PUBLISHED METHODOLOGY

Design Review Governance Framework

A model-neutral, evidence-led framework for the governance of design review arrangements

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This framework is not a statutory standard, accreditation, audit opinion or legal advice. It is a transparent professional methodology for proportionate self-assessment and independent review.

Evidence-led governance for design review arrangements

Executive summary

The framework defines ten connected domains, 60 controls, 25 evidence items and ten safeguards that can override an otherwise acceptable average score. It is intended for local authorities, combined authorities, development corporations, partnerships, universities, providers and other organisations that commission or operate design review.

CORE PROPOSITION

The same governance principles are used across the free Exposure Check, the purchaser-led Governance Health Check and independent governance reviews. What changes is depth, evidence validation and reviewer independence—not the standard being tested.

1. Purpose, scope and boundaries

- Make governance expectations visible and testable across different delivery models.
- Identify strengths, material gaps and a prioritised route to improvement.
- Protect the independence, integrity and traceability of professional design advice.
- Support proportionate assurance without implying statutory certification or guaranteed compliance.

The framework reviews the governance of an arrangement, not the architectural or design merits of individual schemes. Local legal, procurement, data-protection and information-governance advice remains essential where required.

2. The ten-domain model

1. Mandate, purpose and accountability

A defensible arrangement needs a clear public purpose, remit, owner and relationship to decision making.

2. Independence, funding and separation

Independence must be visible in structures, incentives and the control of advice—not merely asserted.

3. Conflicts, interests and conduct

Recorded identification and mitigation of actual, potential and perceived conflicts protects trust in the advice.

4. Commissioning, contracting and financial controls

Public bodies need an authorised, aligned and reviewable basis for commissioning and funding the arrangement.

5. Panel recruitment, composition and competence

The quality and legitimacy of advice depend on fair appointment, relevant expertise, diversity and continuing competence.

6. Scheme and panel selection, timing and proportionality

Reviews add most value when the right schemes, people, format and timing are selected for recorded reasons.

7. Preparation, evidence and participation

Balanced briefing, clear roles and accessible participation allow a panel to understand context without compromising independence.

8. Review conduct, advice and reporting

A consistent chaired process and protected reporting route turn multidisciplinary discussion into useful, traceable advice.

9. Transparency, confidentiality, records, data and AI

Public accountability depends on proportionate openness, lawful information handling and reliable records of how advice was produced.

10. Accountability, quality, outcomes and improvement

Feedback, complaints, sample testing and performance review show whether the arrangement works and improves over time.

3. Assessment scale

Score	Maturity	Interpretation
0	Absent or contradicted	Control is absent, not understood, or evidence shows contrary practice.
1	Informal	Intention or informal practice exists, but it is person-dependent or unsupported.
2	Partly established	Documented or evidenced, but incomplete, outdated or inconsistently applied.
3	Established	Current, documented, consistently applied and supported by recent sample evidence.
4	Embedded and improved	Score 3 is met; performance is monitored, reviewed and demonstrably improved.

4. Evidence-capped scoring

A selected score is reduced where the evidence basis is weaker than the claim. This prevents confident statements from outrunning the record.

Evidence position	Maximum effective score
No evidence or not located	1 — Informal
Partial, incomplete or outdated evidence	2 — Partly established
Established evidence but no improvement evidence	3 — Established
Current sampled evidence plus monitoring and demonstrable improvement	4 — Embedded and improved

5. Critical safeguards and overrides

Critical safeguards are tested separately because certain failures cannot sensibly be averaged away.

ID	Level	Safeguard
CF01	Critical	Is there a current, formally approved terms of reference defining the arrangement's purpose, remit, governance and output?
CF02	Major	Are accountability, operational responsibility and decision-making roles clearly assigned across commissioner, provider/panel manager, chair, panellists and relevant decision makers?
CF03	Critical	Can the panel reach and communicate its advice without approval, alteration or suppression by a scheme promoter, fee payer, provider or decision-making body?
CF04	Critical	Is a documented conflict-of-interest process applied before every review, with declarations and mitigation decisions recorded?
CF05	Critical	Does the sampled period contain no known actual, potential or perceived conflict that remained unmanaged while the person participated?
CF06	Major	Is the rationale for the selected chair, panellists, expertise and review format recorded for each sampled review?
CF07	Critical	Is written advice protected from substantive alteration, with any factual-correction process controlled and approved by the chair?
CF08	Major	Does the final advice reach the relevant recipients and decision makers with its advisory status and intended use made clear?
CF09	Critical	Is there a documented and appropriately authorised basis for commissioning, funding and operating the current arrangement, with specialist procurement/legal sign-off where required?
CF10	Major	Are confidentiality, publication, disclosure, records, personal-data and information-security responsibilities assigned and documented?

- Any failed or unknown Critical safeguard produces a red override.
- Two or more Major safeguard failures, or any completed domain below 35%, produces an amber override.
- An override changes the headline status but does not erase the underlying domain and control results.

6. Confidence conditions

The overall maturity band should not be relied upon until completion reaches 90%, evidence coverage reaches 70%, not-applicable answers stay within 10% and all critical checks are complete. A low-confidence result remains useful as a work-in-progress diagnostic, but not as a settled assurance statement.

7. Maturity bands

Effective score	Band	Meaning
80–100%	Embedded and monitored	Controls are established and supported by monitoring and improvement evidence.
60–79%	Established with gaps	The core framework is in place but there are material or inconsistent controls.
40–59%	Material weaknesses	Important elements are partial, informal or weakly evidenced.
0–39%	Priority intervention	Foundational controls are absent, contradicted or insufficiently evidenced.

8. The 60 controls

Domain 1: Mandate, purpose and accountability

ID	Control question	Evidence	Basis
M01	Has the public-interest purpose of the design-review arrangement been formally defined and approved?	E01, E02	DC, GG
M02	Does the documented remit clearly define the geography, scheme types, design stages and services covered?	E01, E04, E05	DC, LDRC
M03	Are the respective responsibilities of the commissioner, provider/panel manager, chair, panellists and relevant decision makers explicitly assigned?	E01, E03, E05	DC, GG
M04	Is the advisory status of panel recommendations and their relationship to statutory or corporate decision making clearly stated?	E01, E04, E05	PPG, DC, LDRC
M05	Are the arrangement's review objectives and appraisal criteria linked to relevant national and local design objectives?	E01, E16, E18	PPG, DC
M06	Are the terms of reference version-controlled, publicly available where appropriate, and reviewed on a defined cycle?	E01, E04	DC, GG

Domain 2: Independence, funding and separation

ID	Control question	Evidence	Basis
I01	Are structural and operational safeguards protecting the panel from influence by scheme promoters, fee payers and decision makers documented?	E01, E03, E05, E07	DC, LDRC
I02	Does the chair retain control of the panel's conclusions and final advice without external approval or veto?	E01, E05, E21	DC, LDRC
I03	Are funding sources, fee flows and relevant financial relationships transparent, with safeguards against real or perceived influence?	E04, E05, E07	DC, LDRC
I04	Do management reporting lines, performance expectations and resources avoid incentives that could compromise impartial professional judgement?	E03, E05, E07	DC, GG
I05	Are independence expectations explained and acknowledged through appointment, induction and client/presenter information?	E11, E13, E15, E18	DC, LDRC
I06	Is independence periodically tested through sample review, feedback, complaints analysis or other structured evaluation, with action tracked?	E24, E25	DC, GG

Domain 3: Conflicts, interests and conduct

ID	Control question	Evidence	Basis
C01	Does the conflicts policy define actual, potential and perceived conflicts, including relevant personal, professional, commercial and financial connections?	E08	DC, PA
C02	Is a standing register of interests maintained, refreshed on a defined cycle and accessible to those selecting panels?	E09	DC, PA
C03	Is sufficient scheme, client and site information supplied early enough to identify conflicts before panellists are confirmed?	E10, E17, E19	DC, LDRC
C04	Are scheme-specific declarations obtained and recorded from the chair, panellists and relevant staff before every review?	E10, E19	DC, LDRC
C05	Are exclusion, substitution, recusal and other mitigation decisions applied consistently and recorded with reasons?	E08, E10, E19	DC, PA

ID	Control question	Evidence	Basis
C06	Do appointment and conduct arrangements cover public-life principles, confidentiality, gifts/hospitality and a route for raising or investigating breaches?	E11, E13, E24	LDRC, GG

Domain 4: Commissioning, contracting and financial controls

ID	Control question	Evidence	Basis
P01	Is the contracting/operating legal entity and accountable contract or service owner unambiguous?	E02, E03, E05	GG
P02	Is the current commissioning, procurement or establishment route supported by a documented decision, appropriate delegated authority and specialist sign-off where required?	E02, E05, E06	PA, GG
P03	Do the contract, specification or partnership documents reflect the stated terms of reference, independence safeguards, conflicts rules, outputs and information responsibilities?	E01, E05, E08, E22, E23	DC, PA, RM
P04	Are client fees, cancellations, payment flows and panellist remuneration governed by clear, consistently applied and appropriately approved rules?	E04, E05, E07	DC, GG
P05	Are conflicts and dependencies arising from supplier, partner or commissioning relationships reviewed throughout the life of the arrangement?	E05, E08, E10, E25	PA, GG
P06	Are performance, change, renewal and exit decisions evidence-based, authorised and recorded rather than allowed to occur automatically?	E05, E06, E25	PA, GG

Domain 5: Panel recruitment, composition and competence

ID	Control question	Evidence	Basis
R01	Is there a current competence framework mapping the range of professional skills, experience, local knowledge and specialist capability the panel needs?	E12, E13	DC, LDRC
R02	Are chairs and panellists recruited through an open, fair and documented process using published or approved selection criteria?	E12, E13	DC, LDRC

ID	Control question	Evidence	Basis
R03	Are representation, diversity and inclusion objectives defined and monitored using proportionate, lawfully governed information?	E14, E23, E25	DC, LDRC
R04	Are appointment terms, tenure, reappointment limits, succession and removal arrangements transparent and consistently applied?	E01, E13	DC, GG
R05	Do chairs, panellists and relevant staff receive recorded induction and continuing development covering process, probity, local context and inclusive practice?	E15	DC, LDRC
R06	Are chair and panellist contribution, conduct and continuing competence reviewed on a defined cycle, with development or succession action taken?	E13, E15, E25	DC, LDRC

Domain 6: Scheme and panel selection, timing and proportionality

ID	Control question	Evidence	Basis
S01	Are scheme-referral criteria documented and based on impact, significance, sensitivity and precedent rather than only project value or ability to pay?	E16	PPG, DC, LDRC
S02	Are decisions to accept, decline or refer schemes—and any exceptions to normal criteria—recorded with reasons?	E16, E19, E25	DC, GG
S03	Does the process encourage review at the earliest useful design stage and consider proportionate repeat review as proposals develop?	E04, E16, E18, E20	PPG, DC, LDRC
S04	Is the review format, duration, panel size and level of preparation proportionate to the scheme and documented?	E17, E19	PPG, DC, LDRC
S05	Is each panel selected against the scheme's particular context, required expertise, local/external perspective and relevant lived experience?	E13, E17, E19	DC, LDRC
S06	For repeat reviews, is appropriate panellist continuity maintained or previous advice clearly provided and addressed?	E17, E19, E20	DC, LDRC

Domain 7: Preparation, evidence and participation

ID	Control question	Evidence	Basis
B01	Does standard client/presenter guidance explain the process, attendees, timings, evidence, outputs, confidentiality and expected next steps?	E18	DC
B02	Is a review-specific scope or set of key questions agreed and shared before the session?	E18, E19	PPG, LDRC
B03	Does the briefing provide balanced and sufficient policy, site, community, design, delivery and other relevant context?	E18, E19	PPG, DC, LDRC
B04	Is a site visit completed where proportionate, or is the reason and an adequate contextual alternative recorded?	E19	PPG, DC, LDRC
B05	Are the roles, access and conduct of clients, applicants, authority officers, councillors, observers and other attendees defined in advance?	E01, E18, E19	DC, LDRC
B06	Are accessibility requirements and relevant community/stakeholder perspectives considered without compromising the panel's independent role?	E14, E18, E19	PPG, DC, LDRC

Domain 8: Review conduct, advice and reporting

ID	Control question	Evidence	Basis
A01	Does the chair use a consistent session structure that protects adequate time for multidisciplinary panel discussion?	E18, E19	DC, LDRC
A02	Is advice reasoned against relevant objectives, evidence and context rather than individual stylistic preference?	E19, E20	PPG, DC
A03	Are relevant perspectives heard while preventing any participant from dominating the discussion or receiving privileged influence?	E18, E19	DC, LDRC
A04	Does the chair summarise the panel's conclusions, priorities and any material disagreement before the session closes?	E19, E20	DC, LDRC
A05	Does the written report clearly distinguish context, evidence, analysis and advice in accessible, proportionate language?	E20	PPG, DC

ID	Control question	Evidence	Basis
A06	Is every report chair-approved, version-controlled, issued to a defined timetable and protected by a factual-correction-only process?	E20, E21	DC, LDRC

Domain 9: Transparency, confidentiality, records, data and AI

ID	Control question	Evidence	Basis
T01	Is appropriate public information available on the panel's remit, membership, governance, funding/fees, conflicts process and way of working?	E01, E04, E07, E08, E13	DC, LDRC
T02	Are confidentiality and publication rules related to the review stage and status, communicated before engagement and applied consistently?	E18, E21, E22	DC, LDRC
T03	Are FOI, EIR and other disclosure responsibilities—including any provider/commissioner responsibilities—allocated, understood and supported by recorded decisions?	E05, E22	DC, RM
T04	Does an approved records schedule cover referrals/bookings, evidence, conflicts, attendance, reports, approvals, complaints, retention and secure disposal?	E19–E25	DC, RM
T05	Are responsibilities and approved methods defined for personal data, sensitive material, access, sharing, storage, security, retention and deletion?	E05, E22, E23	RM, GG
T06	Where AI is used or permitted, do documented rules cover approved tools and purposes, confidential/personal data, human review, accuracy, disclosure and traceability?	E23, E25	AI

Domain 10: Accountability, quality, outcomes and improvement

ID	Control question	Evidence	Basis
Q01	Is there an accessible route for complaints and governance concerns, with ownership, timescales, escalation and protection from conflicted handling?	E04, E24	DC, GG
Q02	Is structured feedback gathered from relevant clients, authorities, presenters, chairs and panellists and reviewed rather than merely collected?	E25	DC, LDRC

ID	Control question	Evidence	Basis
Q03	Do performance measures address timeliness, participation, report quality, user experience, complaints and influence on subsequent work—not only volume or income?	E25	LDRC, GG
Q04	Are samples of completed reviews periodically tested against the terms of reference and documented procedures?	E19–E21, E25	DC, LDRC, GG
Q05	Is proportionate follow-up used to understand responses to advice, recurring issues and lessons for future reviews without compromising the advisory role?	E20, E25	PPG, LDRC
Q06	Is governance and performance reported on a defined cycle to an accountable body, with agreed improvements assigned and tracked to closure?	E02, E03, E25	LDRC, GG

9. Evidence register

ID	Evidence sought
E01	Current terms of reference and document history.
E02	Formal decision or approval establishing the arrangement.
E03	Governance map, role descriptions or RACI.
E04	Public webpage, service guide and published operating information.
E05	Contract, service specification, SLA or partnership agreement.
E06	Procurement/commissioning approval, delegated-authority record or documented route/rationale.
E07	Fee schedule, funding model and financial-control information.
E08	Conflicts-of-interest policy.
E09	Standing register of panel-member interests.
E10	Sample scheme-specific declarations and mitigation records.
E11	Code of conduct, Nolan-principles commitment, gifts/hospitality and breach provisions.
E12	Recruitment pack, advertised criteria and appointment records.
E13	Current panel roster, competence matrix, terms and succession information.
E14	Diversity objectives and appropriately governed monitoring information.
E15	Induction, training, continuing competence and performance-review records.

ID	Evidence sought
E16	Scheme-referral and selection criteria.
E17	Procedure for selecting review format, chair and panellists.
E18	Client/presenter guidance and standard evidence requirements.
E19	Sample agendas, briefings, attendance and site/context records.
E20	A proportionate sample of recent reports, including repeat reviews where available.
E21	Chair approval, factual-correction, issue, publication and version-control records.
E22	Confidentiality, publication, FOI/EIR and disclosure protocol.
E23	Privacy, information-security, retention/disposal and AI-use arrangements.
E24	Complaints, concerns, escalation and whistleblowing routes.
E25	Feedback, KPIs, annual reports, previous audits/reviews and tracked improvement actions.

10. Product application

Product	Evidence basis	Output
Exposure Check	Ten rapid, unverified responses	Indicative exposure status and next-step route
Governance Health Check	Purchaser-led responses with evidence caps and overrides	Live dashboard, prioritised actions and downloadable record
Independent governance review	Defined evidence set validated by a reviewer and evidence meeting	Reasoned findings report, priorities and senior read-out
Enhanced Assurance Review	Broader evidence and stakeholder conversations with peer review	Expanded findings, facilitated action plan and follow-up

11. Independent review method

- Confirm the legal entity, named arrangement, review period, scope and conflicts position.
- Receive and index the agreed core evidence set; do not infer a control from volume alone.
- Test written evidence against recent sampled practice and a structured evidence meeting.
- Apply the 0–4 scale, evidence caps, safeguard overrides and confidence conditions consistently.
- Offer one factual-correction round; keep evaluative judgement under the reviewer's control.
- Issue a proportionate report that distinguishes strengths, material findings, limitations and priorities.

12. Evidence base and professional judgement

The methodology draws on national planning practice guidance on design, Design Review: Principles and Practice, the London Design Review Charter as a transferable benchmark, CIPFA/SOLACE good-governance principles, Procurement Act 2023 conflicts expectations where applicable, public-record and information-management principles, the UK Government AI Playbook and ICO accountability guidance.

These sources do not create a single mandatory governance code for every arrangement. The framework synthesises them into an explicit professional method. The reviewer must identify the evidence relied upon, limitations, conflicts and any judgement applied.

13. Version, use and contact

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