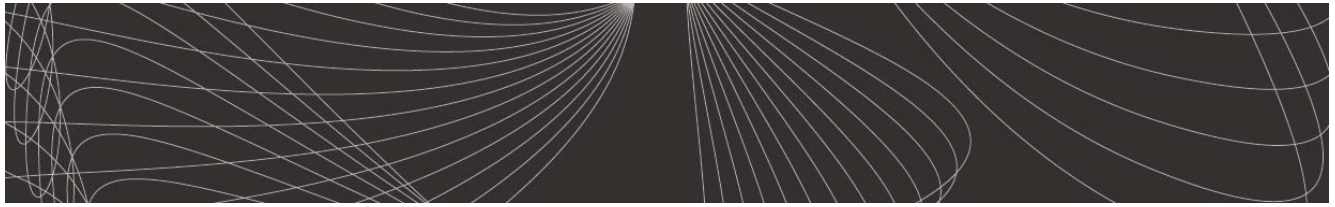




Library and Archives
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REVIEW OF GOVERNANCE SERVICE DELIVERY

**AUDIT REPORT
MAY 2010**

Canada 

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EXECUTIVE SUMMARY

The objective of this review was to assess the adequacy and effectiveness of the governance arrangements in place to enable Library and Archives Canada's (LAC) commitment to citizen-focused service, with an emphasis on the attainment of the following objective:

Effectiveness of linkages and communication between the organization, users and other external stakeholders and the degree to which these linkages support and drive internal management priorities and plans.

The scope of this review was limited to the Services Advisory Board (SAB) and Services Committee (SC).

In the context of this scope, the goal of the review was to assess the following elements of governance:

- Authority, responsibility and accountability
- Information and communication
- Performance management and oversight

Using documentation review and interviews with key stakeholders, the adequacy and effectiveness of these practices were assessed.

Our key findings are:

- Accountability and responsibility are defined, although greater clarity is required on the scope and decision-making authority of the SAB and the SC;
- Key guidelines and directives are not in place for the SAB, including directives on information management;
- The tracking and follow-up of action items identified in SAB and SC meetings require more discipline to ensure commitments made are executed;
- The SAB and the SC receive and provide information through formal channels, yet priorities and directives from Management Board are provided informally.
- Reporting from the SAB and the SC to Management Board on directions and activities may not be sufficient to support managerial oversight, although informal communication between the ADM responsible and the two bodies provides some mitigating measures;
- Insufficient directives on information management are provided to the members of the SAB and SC; and,
- The assessment and performance management of the SC and the SAB are done informally, in the absence of defined metrics.

Recommendations

To build upon the achievements to date and to move towards a more mature governance structure in support of effective decision making, we recommend that:

1. Terms of reference for the Services Advisory Board and the Services Committee should be reviewed and refined, in keeping with the broader attention and associated priorities related to the implementation of the Services Strategy.
2. As part of the renewal of the terms of reference, management should specify, in greater detail, composition guidelines for the Services Advisory Board, to ensure that appropriate representation is achieved, in line with broader LAC objectives.
3. A more detailed governance structure for both bodies should be defined and clearly communicated. This structure should specify the role of the Services Committee and the Services Advisory Board in supporting Management Board and the means and channels by which bi-directional communication of information is effected.
4. Expectations in terms of conduct and key directives with respect to information management should be explicitly communicated to the members of the Services Advisory Board and signed off, as part of their initiation / orientation and on a periodic basis thereafter.
5. Tracking and management of action items for both the Services Advisory Board and the Services Committee should be improved. The action items should be included in the minutes of the meetings.
6. Information management and safeguarding guidelines should be established and shared with all SAB members in a manner that balances the need to consult with the requirements of information safeguarding.
7. As part of the broader implementation of the Services Strategy, management should determine its consultative requirements. These requirements should then be reviewed against the current roles, relevance and performance of the SAB and the SC to ensure both bodies are optimally positioned to meet the requirements of Management Board in relation to the Services Strategy.
8. Subsequent to this analysis, management should establish and communicate performance measures and conduct periodic reviews for both the SAB and the SC.

Management Response

It must be noted that the modernization initiative was just underway when the Review of Governance of Service Delivery at LAC was assessed. The recommendations in the report will therefore be addressed within the context of LAC's modernization initiative. Under this initiative, governance mechanisms will be confirmed both to ensure internal horizontality, as well as to engage externally with stakeholders and users to explore new collaborative ways to deliver services.

1. LAC management agrees to develop clear Terms of Reference (ToR) for governance committees that will be both aligned with the modernization initiative and will reflect LAC-wide governance structures.
2. LAC management will present Management Board with compositional guidelines for the selection of members for any consultative bodies established under the modernization initiative, to ensure appropriate representation.
3. LAC management will clearly define, map and communicate the governance structures and their linkages to Management Board, for all consultative committees established, to ensure client-focused service oversight at the institutional level.
4. LAC management will provide orientation materials to members of consultative committees established under the modernization initiative and will explicitly communicate the conduct expectations.
5. LAC management will ensure that formal Records of Decision with well-defined action items, person(s) responsible, due date(s) and follow-up mechanisms will be implemented for any governance body established under the modernization initiative.
6. LAC management will ensure that all information provided to participants in the context of client consultation is approved by senior management to ensure that the information can be made public.
7. LAC management will consult broadly across the institution regarding the consultative needs of the institution and how these needs would integrate with the work of internal committees focusing on modernization.
8. LAC management agrees with the recommendation. Results and outcomes will be well defined and integrated into any process for client consultation.

1 INTRODUCTION

1.1 BACKGROUND

Library and Archives Canada (LAC) has a broad mandate to preserve Canada's documentary heritage, to be a source of knowledge accessible to all, to cooperate with related institutions and to serve as the collective memory of the Government of Canada¹. In support of this mandate, the Programs and Services Sector has primary responsibility to facilitate access to the holdings of LAC and in so doing, aims to ensure that clients receive a consistent and comprehensive level of service and further, that existing services are aligned with client needs and priorities.

Assisting the Programs and Services Sector in this role are two bodies:

- The **Services Committee (SC)** is an internal, Director General-level committee which has as its mandate the provision of strategic direction in relation to the following:
 - the Services Strategy for clients
 - service standards for all LAC services for public clients
 - the single window concept for services to the public
 - integrated LAC-wide approach to provision of services to the public
 - Services Advisory Board
- The **Services Advisory Board (SAB)** is an external consultative body that is tasked with the examination of issues related to the service aspects of LAC's mandate. The SAB provides advice on service-related issues to the Assistant Deputy Minister, Programs and Services Sector and helps to identify client needs as part of a broader consultation process.

Collectively, these bodies help to ensure that LAC's strategies are appropriately and effectively citizen-focused.

¹ Library and Archives Canada. Business Plan 2008-11, page 3.

1.2 SCOPE AND OBJECTIVE

The **objective** of this assignment was to assess the adequacy and effectiveness of the governance arrangements in place to enable LAC's commitment to citizen-focused service, with an emphasis on the attainment of the following objective:

Effectiveness of linkages and communication between the organization, users and other external stakeholders and the degree to which these linkages support and drive internal management priorities and plans.

The **scope** of this review was limited to the two previously mentioned bodies, the Services Advisory Board and the Services Committee.

In the context of this scope, the goal of the review was to assess the following elements of governance:

- Authority, responsibility and accountability
- Information and communication
- Performance management and oversight

1.3 OBJECTIVE OF THIS DOCUMENT

This report summarizes the results of the review and provides an analysis of current practice against review criteria. Where applicable, recommendations for improvements in the current governance arrangements are provided.

1.4 METHODOLOGY

This approach was conducted in three main phases, each of which is described below:

Planning Phase

The objective of this phase of the work was to determine and plan for the scope of the review. To this end, working with the review objective, the review team identified and analyzed key risks to which LAC is inherently exposed in relation to the bodies under review. These risks are provided in Appendix A of this document. Based on risk, key management practices in place to mitigate these risks were selected and included in the scope. For each area under review, detailed criteria, drawn from established sources and best practices, were identified and review questions developed to help assess the effectiveness of these practices. Interviews and high level documentation review were used to conduct this phase of the work.

Examination Phase

Through interviews and detailed documentation review, the key management practices identified were assessed, from which observations and findings were drawn. These findings were presented to management for comment and form the basis of this report.

Reporting Phase and Management Response

Key observations and recommendations for improvement, where applicable, were then consolidated into a formal report, for submission to the ADM, Programs and Services Sector. Management's response and action plan to address these recommendations are provided subsequent to each recommendation and are summarized in Appendix B.

2 OBSERVATIONS AND RECOMMENDATIONS

2.1 AUTHORITY, RESPONSIBILITY AND ACCOUNTABILITY

CRITERIA

Accountability is the duty to account for the fulfillment of one’s responsibility. As such, key enablers of accountability are the means by which authority and accountability are established, communicated and periodically reviewed and updated. Authority is the right to direct and exact performance. Responsibility is the obligation to perform. Collectively, the clear delineation of responsibilities, delegated authorities and lines of communication support the effective coordination between all parts of the organization, including governance bodies and management, and ensure that all parties within the organization are aware of, and comply with, their responsibilities.

In line with these expectations, the following criteria were used for this portion of the review.

- Accountability instruments, including terms of reference are current, well communicated, clearly demonstrate the role of the committees and are aligned with the broader LAC governance structure of the organization.
- Roles and responsibilities for governing and decision making are clear and articulated separately from those consultative responsibilities.
- Formal guidelines exist describing the desired composition and representativeness of the SAB and SC.
- Clear directives exist and are communicated to members.
- A process exists to track and monitor actions identified in meetings

OBSERVATIONS

Finding:

Accountability and responsibility are defined, although greater clarity is required on the scope and decision-making authority of the SAB and the SC.

Accountability and responsibility for both the SAB and the Services Committee are outlined in their respective Terms of Reference (ToR). Terms of reference for the SAB is posted on the LAC website, indicating they have been communicated to members and are available to other parties. The ToR outlines the roles of the two bodies as follows:

- The role of the Services Committee is defined in the terms of reference as a decision-making body, with “delegated authority from ADM ... to make decisions in relation to services.” They are also defined as the body that will “*approve and recommend to*

Management Board those issues as appropriate.” While this demonstrates the link to the broader governance structure, authority of the Services Committee versus authority of the ADM, Programs and Services Sector to make decisions on service is unclear. As worded, it appears that the authority of the ADM is fully delegated to a committee of Directors General.

- The SAB ToR refers to it as a consultative body in relation to client service matters. A review of the SAB meeting minutes, most notably, their requests for input into areas broader than what could be considered service matters, indicates that the definition of service may not be clearly enough defined, resulting in mandate expectations of the members that may be out of alignment with those of management.

In the past year, the SAB formed two sub-committees—one Operational and one Strategic Sub-Committee, the goals of which were to permit greater focus on operational and strategic issues, respectively. Terms of reference exist for the sub-committees. While documented, the mandates presented are broad in nature and the scope is not necessarily focused on services. For instance, the Strategic Sub-Committee has as its mandate: *“the provision of strategic advice to the LAC SAB,”* with suggested topics for discussion including *“the overall mandate of LAC, core functions and ‘mandate creep’; partnerships and the use of intermediaries; and, acquisition policies.”*

While overall the mandates are defined, the breadth with which the scope and range of authority is defined may increase the risk to LAC that the organization and its advisory committees may be out of alignment with one another. Compounding this, the LAC governance structure, dated November 21, 2007, identifies Directors General Committees (Services Committee is one) and Sectors Branch Committees, as feeding the broader governance structures and specifically, as committees tasked with providing operational advice to sector ADMs and to Management Board. However, neither the ToR nor other documents reviewed outline the manner or channels through which the two bodies under review link into the decision making of LAC management.

Finding:

Key guidelines and directives are not in place for the SAB, including directives on information management.

One of the chief means by which accountability and responsibility is established and communicated is through the provision of formal directives, guidelines and other forms of communication to members of the governing bodies. Two key elements were reviewed in this

vein, specifically for the SAB²: first, the degree to which composition guidelines exist to ensure appropriate representation and; second, the degree to which members are provided appropriate direction on their roles and expectations.

The review identified that, for the SAB, the guidelines for describing the desired composition and representativeness of the SAB could be amplified. In modifying the ToR in June 2008, additional membership criteria were identified which include: “*experience consulting LAC holdings and services; or, representative of LAC user group or affiliated with LAC partner; and, peer recognition of leadership qualities; and, availability and willingness to serve.*” Geographic, ethnic diversity, gendered and official languages considerations are also provided as criteria³. We understand that at present, as the terms of many committee members are expiring, management is examining composition of the SAB, to ensure diversity of the advisory board, while maintaining a reasonable size of membership. Early discussion has included aligning SAB composition with three groups: clients / users, stakeholders and experts. While it has not yet been confirmed, it is thought that client groups may form the majority of the SAB. Such efforts are encouraged.

Direction on the composition for the Services Committee is more straightforward. While the committee has no formal guidelines on its composition, its ToR clearly stipulate that the committee aims to ensure an integrated LAC-wide approach to the provision of services and requires participation from all LAC Directors General. This requirement provides sufficient clarity on representation.

In addition to composition guidelines, the review also examined the manner and means by which directives and other guidelines were provided to SAB and Services Committee members. The review indicated that there are no directives to members outlining expectations in relation to their roles. There is no formal orientation provided to members through which expectations for conduct are outlined. In discussions with members of the SAB Secretariat, it was noted that the ToR and the discussion points at the inaugural meeting formed the basis of orientation. It was further noted that at the first meeting, there was much discussion on the scope and authority of the SAB.

² Because the Services Committee is an internal committee, the provision of directives and guidelines was assumed to have been provided through the broader governance structure of LAC. Since this broader focus was not that of the Review, this line of inquiry was focused solely on the SAB.

³ SAB Record of Decisions – June 20, 2008.

Finding:

The tracking and follow-up of action items identified in SAB and SC meetings require more discipline to ensure commitments made are executed.

One of the important day-to-day means by which accountability is maintained is through the tracking and monitoring of items requiring action, as identified in meetings. Simply stated, the management of action items provides assurance that what gets committed to is eventually executed. As such, this line of inquiry formed an aspect of this review.

The results of the review indicated that minutes of meetings are generally high-level and, in the case of the SAB, while records of decision are noted and posted, due dates and specific assignment of ownership for the completion of the actions could be made more explicit. While the Services Committee does not have a formal Record of Decision, decisions taken at meetings are embedded in the Services Committee's reports.

Discussions with management have indicated that other informal mechanisms exist to help manage action items. For instance, in the course of meetings, items that are identified for follow-up or further study are carried forward and placed on the subsequent agenda. However there is no running list of action items required, taken or closed. As a result, there is some risk that actions identified as being important, will not be addressed, or may not be addressed in a timely fashion.

RECOMMENDATIONS

1. Terms of reference for the Services Advisory Board and the Services Committee should be reviewed and refined, in keeping with the broader attention and associated priorities related to the implementation of the Services Strategy.
2. As part of the renewal of the terms of reference, management should specify, in greater detail, composition guidelines for the Services Advisory Board, to ensure that appropriate representation is achieved, in line with broader LAC objectives.
3. A more detailed governance structure for the both bodies should be defined and clearly communicated. This structure should specify the role of the Services Committee and the Services Advisory Board in supporting Management Board and the means and channels by which bi-directional communication of information is effected.
4. Expectations in terms of conduct and key directives with respect to information management should be explicitly communicated to the members of the Services Advisory Board and signed off, as part of their initiation / orientation and on a periodic basis thereafter.

5. Tracking and management of action items for both the Services Advisory Board and the Services Committee should be improved. The action items should be included in the minutes of the meetings.

Management Response

1. LAC management agrees to develop clear Terms of Reference (ToR) for governance committees that will be both aligned with the modernization initiative and will reflect LAC-wide governance structures.

2. LAC management will present Management Board with compositional guidelines for the selection of members for any consultative bodies established under the modernization initiative, to ensure appropriate representation.

3. LAC management will clearly define, map and communicate the governance structures and their linkages to Management Board, for all consultative committees established, to ensure client-focused service oversight at the institutional level.

4. LAC management will provide orientation materials to members of consultative committees established under the modernization initiative and will explicitly communicate the conduct expectations.

5. LAC management will ensure that formal Records of Decision with well-defined action items, person(s) responsible, due date(s) and follow-up mechanisms will be implemented for any governance body established under the modernization initiative.

2.2 INFORMATION AND COMMUNICATION

CRITERIA

Effective channels of communication and the information that flows through them are integral to good governance. Without timely, accurate, meaningful and appropriate information, members of governing and advisory bodies may not be equipped with the knowledge and insight necessary to effectively discharge their responsibilities. With it, input from the bodies and direction to them is optimized resulting in overall effectiveness of decision making.

In the context of these requirements, LAC's information and communication processes in support of the SAB and the SC were assessed against the following criteria:

- Formal communication process/ mechanisms exist and support the sharing of timely, relevant and reliable information with members.
- Both bodies are provided clear and consistent information by Management Board, communicating broad LAC priorities, on which consultation via the bodies are required.
- The bodies regularly provide Management Board with reports summarizing their activities, outputs and outcomes, demonstrating alignment with their mandates.
- The outputs of the bodies effectively and appropriately inform management decision making.
- The organization has processes, procedures and directives in place to manage and safeguard information provided to and received from the Services Committee and the Services Advisory Board.

OBSERVATIONS

Finding:

The SAB and the SC receive and provide information through formal channels, yet priorities and directives from Management Board are provided informally.

Interviews with ADMs (current and former) indicated that information is sent electronically from the Secretariat functions through to the members for their consideration and, as necessary, members' consultations with their stakeholder groups. It was acknowledged that the information sent is not always timely and therefore not always supportive of good consultation between the SAB and their broader constituencies. Once communicated, material is posted on the website. More informally, communication comes from the ADM (as a member of Management Board) to the SAB members.

As part of this review, the governance structure and the channels of communication were examined to determine the efficiency and effectiveness which with these channels support the

flow of communication. The current governance structure does not specify reporting and communication channels, nor is there guidance on the escalation of issues or clear procedures on the allocation of the action items between the SAB and SC and LAC management. While management has indicated that to date, there has been no need for escalation or dispute resolution, the absence of these escalation channels may pose a risk in the future should such a situation arise.

Finding:

Reporting from the SC and the SAB to Management Board on directions and activities may not be sufficient to support managerial oversight, although informal communication between the ADM responsible and the two bodies provides some mitigating measures.

The maintenance of records of decision is the main mechanism by which the activities of the SAB and Services Committee are presented back to Management Board. Documentation review indicated that meeting results are summarized, are clear and summarize the main ideas of the meeting and reflect activities that are aligned with the general mandate of the SAB and SC. However, these reports are focused largely on activity reporting rather than results; no formal performance reporting, such as an annual report, is provided, although verbal reporting from the ADM to Management Board is provided. Additional detail on performance management is provided below in Section 2.3.

Finding:

Insufficient directives on information management are provided to the members of the Services Advisory Board.

Because the SAB is a consultative committee, there is an expectation that members will share information with their constituencies, the goal of which is to solicit input from the broader communities which they represent. At the same time, in support of effective communication within the SAB, there may be requirements to safeguard information. Based on the documents reviewed, there are no guidelines or directives provided to members on information management, the goal of which is to balance information safeguarding with the objectives of consultation.

RECOMMENDATIONS

6. Information management and safeguarding guidelines should be established and shared with all SAB members in a manner that balances the need to consult with the requirements of information safeguarding.

Note: For recommendations relevant to the reporting on SAB and SC's results, please see recommendation number 7 on performance management and oversight.

Management Response

6. LAC management will ensure that all information provided to participants in the context of client consultation is approved by senior management to ensure that the information can be made public.

2.3 PERFORMANCE MANAGEMENT AND OVERSIGHT

CRITERIA

Performance management and oversight practices are those which close the loop on accountability, authority and responsibility. Through these processes, management gathers and analyzes information on expected outcomes, to assess, and ultimately manage, effectiveness, efficiency and relevance. In light of these requirements, the following criteria were used to assess the state of performance management and oversight for this review.

- Management has defined and communicated the performance expectations of the SAB and the SC.
- Performance expectations and measurement strategies are in place, have been communicated and are well understood by all parties.
- Management periodically reviews performance and relevance of the two bodies.

OBSERVATIONS

Finding:

The assessment and performance management of the SC and the SAB are done informally, in the absence of defined metrics.

While the ToR speak to the role of the SAB and the Services Committee, management has neither defined nor communicated specific performance expectations in relation to these bodies. There is presently no performance measurement framework in place, including means and frequency of assessment. While LAC need not implement a complex performance framework, a minimum amount of formality is required to ensure that effectiveness, efficiency and relevance of the two bodies are periodically assessed. This is of particular importance in light of the materiality of the expenditures associated with the bodies, most notably the SAB, whose budget in 2008–09 was approximately \$400,000.

To date, the assessment of the relevance and effectiveness of the two bodies has been done informally, by the ADM responsible. Through these means, performance has been deemed to be positive. As LAC implements its Services Strategy, there is acknowledgement that relevance of the committees should be examined in this broader context. At present, there are no formal plans to conduct this performance review.

RECOMMENDATIONS

7. As part of the broader implementation of the Services Strategy, management should determine its consultative requirements. These requirements should then be reviewed against the current roles, relevance and performance of the SAB and the Services Committee to ensure both bodies are optimally positioned to meet the requirements of Management Board in relation to the Services Strategy.
8. Subsequent to this analysis, management should establish and communicate performance measures and conduct periodic reviews for both the SAB and the SC.

Management Response

7. LAC management will consult broadly across the institution regarding the consultative needs of the institution and how these needs would integrate with the work of internal committees focusing on modernization.
8. LAC management agrees with the recommendation. Results and outcomes will be well defined and integrated into any process for client consultation.

3 CONCLUSIONS

In an effort to establish linkages and communication between LAC, its users and other external stakeholders on matters related to services, LAC established the SAB as a means by which to communicate with and receive feedback from a broad range of stakeholders. When formed, the SAB was intended as a vehicle by which a specific stakeholder concern in relation to services (i.e., changes to service hours), would be addressed. Subsequent to this issue being resolved, the SAB has continued as a consultative committee in a broader context, providing a means by which stakeholders are engaged on a variety of topics. Complementing this, the internal Services Committee was established to ensure horizontality of management in relation to services.

Overall, the results of this review indicated that the SAB and the Services Committee are reasonably effective; however, more effort is needed to increase clarity of authority, as well as effectiveness of operations. These opportunities for improvement are presented in the form of recommendations and aim not only to strengthen performance and control, but also to enable LAC to position itself more effectively as a client service organization.

Presently, LAC is implementing its broader Services Strategy, from which plans and priorities in relation to client services will be identified and implemented. The development of this strategy affords LAC with an ideal opportunity to not only strengthen client services, but in so doing, address the recommendations provided in this report. Such efforts are strongly encouraged.

Appendix A INHERENT RISK ANALYSIS

The following table presents the risks to which LAC is inherently exposed in relation to the scope of this review. As noted in Section 1, these risks were analyzed and used to help develop the scope of the review.

Key Risk Areas	Risk Description
Alignment and priority setting	The risks associated with internal or external misalignment between the LAC's mandate, program design or services with the priorities of users. These risks are also associated with the organization's ability to align and integrate operational priorities in support of strategic planning and decision making.
Governance	Risks that relate to adequacy, appropriateness and effectiveness of organizational structures and accountabilities. These risks encompass the potential for insufficient independence of the committees, to insufficient monitoring of the committees' effectiveness, relevance, etc.
Stakeholder interests	The risks associated with actions or inactions taken by external or internal stakeholders. This category encompasses the risks associated with unrepresentative committee composition.
Information for decision making	The risks associated with insufficient, untimely or inconsistent information in support of governance and decision making.
Communication	Risks stemming from inadequate or ineffective internal communication in the organization.

Appendix B MANAGEMENT ACTION PLAN

Review of Governance – Service Delivery at LAC

Recommendation	Action	Person responsible	Deadline
<p>1. Terms of reference for the Services Advisory Board and the Services Committee should be reviewed and refined, in keeping with the broader attention and associated priorities related to the implementation of the Services Strategy</p>	<p>-assess options for ongoing client consultation and feedback to ensure alignment with modernization initiative</p> <p>-present recommendations to A/ADM</p> <p>-develop a communications plan regarding any changes made in regard to client consultation mechanisms</p>	<p>DG Services Branch: Alison Bullock</p>	<p>December 2010</p>
<p>2. As part of the renewal of the terms of reference, management should specify, in greater detail, composition guidelines for the Services Advisory Board, to ensure that appropriate representation is achieved, in line with broader LAC objectives.</p>	<p>-see activity in relation to mechanism for client consultation for recommendation #1</p> <p>-establish specific compositional guidelines for any consultative committee established</p>	<p>DG Services Branch: Alison Bullock</p>	<p>December 2010</p>

<p>3. A more detailed governance structure for both bodies should be defined and clearly communicated. This structure should specify the role of the Services Committee and the Services Advisory Board in supporting Management Board and the means and channels by which bi-directional communication of information is effected</p>	<ul style="list-style-type: none"> -see activity in relation to mechanism for client consultation for recommendation #1 - define detailed governance structures for any consultative committee established -communicate governance structures to Management Board -develop plan and mechanisms to report to LAC management 	<p>DG Services Branch: Alison Bullock</p> <p>or</p> <p>appropriate committee chair</p>	<p>December 2010</p> <p>or</p> <p>as required</p>
<p>4. Expectations in terms of conduct and key directives with respect to information management should be explicitly communicated to the members of the Services Advisory Board and signed off, as part of their initiation / orientation and on a periodic basis thereafter.</p>	<ul style="list-style-type: none"> -see activity in relation to mechanism for client consultation for recommendation #1 -expectations regarding conduct and orientation materials will be developed for any consultative committee established 	<p>Committee Chair</p>	<p>Will be ongoing</p>

<p>5. Tracking and management of action items for both the Services Advisory Board and the Services Committee should be improved. The action items should be included in the minutes of the meetings.</p>	<p>-see activity in relation to mechanism for client consultation for recommendation #1</p> <p>- formal report structure for any consultative committee will be established that clearly identify action items, due dates and assigned responsibility</p> <p>-follow up at subsequent meeting will be ensured as well as interim reporting against action items</p>	<p>Committee Chair</p> <p>Committee Secretariat</p>	<p>Will be ongoing</p>
<p>6. Information management and safeguarding guidelines should be established and shared with all SAB members in a manner that balances the need to consult with the requirements of information safeguarding.</p>	<p>-see activity in relation to mechanism for client consultation for recommendation #1</p> <p>See Management Response to this recommendation – no further action is required.</p>		

<p>7. As part of the broader implementation of the Services Strategy, management should determine its consultative requirements. These requirements should then be reviewed against the current roles, relevance and performance of the SAB and the SC to ensure both bodies are optimally positioned to meet the requirements of Management Board in relation to the Services Strategy.</p>	<p>- a review of the consultative needs of the institution will be conducted to determine the most appropriate mechanism for conducting on-going client consultation and how client consultation will integrate with the work of internal committees focusing on modernization.</p>	<p>DG Services Branch: Alison Bullock</p>	<p>December 2010</p>
<p>8. Subsequent to this analysis, management should establish and communicate performance measures and conduct periodic reviews for both the SAB and the Services Committee.</p>	<p>- LAC managers overseeing and participating in consultative committees will have the expected outcomes incorporated into their Performance Management Agreements (PMA) in order to assess individual performance.</p> <p>-Metrics in the form of a simple performance measurement framework will also be established to evaluate the overall success of consultative committees and any other client consultation conducted.</p>	<p>ADMs</p> <p>-appropriate committee chairs</p>	<p>Fiscal year 2011–2012</p>