internal					
control are:					
(a) adequate in principle and					
(b) complied with in practice?	. Dlanning and m			and duites ashiotrament of internal of	
Principle 2. Planning and Performance Question	Cross-	2024 or	Comply? Y/N only	Please use for additional	Brief detail of
Question	reference to	ongoing?	Comply: 1/10 only	information if you wish. Evidence	known non-
	Governance	origoring:		need not be supplied but must be	compliance
	Framework			available on request.	compliance
Are there arrangements in place	2.2	0		available of request.	
to ensure that all appropriate					
Corporate and Service policies					
have been disseminated to your					
staff? Please describe the					
arrangements in place.					
2. Is there a plan or document in	2.4	2024			
place, including specific targets					
or performance measures,					
setting out the department's key					
objectives, aims or outcomes					
and explaining how these					
support the Common Strategic					
Policy, Ministerial Plans and					
Government Plan? Please attach					
the current version of this					
departmental plan and explain					

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	how, and how often, it is kept up				
<u> </u>	to date.				
3.	Are there processes in place to ensure current priorities are communicated within each	2.4	0		
	service/ department/ team, and				
	are these priorities reflected in:				
	<ul> <li>Departmental or service</li> </ul>				
	level performance				
	indicators/ targets?				
	<ul> <li>Individual targets used in</li> </ul>				
	staff or team appraisals?				
4.	Is team and individual	2.5	0		
4.	performance actively managed	2.3	O		
	in your area of responsibility?				
	Please explain how.				
5.	Is actual performance compared	2.6	2024		
ا ا	to expected performance or	2.0	2024		
	targets on a regular basis? How				
	is this information reported to				
	staff and/or management? Give				
	recent examples of how				
	significant performance issues				
	have been identified, escalated				
	and addressed.				
6.	Are there arrangements in place	2.9	0		
	across your Department to				
	minimise environmental impact				
	in line with the Carbon Neutral				
	Roadmap Policy EN1				
	'Decarbonising Government' to				
	reduce operational emissions in				
	line with the Paris Agreement to				

	reach net zero by 2050? Please demonstrate.					
7.	Have all officers with delegated Senior Responsible Officer (SRO) responsibility for projects, been issued with, and signed, an SRO Appointment letter?	2.6	0			
8.	Please confirm that for all projects, irrespective of size, the project status is reported monthly via Perform where it is required to do so by the Project Delivery Framework.	2.6	0			
	Are departmental change portfolio reviews held monthly in accordance with principles approved by ELT and published on the CPMO Hub?	2.6	O O O O O O O O O O O O O O O O O O O	ganisation's structure	serves its operations and intended o	utcomes
	estion	Cross- reference to Governance Framework	2024 or ongoing?	Comply? Y/N only	Please use for additional information if you wish. Evidence need not be supplied but must be available on request.	Brief detail of known non- compliance
1.	Is the current departmental structure for your area of responsibility properly documented? Please provide a copy.	3.1	0			
2.	Has the structure and staffing complement been reviewed since the last Governance	3.1	2024			

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	Statement? Please provide					
	details of any changes.					
3.	Are there partnership or funding agreements in place for all relationships between your department and other bodies outside the Government of Jersey involving funding over £75,000 per annum? Please list these bodies.	3.3	2024			
4.	Are arrangements in place to ensure that the Accountable Officer does not sit on the Board of any arms-length organisation (ALO) or partnership which receives funding from the Government of Jersey? If the AO attends meetings please set out briefly the capacity in which this occurs and the remit, scope and responsibilities of each role.	3.3	0			
5.	Do you have policies in place to ensure that relevant information is disseminated to ALOs and partnerships through the correct channels, in a timely manner and in an appropriate format?	3.3	0			
Pri	nciple 4. Ethics and Integrity - Ethic	s and integrity ar	e embedded in v	alues and operations	•	
Qu	estion	Cross- reference to Governance Framework	2024 or ongoing?	Comply? Y/N only	Please use for additional information if you wish. Evidence need not be supplied but must be available on request.	Brief detail of known non- compliance

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	Are there arrangements in place to ensure all staff in your area of responsibility are made aware of the Government of Jersey's ethical standards and Code of Practice on Standards in Public Service, including the rules relating to declaration of interests, and acceptance of gifts and hospitality?	4.1	0		
2.	Is the gifts and hospitality register for your area of responsibility up to date?	4.1	2024		
3.	Have any recent conflicts of interest identified in your department been properly managed?	4.2	2024		
4.	Are the number and type of complaints, comments or compliments received by your department monitored and reviewed? Please provide details of the number of each for the year.	4.4	2024		
5.	Have any instances where behaviour has fallen below the ethical standards expected of staff in your department been properly dealt with? Please provide details explaining what action was taken.	4.4	2024		
6.	Are there arrangements in place to ensure that expected ethical	4.5	0		

standards are met by any of the following bodies in relation to your area of responsibility?  • External providers of services on behalf of your area of responsibility  • ALOs  • Boards  • Committees  • Other similar bodies  Principle 5. People - Development of	capacity and lead	ership capability	contribute to individ	ual and organisational achievements	
Question	Cross- reference to Governance Framework	2024 or ongoing?	Comply? Y/N only	Please use for additional information if you wish. Evidence need not be supplied but must be available on request.	Brief detail of known non- compliance
1. Is your area of responsibility able to recruit/retain staff with the required skills to provide existing services? Please list those skills which are in shortest supply and which posts are currently most difficult to recruit or fill?	5.1	2024			
2. Is all recruitment undertaken fairly, equitably, impartially and consistently taking account of fairness, equity and diversity – involving the Jersey Appointments Commission as required?	5.2	0			
3. Do all staff in your area of responsibility have up-to-date Job Descriptions and agreed development plans (using the	5.3	0			

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	States' and Government's						
	current appraisal system)?						
4.	Are there arrangements in place to ensure all HR policies are followed within your area of	5.3	0				
	responsibility?						
5.	Have exit interviews been offered for all staff leaving your responsibility where it is a requirement to do so?	5.3	0				
	Is all staff sickness reported in accordance with Government policy?	5.4	0				
7.	Have all staff recruited within the past 12 months received proper induction?	5.4	2024				
8.	Are there arrangements in place to ensure that staff appointed to positions requiring a qualification actually hold the relevant qualification?	5.4	0				
9.	Are there arrangements in place to ensure that you receive regular (at least annual) feedback from staff working within your area of responsibility e.g. a staff survey?	5.5	0				
10	Is there a workforce plan for your area of responsibility which includes succession planning?	5.6	0				
Pri	nciple 6. Public Finances - The orga	nisation values a	and safeguards fir	nancial integrity, acco	untability and strong public financial	management.	
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1. Have you complied with the Public Finances Manual (including completion of any exemptions and breaches) during the year? Please list	Cross- reference to Governance Framework 6.3	2024 or ongoing?	Comply? Y/N only	Please use for additional information if you wish. Evidence need not be supplied but must be available on request.	Brief detail of known non- compliance
exemptions and breaches.					
2. Have all budgets loaded been supported by appropriate authorisation such as Government Plan approval or formal decision of the Minister for Treasury and Resources?	6.3	2024			
3. Are there arrangements in place to ensure that staff responsible for managing budgets are aware of the requirement that all expenditure incurred is in line with the purpose for which budget approval was given? Please explain where and from whom budget holders would obtain guidance in this respect?	6.3	O			
4. Has clear responsibility been assigned for all budgets within your service/department?	6.3	0			
5. Have individual managers with responsibility for budgets	6.3	0			

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	received appropriate financial					
	training?					
6.	Are all relevant staff in your area	6.3	0			
	of responsibility aware of and					
	have access to the Government					
	of Jersey's Public Finances					
	Manual, Procurement					
	procedures and other financial					
	procedures or guidance notes?					
7.	Were identified efficiency	6.3	2024			
	savings delivered in the year?					
8.	Are asset registers and	6.3	0			
	inventories in place and					
	maintained in accordance with					
	the Public Finances Manual?					
9.	Are there arrangements in place	6.4	0			
	to regularly review actual					
	financial performance against					
	budgets? Please explain what					
	these arrangements are.					
10.	Have any significant (+10%)	6.4	2024			
-0.	overspends during the year been	0	202.			
	managed? Please explain how					
	these have been managed and					
	reported.					
11	Are all fees and charges regularly	6.5	0			
	reviewed?	0.5				
12	Are invoices raised promptly for	6.5	0			
	all income due?	0.5				
12	Is debt collection effective and	6.5	0			
13.	are write-off levels low?	0.5				
1/1	Are all levels of fees and charges	6.5	0			
14.	clearly published in an	0.5				
	cicarry published in all			1		

appropriate and accessible						
format?	1	<u> </u>				
Principle 7. Communication and Engagement - The organisation communicates and engages with all parties in a way that is accessible, open and						
responsive.		T 000 4	0 100/0	T = 1		
Question	Cross-	2024 or	Comply? Y/N only	Please use for additional	Brief detail of	
	reference to	ongoing?		information if you wish. Evidence	known non-	
	Governance			need not be supplied but must be	compliance	
	Framework			available on request.		
1. Are there processes in place to	7.3	2024				
ensure proactive, transparent,						
timely and responsive						
communication with staff and						
service users in line with						
corporate communications						
policy? Please give details of the						
main channels of communication						
and briefly give examples of any						
action taken recently to improve						
communication with specific						
target groups.						
2. Are there arrangements in place	7.5	0				
to ensure engagement with						
relevant individuals and bodies						
in decision-making and policy						
development, where it is						
appropriate to do so?						
Principle 8. Risk Management, Fraud a	and Insurance - T	he organisation i	dentifies and manage	es its risks to deliver effective accoun	tability and	
outcomes.					·	
Question	Cross-	2024 or	Comply? Y/N only	Please use for additional	Brief detail of	
	reference to	ongoing?	,	information if you wish. Evidence	known non-	
	Governance			need not be supplied but must be	compliance	
	Framework			available on request.		

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1.	Are there one or more risk	8.2	0		
	registers in place for your				
	department/ service/ /business				
	unit? Please explain how these				
	registers are reviewed and kept				
	up to date.				
2.	Are there arrangements in place	8.2	0		
	for staff in your area to feed				
	issues into the corporate risk				
	register where appropriate?				
3.	Do risk registers include	8.2	0		
	consideration of all types of risk		-		
	including fraud risks, partnership				
	risks, information management,				
	business continuity, health and				
	safety and opportunity risks?				
4	Have appropriate risk owners	8.2	0		
	been nominated to ensure that	0.2	J		
	actions are taken to monitor and				
	manage all risks identified?				
_	Are arrangements in place to	8.2	0		
٥.	ensure all risks that can be	0.2	U		
	insured are covered by the				
	States' external policy or internal				
	insurance arrangements?				
6.	Are the corporate Health &	8.2	Ο		
	<u>Safety Minimum Standards</u> that				
	are relevant to the department,				
	understood, implemented and				
	aligned to departmental				
	standards/requirements?				
7.	Have you identified	8.2	0		
	improvement opportunities as				

	an outcome of your Health &				
	Safety Assurance Questionnaire				
	completion?				
8.	Have critical and priority services	8.3	0		
	been identified and continuity				
	plans developed and approved				
	for these areas?				
9.	Are business continuity plans	8.3	0		
	regularly reviewed and tested?		_		
10.	Were any failures in risk	8.4	2024		
	management arrangements				
	during the year resulting in				
	adverse media coverage, loss of				
	States' assets or injury to staff				
	discussed at a senior level to				
	consider lessons learned? Please				
	list any such incidents.				
11	Have all frauds and financial	8.6	2024		
	irregularities identified been	0.0	2024		
	referred to the Chief Internal				
	Auditor in accordance with the				
	Anti-Fraud and Corruption				
	•				
	Strategy and Fraud Response Plan?				
12		8.6	0		
12.	Have specific fraud risks been	8.6	U		
	identified and have mitigating				
	actions been identified and put				
4.0	in place?	0.6			
13.	Have anti-money laundering and	8.6	О		
	anti-corruption arrangements				
	been put in place, including				
	compliance with the Corruption				
	(Jersey) Law 2006, the Anti-				

	Money Laundering Policy and the Anti-Fraud and Corruption Policy?					
Pr	nciple 9. Information Governance	- The organisation	n manages its inf	ormation responsibly	and effectively.	
Qu	estion	Cross- reference to Governance Framework	2024 or ongoing?	Comply? Y/N only	Please use for additional information if you wish. Evidence need not be supplied but must be available on request.	Brief detail of known non- compliance
1.	Are all staff in your service/department are aware of policies in relation to the use of States equipment and systems (e.g. IS Security Policy, internet and email usage and phone usage)?	9.1	0			
2.	Has your area complied with Data Protection (Jersey) Law 2018 requirements during the year, including subject access requests (SARs)? Please give the number of SARs made and complied with during the year.	9.1	2024			
3.	Have actions been taken to manage information security risks? Please list any significant breaches of IS policies during the year and what action was taken in response. For minor breaches please provide summary information only (e.g. number of each type).	9.1	2024			

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4.	Are robust arrangements in	9.1	2024			
	place to monitor compliance					
	with Freedom of Information					
	(FoI) legislation? Please give the					
	number of FoI requests in the					
	year, and how many of these					
	were fully complied with.					
5.	Are all the required Information	9.1	2024			
	Sharing Agreements in place,					
	including with other					
	departments and for all					
	partnering and contractor					
	activities or services undertaken					
	in the last financial year?					
6.	Are you satisfied that all staff	9.1	2024			
	and contractors (that you were					
	responsible for) that have left					
	the employment of your service					
	during the financial year have					
	been removed from accessing					
	States IS systems?					
7.	Have all staff been trained in the	9.2	2024			
	use of relevant IS systems?					
	Please provide brief details of					
	training provided in the year and					
	attendance levels.					
		•				
1.						

Please list items which may be considered "significant" for inclusion in the States' Annual Governance Statement. These may be those which:	BOX A - Please declare below any significant control or governance issues that should be considered as part of the States of Jersey Governance Statement:	BOX B – Please set out  (a) actions taken or planned to be taken to address any significant control or governance issues listed in Box A; and actions taken to address any significant control or governance issues listed in last year's departmental or Corporate Governance Statements.
Have seriously prejudiced or prevented achieving a key States objective;		
Have resulted in the need to seek additional funding to allow it to be resolved;		
Have required a significant diversion of resources;		
Have had a material impact on the accounts;		
The Public Accounts Committee (PAC) has advised that it should be considered as significant;		
Have resulted in significant public interest or has seriously damaged reputation;		
Have resulted in formal actions being taken by senior officers (e.g. the States Treasurer);		
Have received significant adverse commentary in external inspection reports that has not been able to be addressed in a timely manner.		

I confirm that this document provides a fair and accurate reflection of the system of internal control and governance arrangements operating within my area of responsibility during the past year.						
Name of Accountable Officer:	Signature:	Date:				
Name of officer completing the self-assessment	Signature:	Date:				