



INDEPENDENT GOVERNANCE REVIEW — FICTIONAL SPECIMEN

Casterbridge Design Review Partnership

Illustrative findings report for Casterbridge Borough Council

Specimen report • August 2026 • Not a real client or assessment

Casterbridge Borough Council, its people, arrangements, evidence and findings are entirely fictional. This document illustrates reporting style and must not be treated as an opinion about any real organisation.

Evidence-led governance for design review arrangements



Executive summary

The fictional Casterbridge arrangement has a credible public-interest mandate, well-chaired review sessions and a protected reporting route. Its effective maturity score is 63%, within Established with gaps. The headline status is Amber because two Major safeguards are not yet met: panel-selection rationale is inconsistently recorded, and information/disclosure responsibilities between commissioner and provider are not fully assigned.

Effective maturity	Headline status	Evidence coverage	Review period
63%	AMBER — major safeguards	84%	April 2025–March 2026

HOW TO READ THIS RESULT

The amber status is an override, not a conclusion that the service is failing. It signals that two governance gaps need accountable action because they affect defensibility and public confidence.

1. Scope and method

The illustrative review covers one legal entity and one design review arrangement. It applies the Design Review Governance Framework (v1.0) to a defined evidence set, recent sampled practice and a structured evidence meeting. It does not assess the design quality of individual schemes or provide legal, procurement or audit assurance.

- Twelve core documents and selected extracts from three completed reviews were considered.
- A 75-minute evidence meeting was held with the accountable owner and operational manager.
- Scores were evidence-capped and critical safeguards were assessed separately.
- One factual-correction round was allowed; evaluative conclusions remained with the reviewer.

2. Overall governance picture

No.	Domain	Score	Headline observation
1	Mandate, purpose and accountability	72%	Clear approved purpose; review cycle needs tightening.
2	Independence, funding and separation	70%	Chair controls advice; independence testing is informal.
3	Conflicts, interests and conduct	58%	Policy exists; scheme-specific records vary.
4	Commissioning, contracting and financial controls	55%	Core authority is present; renewal trail is fragmented.
5	Panel recruitment, composition and competence	68%	Competence is strong; succession evidence is limited.
6	Scheme and panel selection	64%	Proportionate practice, but reasons are not consistently retained.



No.	Domain	Score	Headline observation
7	Preparation, evidence and participation	67%	Balanced briefings; accessibility prompt is not standard.
8	Review conduct, advice and reporting	73%	Consistent chairing and protected factual correction.
9	Transparency, confidentiality, records, data and AI	52%	Roles across the partnership need explicit allocation.
10	Accountability, quality, outcomes and improvement	51%	Feedback is gathered but trends and closure are weak.

3. Strengths to protect

Protected chair control

The terms of reference and sampled reporting workflow give the chair control of conclusions and final written advice. The commissioner and scheme team can correct facts but cannot edit evaluative judgement.

Early and proportionate review

Referral guidance encourages early review and allows repeat review at defined design stages. Sampled cases showed decisions being influenced before options had closed down.

Accessible reports

Recent reports separate context, key observations and priority advice, and use a clear version history. Recipients could identify the panel's principal conclusions without reconstructing the session.

4. Material findings

ID	Level	Finding	Evidence	Why it matters
F01	Major	Record the rationale for chair, panellist and format selection	Two of three sampled reviews named participants but did not record how the mix met scheme-specific expertise, context and perspective needs.	A reasonable third party cannot consistently reconstruct why the selected panel was proportionate.
F02	Major	Allocate information, disclosure and record responsibilities	The service agreement and publication protocol do not fully reconcile commissioner/provider duties for FOI/EIR referrals, retention, access and secure deletion.	Requests or incidents could be delayed, duplicated or handled inconsistently.
F03	Improvement	Create a closed-loop annual governance report	Feedback and activity data are collected, but recurring themes, complaints learning and action closure are not reported to the accountable body.	Leadership cannot readily see whether controls are effective or improving.



5. Safeguard assessment

ID	Level	Result	Reason
CF01	Critical	Met	Current approved terms of reference.
CF02	Major	Met	Roles largely assigned; see information-specific gap under CF10.
CF03	Critical	Met	Chair controls final advice.
CF04	Critical	Met	Declarations required before review; record consistency addressed as improvement.
CF05	Critical	Met	No unmanaged conflict found in the fictional sample.
CF06	Major	Not met	Panel-selection rationale not retained consistently.
CF07	Critical	Met	Factual-correction-only route and chair approval evidenced.
CF08	Major	Met	Advice recipients and advisory status stated.
CF09	Critical	Met	Commissioning authority and operating basis evidenced.
CF10	Major	Not met	Information responsibilities incomplete across parties.

6. Prioritised 90-day action plan

Timing	Owner	Action	Completion evidence
0–30 days	Operational manager	Adopt a one-page selection record for every review; back-check the next three bookings.	Approved template and three completed records.
0–30 days	Accountable owner + information lead	Agree a RACI for disclosure, records, personal data, retention and incidents.	Signed RACI cross-referenced in the service agreement.
31–60 days	Contract owner	Vary or formally supplement the agreement and publication protocol to reflect the information RACI.	Approved and version-controlled documents.
31–60 days	Panel manager	Add accessibility, community context and scheme-specific questions to the briefing checklist.	Updated guidance and two sampled packs.
61–90 days	Accountable body	Receive the first integrated governance report covering safeguards, feedback, complaints, sample testing and open actions.	Minutes record challenge, decisions and owners.



7. Limitations and reliance

- This is a fictional specimen and no underlying Casterbridge evidence exists.
- A real review is bounded by the agreed entity, arrangement, period and evidence cap.
- Absence from a sampled record does not prove absence across all activity; it affects the strength of assurance available.
- The report is a professional governance review, not internal audit, legal advice, procurement sign-off or accreditation.

8. Independence, conflicts and factual correction

For a real assignment, the reviewer records any actual, potential or perceived conflict before appointment. The client is invited to correct factual inaccuracies and identify omitted evidence within the agreed window. Findings, scores and recommendations remain the reviewer's professional judgement.

Appendix A — illustrative evidence map

Evidence group	Illustrative items reviewed	Coverage
Mandate and establishment	Terms of reference; committee decision; governance map	Complete
Commissioning and finance	Service agreement; delegated-authority record; fee schedule	Mostly complete
People and conflicts	Appointment pack; roster; interests register; three scheme declarations	Partial sample
Review delivery	Guidance; agendas; three reports; factual-correction logs	Complete sample
Information and improvement	Publication protocol; privacy note; feedback summary; action log	Material gaps

Appendix B — status definitions

Green: no critical override and the evidence supports reliance at the stated scope. Amber: material safeguards or low-confidence conditions require action. Red: a critical safeguard is failed or unknown. Status is interpreted alongside maturity score, evidence coverage and limitations.