



Partnership Annual Review Form

Please use this form to review partnerships of **moderate** and **major** significance.

For guidance, refer to the Partnership Protocol.

Ref	Review Criteria
1.1	Name of the partnership:
1.3	Have the Council's representatives changed in the last year?
	Yes / No If yes, please state:
2.3	Have the long term aims of the partnership changed?
	Yes / No If Yes provide details:
3	Is the partnership contributing to the Corporate Aims stated in the Partnership Evaluation Form?
	Yes / No If No provide details:
4.1	Have risk assessments been reviewed and necessary action taken?
	Yes / No If Yes attach copy of reviewed Risk Register. If No provide review date:
4.1a	Are relevant Council policies being adhered to?
	Data Quality <input type="checkbox"/> Procurement <input type="checkbox"/> Behaviour and Conduct <input type="checkbox"/> Equal Opportunities <input type="checkbox"/>
4.1b	Are sound governance arrangements in place:
	Regular partnership meetings Yes / No
	Financial reporting Yes / No
	Performance reporting Yes / No
	Risk management reviews Yes / No
	Reviews of terms of reference Yes / No

Ref	Review Criteria
5	Have there been any changes to the funding profile?
	Yes / No If Yes provide details:
8	Is the partnership achieving its stated targets:
	Milestones Yes / No Outputs Yes / No Outcomes Yes / No

Lead Officer:

Name:

Job Title:

Signature:

Date:

Head of Service:

Name:

Signature:

Date:

All forms must be fully completed and sent to: Pam Brown (Chief Executive's & Partnership Team Manager).

Logged on Partnerships Register:

Name:

Signature:

Date: