



TO COUNCILLOR:

G A Boulter
J K Ford
C S Gore

S Z Haq
J Kaufman
K J Loydall (Chair)

I K Ridley

I summon you to attend the following meeting for the transaction of the business in the agenda below.

Meeting: Audit Committee
Date & Time: Thursday, 17 July 2025, 6.00 pm
Venue: Civic Suite 2, Brocks Hill Council Offices, Washbrook Lane, Oadby, Leicester, LE2 5JJ
Contact: Democratic Services
t: (0116) 257 2775
e: democratic.services@oadby-wigston.gov.uk

Yours faithfully

Council Offices
Oadby
09 July 2025

Anne E Court
Chief Executive



Meeting ID: 2896

ITEM NO.

AGENDA

PAGE NO'S

Meeting Live Broadcast | Information and Link

This meeting will be broadcast live.

Press & Public Access:

A direct link to the live broadcast of the meeting's proceedings on the Council's Civico platform is below.

<https://civico.net/oadby-wigston/22226-Audit-Committee>

1. Apologies for Absence

To receive apologies for absence from Members to determine the quorum of the meeting in accordance with Rule 7 of Part 4 of the Constitution.

2. Appointment of Substitutes

To appoint substitute Members in accordance with Rule 26 of Part 4 of the Constitution and the Substitution Procedure Rules.

3. Declarations of Interest

Members are reminded that any declaration of interest should be made having regard to the Members' Code of Conduct. In particular, Members must make clear the nature of the interest and whether it is 'pecuniary' or 'non-pecuniary'.

4. Minutes of the Previous Meeting

4 - 6

To read, confirm and approve the minutes of the previous meeting in accordance with Rule 19 of Part 4 of the Constitution.

5. Action List Arising from the Previous Meeting

There was no Action List arising from the previous meeting.

6. Petitions and Deputations

To receive any Petitions and, or, Deputations in accordance with Rule(s) 11 and 12 of Part 4 of the Constitution and the Petitions Procedure Rules respectively.

7. Internal Audit Annual Report and Opinion (2024/25)

7 - 17

Report of the Chief Finance Officer / S151 Officer.

8. Internal Audit Progress Report (July 2025)

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Report of the Chief Finance Officer / S151 Officer.

9. External Audit Plan (2024/25)

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Report of the Chief Finance Officer / S151 Officer.

10. Annual Governance Statement (2024/25)

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Report of the Chief Finance Officer / S151 Officer.

11. Strategic Risk Register Update (Q4 2024/25)

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Report of the Chief Finance Officer / S151 Officer.

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**MINUTES OF THE MEETING OF THE AUDIT COMMITTEE HELD AT CIVIC SUITE 2,
BROCKS HILL COUNCIL OFFICES, WASHBROOK LANE, OADBY, LEICESTER, LE2 5JJ ON
WEDNESDAY, 9 APRIL 2025 COMMENCING AT 6.00 PM**

PRESENT

K J Loydall Chair



Meeting ID: 2754

COUNCILLORS

G A Boulter
C S Gore
S Z Haq
J Kaufman

OFFICERS IN ATTENDANCE

S J Ball	Legal & Democratic Services Manager / Deputy Monitoring Officer
K Robson	Democratic & Electoral Services Officer
C Warren	Chief Finance Officer / Section 151 Officer

OTHERS IN ATTENDANCE

R Anderson	Grant Thornton UK LLP
L Cater	SWAP Internal Audit Services
R Clarke	SWAP Internal Audit Services
R Deo	360 Assurance

34. APOLOGIES FOR ABSENCE

Councillor P Joshi attended the meeting remotely.

35. APPOINTMENT OF SUBSTITUTES

None.

36. DECLARATIONS OF INTEREST

None.

37. MINUTES OF THE PREVIOUS MEETING

By affirmation of the meeting, it was

RESOLVED THAT:

The minutes of the previous meeting held on 22 January 2025 be taken as read, confirmed and approved.

For 4

Against 0
Abstentions 1

38. ACTION LIST ARISING FROM THE PREVIOUS MEETING

There was no Action List arising from the previous meeting.

39. PETITIONS AND DEPUTATIONS

None.

40. INTERNAL AUDIT PLAN 2025/26 AND INTRODUCTION REPORT

The Committee gave consideration to the report and appendix (as set out at pages 6-15 of the agenda reports pack) which introduced SWAP to the Audit Committee and outlined the Audit Plan for 2025/26.

It was moved by the Chair, seconded by Councillor S Z Haq and

UNANIMOUSLY RESOLVED THAT:

The content of the report be noted and the Audit Plan for 2025/26 be agreed.

41. EXTERNAL AUDIT PLAN FOR 2024/25 AUDIT

Cllr J Kaufman joined the meeting at 18.28

The Committee gave consideration to the report and appendix (as set out at pages 16-64 of the agenda reports pack) which presented the External Auditors 2024/25 Audit Plan and Risk Assessment.

By affirmation of the meeting, it was

UNANIMOUSLY RESOLVED THAT:

The content of the report and appendix be noted.

42. ACCOUNTING POLICIES AND MATERIALITY 2024/25

The Committee gave consideration to the report and appendices (as set out at pages 65-87 of the agenda reports pack) which gave details of the draft accounting policies and materiality levels for the 2024/25 Financial Statements.

It was moved by the Chair, seconded by Councillor C S Gore and

UNANIMOUSLY RESOLVED THAT:

The content of the report be noted and the following be approved:

- 1. The Draft Accounting Policies for the 2024/25 Financial Statement as detailed in Appendix 1; and**
- 2. The materiality levels as set out in Appendix 2; and**
- 3. Delegate authority to Section 151 officer to make any necessary**

amendments

43. STRATEGIC RISK REGISTER UPDATE (Q3 2024/25)

The Committee gave consideration to the report and appendix (as set out at pages 88-95 of the agenda reports pack) which presented the Strategic Risk Register to Committee for information.

By affirmation of the meeting, it was

UNANIMOUSLY RESOLVED THAT:

The content of the report and the Strategic Risk Register, as set out in appendix 1, be considered and noted.

44. INTERNAL AUDIT PROGRESS REPORT (APRIL 2025)

The Committee gave consideration to the report and appendix (as set out at pages 96-111 of the agenda reports pack) which gave an update on Internal Audit's progress on delivering the 2024/25 Audit Plan.

By affirmation of the meeting, it was

UNANIMOUSLY RESOLVED THAT:

The progress made in delivering the 2024/25 Audit Plan be noted.

THE MEETING CLOSED AT 7.20 pm

Agenda Item 7



Audit Committee	Thursday, 17 July 2025	Matter for Information
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Report Title: **Internal Audit Report and Opinion 2024/25**

Report Author(s): **Colleen Warren (Chief Finance Officer/S151 Officer)
Tracey Barnard-Ghaut, (Assistant Director 360 Assurance)**

Purpose of Report:	To provide the committee with the Internal Auditors Annual Report and Opinion for 2024/25.
Report Summary:	<p>As part of the Council's corporate governance arrangements, the Annual Internal Audit report is submitted to the Audit Committee. The purpose of the report (at Appendix 1) is to report the key outcomes arising from the work of Internal Audit for 2024/25 and to provide an audit opinion on the adequacy and effectiveness of the Councils arrangements for governance, risk management and internal control.</p> <p>The report states that "significant assurance" can be given to the Council as there is generally a sound framework of governance, risk management and control designed to meet the Councils objectives and controls are being applied consistently.</p>
Recommendation(s):	That the content of the report and appendix 1 be noted.
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	<p>Colleen Warren (Chief Finance Officer/S151 Officer) (0116) 257 2759 colleen.warren@oadby-wigston.gov.uk</p> <p>Tracey Barnard-Ghaut (360 Assurance Assistant Director) 07545 502397 tracey.barnard-ghaut1@nhs.net</p> <p>Ruby Deo (360 Assurance Client Lead) 07545 502399 ruby.deo@nhs.net</p>
Strategic Objectives:	Our Council (SO1)
Vision and Values:	"Our Borough - The Place To Be" (Vision) Resourceful & Resilient (V4)
Report Implications:-	
Legal:	There are no implications directly arising from this report.
Financial:	There are no implications directly arising from this report.
Corporate Risk Management:	Decreasing Financial Resources / Increasing Financial Pressures (CR1) Key Supplier / Partnership Failure (CR2) Reputation Damage (CR4) Regulatory Governance (CR6)

	Increased Fraud (CR10)
Equalities and Equalities Assessment (EA):	There are no implications directly arising from this report. EA not applicable
Human Rights:	There are no implications directly arising from this report.
Health and Safety:	There are no implications directly arising from this report.
Statutory Officers' Comments:-	
Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	As the author, the report is satisfactory.
Monitoring Officer:	The report is satisfactory.
Consultees:	None.
Background Papers:	None.
Appendices:	1. 2024/25 Head of Internal Audit Opinion and Annual Report

1. Background

- 1.1 Under the Local Government Act 1972, section 151 and the Accounts and Audit (England) Regulations 2015 (as amended), the Council has a responsibility to maintain an adequate and effective Internal Audit function. At Oadby & Wigston Borough Council, during 2024/25, this was delivered by 360 Assurance.
- 1.2 In responding to this requirement, the Internal Audit works to best practice and is compliant with the Public Sector Internal Audit Standards (PSIAS).
- 1.3 The 2024/25 Head of Internal Audit Opinion and Annual Report is attached at Appendix 1 and provides an overall summary of the work undertaken for the whole year in relation to the 2024/25 approved Audit Plan.
- 1.4 Internal Audit progress reports are regularly presented to the Audit Committee so Members can be kept up to date with the Internal Audit work and findings.
- 1.5 The Audit Opinion forms part of the Councils Annual Governance Statement. This statement also meets the requirement to report on the review of the effectiveness of Internal Audit and feeds into the Annual Governance Statement.

2024/25 Head of Internal Audit Opinion and Annual Report

Oadby & Wigston Borough Council

25 June 2025

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Key contacts

Contact	Email address
Leanne Hawkes, Director	leanne.hawkes@nhs.net
Tracey Barnard-Ghaut, Assistant Director	tracey.barnard-ghaut1@nhs.net
Ruby Deo, Client Manager	ruby.deo@nhs.net

Reports prepared by 360 Assurance and addressed to Oadby and Wigston Borough Council's directors or officers are prepared for the sole use of Oadby and Wigston Borough Council, and no responsibility is taken by 360 Assurance or the auditors to any director or officer in their individual capacity. No responsibility to any third party is accepted as the report has not been prepared for, and is not intended for, any other purpose and a person who is not a party to the agreement for the provision of Internal Audit between Oadby and Wigston Borough Council and 360 Assurance dated 1 April 2024 shall not have any rights under the Contracts (Rights of Third Parties) Act 1999. The matters reported are only those which have come to our attention during the course of our work and that we believe need to be brought to the attention of Oadby and Wigston Borough Council. They are not a comprehensive record of all matters arising and 360 Assurance is not responsible for reporting all risks or all internal control weaknesses to Oadby and Wigston Borough Council.

The appointment of 360 Assurance does not replace or limit the organisation's own responsibility for putting in place proper arrangements to ensure that its operations are conducted in accordance with the law, guidance, good governance and any applicable standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. This report has been prepared solely for your use in accordance with the terms of the aforementioned agreement (including the limitations of liability set out therein) and must not be quoted in whole or in part without the prior written consent of 360 Assurance.

Head of Internal Audit Opinion

As required by the Public Sector Internal Audit Standards (PSIAS), my opinion provides an objective assessment of the framework of governance, risk management and control. The opinion should contribute towards developing the Annual Governance Statement.

In forming my opinion, I have considered:

- outcomes from internal audit work (including a review of the Strategic Risk Register)
- implementation of internal audit actions
- third party/other assurances.

The work undertaken within the 2024/25 Internal Audit Plan is limited to the scope agreed with executive officers and approved by the Audit Committee, and as detailed within our final reports.

I am providing an opinion of Significant Assurance that there is a generally sound framework of governance, risk management and control designed to meet the organisations objectives, and controls are generally being applied consistently.

The Council has achieved an overall rate of 76% for implementation of actions, however, there are 10 historic actions that are overdue at year end including 1 high risk action. There is room to improve implementation in line with the first follow rate which is 67% for high and medium risk actions.

This opinion should be taken in its entirety for the Annual Governance Statement and any other purpose for which it is repeated.

Head of Internal Audit opinion levels are available to view in full on [our website](#).

Limitations to the opinion

It is management's responsibility to develop and maintain a sound system of governance, risk management and control. This opinion is based on the work undertaken. Where good levels of control are in place, there are still instances where this may fail, for example, poor judgement in decision-making, human error, control processes being deliberately circumvented, management overriding controls and the occurrence of unforeseeable circumstances. As our scope of work is limited, there may be weaknesses in control systems that we are not aware of.

The opinion does not imply that Internal Audit have reviewed all risks and assurances relating to the organisation. The opinion is substantially derived from the conduct of a risk-based plan generated from an organisation-led Risk Register, which is one component that the Council considers in making its Annual Governance Statement.

Summary findings

Outcomes from internal audit work

In line with the PSIAS, your Internal Audit Plan was developed using a risk based process aligning our work with your Strategic Risk Register and strategic objectives. The planning process is designed to ensure that I discharge my statutory responsibility to provide a balanced Head of Internal Audit Opinion at the end of the financial year. The Audit Plan was shared with External Audit colleagues to ensure effective use of resources.

The 2024/25 Plan was discussed and agreed by the Chief Finance & S151 Officer, the Senior Leadership Team and approved at the April 2024 Audit Committee meeting.

During the year, we have liaised with designated lead officers within the organisation to discuss delivery of the Internal Audit Plan and to ensure that the work agreed at the start of the financial year continues to be reflective of changes in your risks and assurance needs.

Progress in relation to the delivery of your Internal Audit Plan has been reported regularly to the Audit Committee.

In forming my opinion, I have considered the outcomes of key assignments. Whilst we recognise that the Council engages internal audit to assist in areas of concern, the following completed reviews have provided a moderate assurance opinion:

- Licensing (2023/24)
- Business continuity
- Section 106 agreements

At the time of writing no high risk issues have been formally reported as a result of our 2024/25 work.

There was one high risk action due for implementation before 1st April 2024 that remains outstanding relating to the grounds maintenance service and developing and implementing a range of key performance indicators that will enable the service to be effectively monitored.

The assurance levels provided for all reviews undertaken is summarised below:

Substantial Assurance	<ul style="list-style-type: none"> • None
Significant Assurance	<ul style="list-style-type: none"> • Revenues – Council Tax / Business Rates (2023-24) • Benefits / Council Tax support (2023-24) • Housing Allocations (2023-24) • Strategic Risk Management • Financial Ledger Management & Reporting • Treasury Management • Payroll and Expenses • Housing Rents • Housing Repairs Procurement • Homelessness • Waste Management Project Assurance • Food Safety • Human Resources – staff lone working • IT audit – Governance healthcheck
Moderate Assurance	<ul style="list-style-type: none"> • Licensing (2023-24) • Business Continuity • Section 106 Agreements
Limited Assurance	<ul style="list-style-type: none"> • None
Weak Assurance	<ul style="list-style-type: none"> • None
Other	<ul style="list-style-type: none"> • Grant certifications

Implementation of internal audit actions

As part of PSIAS, I am required to consider the appropriateness of the organisation’s response to internal audit recommendations and action subsequently agreed.

As part of an established process, we use our online action tracking system to provide a summary of open and closed actions as part of our progress reports to the Audit Committee. We also provide a list of outstanding actions to the S151 Officer and Heads of Service (risk owners) on a monthly basis.

Since 1 April 2024, we have tracked 29 actions that fell due for completion in year to 31 March 2025.

As at 4th April 2025, the organisation have a first follow up rate for high and medium risk actions of 67% (actions implemented by original due date) and an overall action implementation rate of 69%. There are no high risk actions relating to 2024/25 overdue at the year end.

There are 10 historic actions (1 high risk, 6 medium risk and 3 low risk) that are overdue at year end.

We expect at least 75% of high and medium risk actions to be completed on time and historic actions to be completed on time. This is an area where the Council could improve.

The table below shows the closing position of internal audit actions which fell due during 2024/25:

Implementation of internal audit actions	
High risks closed on time	Not applicable (0/0)
Historic actions (pre 1 April 2024) outstanding	10
First follow up rate – high and medium risks	67% (12/18)
First follow up rate – all risks	69% (20/29)
Overall implementation rate	76% (22/29)

Third party/other assurance

In arriving at my annual Head of Internal Audit Opinion, no relevant third party assurances have been brought to my attention.

Our performance

Conformance with the Standards

We are required to comply with the mandatory Public Sector Internal Audit Standards (PSIAS).

Fully conforms

PSIAS require internal audit provides to have an independent external quality assessment at least every five years. Our most recent assessment of undertaken by CIPFA in November 2022 confirmed that 360 Assurance fully conforms to Standards.

We have processes in place to ensure that we take an independent and objective approach. We have an annual programme of quality assurance to ensure compliance with PSIAS and this is reported to our Management Team and Management Board. There were no areas of non-compliance identified in year.

Key Performance Indicators (KPIs)

[Appendix A](#) sets out our performance against the agreed KPIs. These are reported regularly to Audit Committee; key highlights include:

71%

of your internal audit plan delivered by qualified staff¹ (against a target of 60%)

100%

highly satisfied or satisfied responses from 1 OWBC client satisfaction questionnaire (CSQ)

Responses to CSQs received across all clients in 2024/25 are shown in the graph below.



¹ Relevant qualification includes for example: CCAB including passed finalists, CIA/CMIIA, and professional qualification such as registered nurse and relevant masters.

In addition, an annual client satisfaction survey of key Executive and Non-Executive leads across all clients is carried out to ensure that our service is meeting expectations. We undertook this survey in December 2024.

I would like to pass on my thanks, and those of my team, to the organisation for their continued support in helping us to deliver our work in what has been another challenging year for the public sector.

A handwritten signature in black ink, appearing to read 'Leanne Hawkes', written in a cursive style.

Leanne Hawkes
Director



As part of our contract with the you, we agreed a number of Key Performance Indicators (KPIs)*. These are routinely reported to the Audit Committee throughout the year as final reports are issued. In 2024/25 we agreed 14 Terms of Reference and issued 14 final reports. The performance against the agreed KPIs is shown in the table below.

360 Assurance KPIs	Target	Performance	Comments
Terms of Reference issued before commencement of the audit.	100%	100%	Of the 14 Terms of Reference agreed in the year, all were issued before the commencement of the audit.
Draft report issued within 10 working days of exit meeting.	100%	100%	All draft reports were issued within 10 working days of the exit meeting.
Final report issued within 5 working days of executive sign-off.	100%	100%	All final reports were issued within 5 working days of executive sign-off.
Client KPIs			
Terms of Reference to be agreed within 10 working days of being received.	100%	79%	Of the 14 Terms of Reference agreed in the year, 3 were agreed later than 10 working days after receipt.
Information has been provided and staff have been available to meet the timescales set out within the Terms of Reference.	100%	86%	Information was received late for 2 assignments.
Management response received within 10 working days of receiving the final draft report.	100%	93%	Management responses were received later for 1 final draft report issued.

* KPIs agreed in the Service Level Agreement but not included in the table above are covered within the Annual Report.

Agenda Item 8



Audit Committee	Thursday, 17 July 2025	Matter for Information
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Report Title: **Internal Audit Progress Report (July 2025)**

Report Author(s): **Colleen Warren (Chief Finance Officer/S151 Officer)**
Lucy Cater (Assistant Director, SWAP)

Purpose of Report:	To present a summary of the audit work concluded since the last meeting of this Committee.
Report Summary:	To provide an update on the progress of the Internal Audit Plan, along with Final Reports and Updated Agreed Actions
Recommendation(s):	That the Audit Committee discusses and notes the content of the report
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	Colleen Warren (Chief Finance Officer/S151 Officer) (0116) 257 2759 colleen.warren@oadby-wigston.gov.uk Lucy Cater (Assistant Director SWAP) 020 8142 5030 lucy.cater@swapaudit.co.uk
Strategic Objectives:	Our Council (SO1)
Vision and Values:	"Our Borough - The Place To Be" (Vision) Resourceful & Resilient (V4)
Report Implications:-	
Legal:	There are no implications arising from this report.
Financial:	There are no implications directly arising from this report.
Corporate Risk Management:	Decreasing Financial Resources / Increasing Financial Pressures (CR1) Key Supplier / Partnership Failure (CR2) Reputation Damage (CR4) Effective Utilisation of Assets / Buildings (CR5) Regulatory Governance (CR6) Organisational / Transformational Change (CR8) Increased Fraud (CR10) Cyber Threat / Security (CR11) Other corporate risk(s)
Equalities and Equalities Assessment (EA):	There are no implications arising from this report.
Human Rights:	There are no implications arising from this report.
Health and Safety:	There are no implications arising from this report.

Statutory Officers' Comments:-	
Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	The report is satisfactory.
Monitoring Officer:	The report is satisfactory.
Consultees:	None.
Background Papers:	<p>The following documents have been identified by the author of the report in accordance with section 100D.5(a) of the Local Government Act 1972 and are listed in accordance with section 100 D.1(a) for inspection by members of the public:</p> <ul style="list-style-type: none"> • Internal Audit Progress Reports <p>These documents will be available for inspection online at www.oadby-wigston.gov.uk or by contacting democratic services democratic.services@oadby-wigston.gov.uk for a period of up to 4 years from the date of the meeting.</p>
Appendices:	<ol style="list-style-type: none"> 1. Internal Audit Progress Report (2025/26) 2. Open Agreed Actions (July 2025)

1. Executive Summary

- 1.1 The Council must ensure that it has sound systems of internal control that facilitate the effective management of all the Council's functions. The work delivered by SWAP Internal Audit Services (SWAP), the Council's internal audit service, is one of the control assurance sources available to the Audit, Compliance and Governance Committee, the Executive Leadership Team and Service Leadership Team and supports the work of the external auditor.
- 1.2 The Annual Internal Audit Opinion presented to the Audit Committee provides an overall assurance opinion at the end of the financial year. This Internal Audit Progress Report, however, is designed to give the Audit Committee the opportunity to comment on the work completed by the partnership and provide 'through the year' comment and assurances on the control environment.

2. Background

- 2.1 The Internal Audit Service is provided to this Council by SWAP Internal Audit Services (SWAP). SWAP is a local authority-controlled company.
- 2.2 The report attached at **Appendix 1** sets out the work undertaken by SWAP for the Council since the last meeting of this Committee. It follows the risk-based auditing principles and, therefore, this is an opportunity for the Committee to be aware of emerging issues which have resulted in SWAP involvement.
- 2.3 Officers from SWAP will be in attendance at the Committee meeting and will be available to address Members' questions.

3. Main Points

- 3.1 The progress report enables the Audit Committee to monitor the work of the Internal Audit Service and ensure that it remains effective. It also provides the Committee with assurance opinions over areas reviewed within the reporting period, details of audit recommendations and the outcome of follow-up reviews conducted on previous audit recommendations.
- 3.2 We have finalised 1 audit since the last meeting of this committee
 - Transparency Agenda – High Limited
- 3.3 We will follow up all agreed actions. A report (**Appendix 2**) showing all open agreed actions and those that have been actioned has been included for Members information.



SWAP
INTERNAL AUDIT SERVICES
Helping Organisations to Succeed

Oadby and Wigston Borough Council

Report of Internal Audit Activity

July 2025

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The contacts at SWAP in connection with this report are:

Lucy Cater

Assistant Director

Tel: 01285 623340

lucy.cater@swapaudit.co.uk

Jaina Mistry

Principal Auditor

Tel: 01285 623337

jaina.mistry@swapaudit.co.uk

- Contents:

Internal Audit Definitions

Audit Plan Progress

Finalised Audit Assignments

Internal Audit Definitions

At the conclusion of audit assignment work each review is awarded a “Control Assurance Definition”;

- **No**
- **Limited**
- **Reasonable**
- **Substantial**

•

Audit Framework Definitions

Control Assurance Definitions

No	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.
Limited	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
Reasonable	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Substantial	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

Non-Opinion – In addition to our opinion based work we will provide consultancy services. The “advice” offered by Internal Audit in its consultancy role may include risk analysis and evaluation, developing potential solutions to problems and providing controls assurance. Consultancy services from Internal Audit offer management the added benefit of being delivered by people with a good understanding of the overall risk, control and governance concerns and priorities of the organisation.

Internal Audit Definitions

Recommendations are prioritised from 1 to 3 on how important they are to the service/area audited. These are not necessarily how important they are to the organisation at a corporate level.

Each audit covers key risks. For each audit a risk assessment is undertaken whereby with management risks for the review are assessed at the Corporate inherent level (the risk of exposure with no controls in place) and then once the audit is complete the Auditors assessment of the risk exposure at Corporate level after the control environment has been tested. All assessments are made against the risk appetite agreed by the SWAP Management Board.



Audit Framework Definitions

Categorisation of Recommendations

When making recommendations to Management it is important that they know how important the recommendation is to their service. There should be a clear distinction between how we evaluate the risks identified for the service but scored at a corporate level and the priority assigned to the recommendation. No timeframes have been applied to each Priority as implementation will depend on several factors; however, the definitions imply the importance.

	Categorisation of Recommendations
Priority 1	Findings that are fundamental to the integrity of the service’s business processes and require the immediate attention of management.
Priority 2	Important findings that need to be resolved by management
Priority 3	Finding that requires attention.

Definitions of Risk

Risk	Reporting Implications
High	Issues that we consider need to be brought to the attention of both senior management and the Audit Committee.
Medium	Issues which should be addressed by management in their areas of responsibility.
Low	Issues of a minor nature or best practice where some improvement can be made.

Audit Plan Progress

Audit Type	Audit Area	Status	Opinion	No of Rec	Priority			Comments
					1	2	3	
Governance	Transparency Agenda	Final Report	High Limited	7		7		Report Included
Operational	Section 106	In Progress						
Governance	Data Breaches	Ready to Start						
Operational	Data Protection (to include Data Retention Procedures)	Ready to Start						
Operational	Pooling Housing Capital Receipts							
Follow-Up	Follow-Up of Agreed Actions (not included in an audit above)	On Going						
Other Audit Involvement	Management of the IA Function and Client Support	On Going						
Other Audit Involvement	Contingency – Provision for New Work based on emerging risks							

Summary of Audit Findings

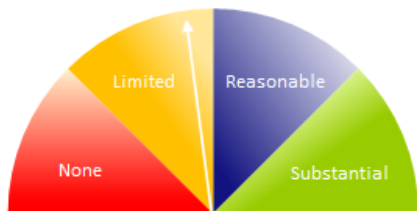
The following are the Internal Audit reports, of each audit review finalised,
since the last Committee update

Transparency Agenda – Final Report – June 2025

Audit Objective

Review to ensure that all data is published in accordance with the Transparency Code 2015.

Executive Summary



Assurance Opinion

The review identified significant gaps, weaknesses, or instances of non-compliance. The system of governance, risk management, and control requires improvement to effectively manage risks to the achievement of objectives in the area audited.

Management Actions

Priority 1	0
Priority 2	7
Priority 3	0
Total	7

Organisational Risk Assessment

Medium

Our audit work includes areas that we consider have a medium organisational risk and potential impact.

NB: The findings below are a reflection of the audit at the time of fieldwork: April – May 2025

At the time of issuing the draft report there were 7 Priority 2 actions. 4 actions have been implemented prior to issuing this final report, resulting in an improved assurance opinion offered. Officers have provided feedback to the findings and action plan and are addressing the remaining 3 actions.

Key Conclusions



Through review of records held on the public-facing website 6 of the 14 areas were non-compliant with the Local Authority Transparency Code 2015. These are:

- Procurement Information and contracts, (Completed)
- Organisational chart, senior salaries and the pay multiple, (Completed)
- Social housing asset values, (Completed)
- Parking accounts records and parking spaces information. (Completed)



Through review of records held on the public-facing website, the following records (3 of the 14 areas) are not published and are non-compliant with the Local Authority Transparency Code 2015:

- Grants to voluntary, community and social enterprise organisations,
- Fraud data,
- Local land assets.



3 of the 14 areas that are published and compliant with the Local Authority Transparency Code 2015 are:

- Spend data exceeding £500 – published on a quarterly basis,
- Procurement Card expenditure – published on a quarterly basis,
- Constitution – last reviewed in August 2024.

Audit Scope

The audit included a desktop review of compliance with the Local Government Transparency Code 2015.

The 4 themes which fit into the Code are as follows:

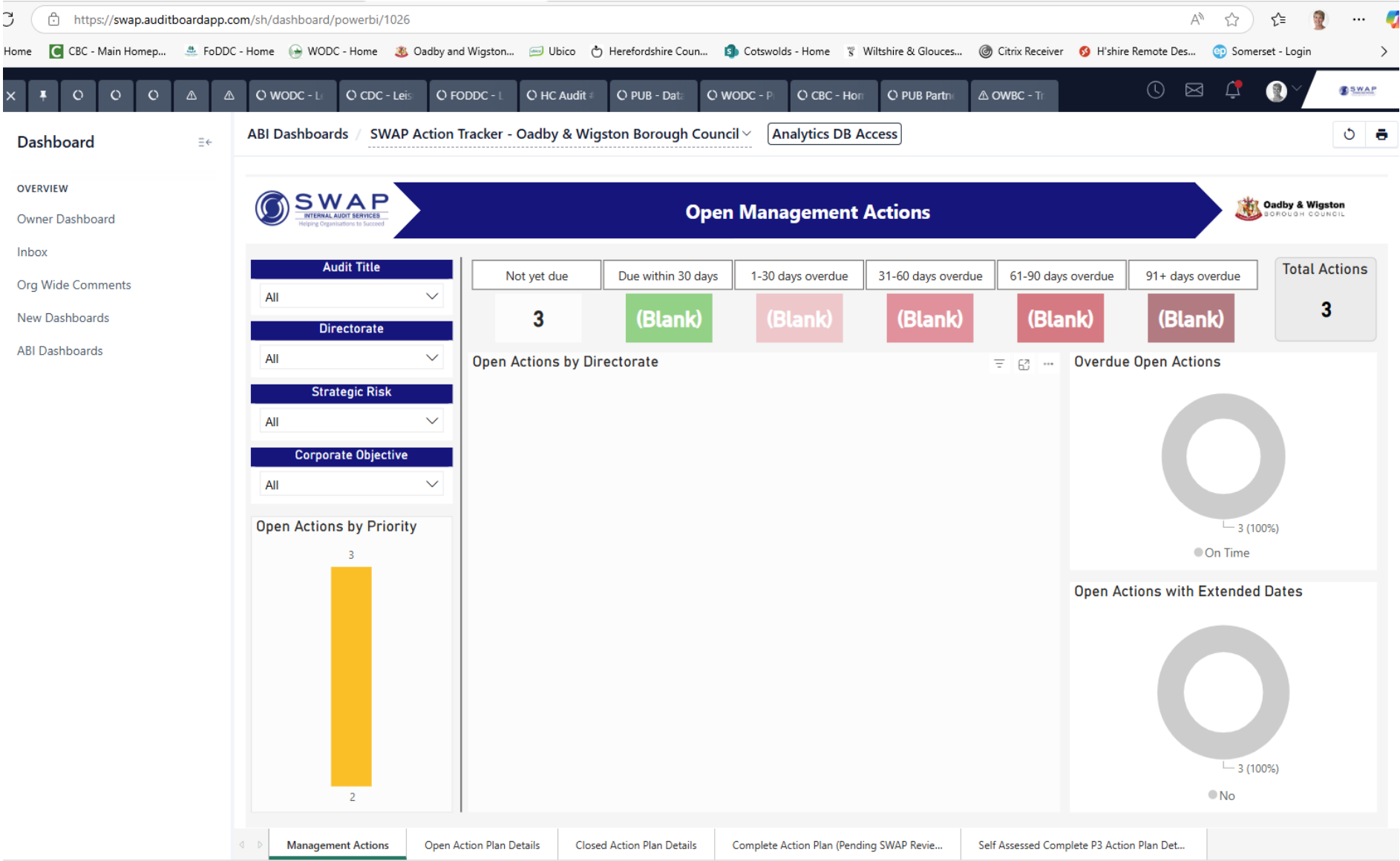
- Publishing Data.
- Publishing spending and procurement information.
- Publishing organisation information.
- Publishing land and social housing assets and parking information.

Other Relevant Information

The Code mandates publishing data covering 14 areas that are relevant to the Council. Publishing waste contract data is not applicable as the Council has an in-house service. Trade union facility is also not applicable as the Council do not have any advisors.

The Code states, *“Transparency is the foundation of local accountability and the key that gives people the tools and information they need to enable them to play a bigger role in society. The availability of data can also open new markets for local business, the voluntary and community sectors and social enterprises to run services or manage public assets. Fraud can thrive where decisions are not open to scrutiny and details of spending, contracts and service provision are hidden from view. Greater transparency, and the provisions in the Code, can help combat fraud.”* Hence, why it is important that information is published accordingly.

OPEN AGREED ACTIONS – AS AT 24TH JUNE 2025



[illegible]

Agenda Item 9



Audit Committee	Thursday, 17 July 2025	Matter for Information
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Report Title: **External Audit Plan (2024/25)**

Report Author(s): **Richard J Anderson (Director Grant Thornton LLP)**
Colleen Warren (Chief Finance Officer/S151 Officer)

Purpose of Report:	To present the External Audit Progress Plan for 2024/25
Report Summary:	The report and appendix include the External Audit progress report and a sector update as at June 2025.
Recommendation(s):	That the content of the report and appendix be noted.
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	Colleen Warren (Chief Finance officer/S151 Officer) (0116) 257 2759 colleen.warren@oadby-wigston.gov.uk
Strategic Objectives:	Our Council (SO1) Our Economy (SO3) Our Partners (SO5)
Vision and Values:	"Our Borough - The Place To Be" (Vision) Resourceful & Resilient (V4)
Report Implications:-	
Legal:	There are no implications arising from this report.
Financial:	There are no implications arising from this report.
Corporate Risk Management:	Decreasing Financial Resources / Increasing Financial Pressures (CR1) Key Supplier / Partnership Failure (CR2) Reputation Damage (CR4) Regulatory Governance (CR6) Increased Fraud (CR10) Cyber Threat / Security (CR11)
Equalities and Equalities Assessment (EA):	There are no implications directly arising from this report. EA not applicable
Human Rights:	There are no implications directly arising from this report.
Health and Safety:	There are no implications directly arising from this report.
Statutory Officers' Comments:-	
Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	As the author, the report is satisfactory.
Monitoring Officer:	The report is satisfactory.

Consultees:	None
Background Papers:	None.
Appendices:	1. External Audit Progress Report and Sector Updates (June 2025)

1. 2024/25 Audit Progress Update

- 1.1 The attached appendix highlights the current progress with the External Audit. The Audit began in February of 2025 with Audit Planning work and advanced testing, with the Statement of Accounts and working papers being delivered to Grant Thornton on the 20th June 2025 to enable them to commence the remaining audit work.
- 1.1.1 The second part of the report provides members with an update on current changes within the Audit Sector.

Oadby and Wigston Borough Council

Audit progress report and sector updates

June 2025

Agenda

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4	Audit deliverables	7
5	Sector updates	8
6	Audit Committee resources	22

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Audit Progress Report

Introduction

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This paper provides the Audit Committee with a report on progress in delivering our responsibilities as your external auditors.

The paper also includes a series of sector updates in respect of emerging issues which the Committee may wish to consider.

Members of the Audit Committee can find further useful material on our website, where we have a section dedicated to our work in the public sector. Here you can download copies of our publications:

<https://www.grantthornton.co.uk/industries/public-sector/local-government/>

If you would like further information on any items in this briefing or would like to register with Grant Thornton to receive regular email updates on issues that are of interest to you, please contact either your Engagement Lead or Engagement Manager.

Progress to June 2025

Financial Statements Audit

Our Audit Plan was presented to the April 2025 Audit Committee. As planned, our work on the audit commenced earlier in the year with allocations in February and April. During this time, we completed the majority of our audit planning work and made progress on advanced testing with the support of the finance team at the council.

We received draft accounts with supporting working papers from management on 20 June 2025. We will complete our initial reviews prior to commencing audit work in August 2025 and will continue to work closely with the finance team through this period.

Value for Money

As part of our planning work, we aimed to identify any risks of significant weakness in the Council's arrangements for securing economy, efficiency and effectiveness in its use of resources that we need to perform further procedures on.

In the Audit Plan presented to Audit Committee in April 2025 we reported one risk of significant weakness relating to financial sustainability.

We will continue to monitor and update our risk assessment and responses until we issue our Auditor's Annual Report.

We will also follow up on any recommendations made as part of prior year reporting.

Events

We provide a range of workshops and network events. On 4 June 2025 we held a webinar providing updates on local government re-organisation and devolution; and lessons from our 2023/24 value for money audits. A recording of the event is available here:

[Webinar: local government devolution and reorganisation - YouTube](#)

Audit Fees

PSAA have published their scale fees for 2024/25 [2024/25 audit fee scale – PSAA](#)

For Oadby and Wigston Borough Council these fees are £145,193 for the Council audit. These fees are derived from the procurement exercise carried out by PSAA in 2022. They reflect both the increased work auditors must now undertake as well as the scarcity of audit firms willing to do this work.

Local Audit Reform

On 9 April 2025, the government published [Local audit reform: Government response to the consultation to overhaul local audit in England - GOV.UK](#)

Recognising that a backlog in local audit sign off of nearly 1,000 audits had impacted on local accountability and transparency, the purpose of the consultation was to rebuild a system of local audit, ensuring that audited accounts are published on time and that trust and confidence in how councils are spending their money is restored. Grant Thornton welcomes the reforms which we believe are much needed.

The key outcome of the consultation is the decision to proceed with the establishment of a new Local Audit Office (LAO) with effect from 1 April 2026. Further details are set out below.

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Local Audit Office – Core Principles

Value for Money: providing confidence for stakeholders that proper arrangements are in place

Transparency of the sector’s financial health and VfM arrangements

Capacity and capability: A sustainable and resilient audit market with access to the right expertise

External scrutiny which challenges and drives improvement

Professionalism: building a sector attractive to auditors

Proportionality: local audit that is proportionate and relevant, from regulations to governance

Stronger accountability: high standards of financial reporting to promote public accountability

Timely: High quality accounts which are produced on a timely basis.

Impacts for local authorities

- A mandatory requirement for at least one independent Audit Committee member at each authority
- Mandatory reporting of the Auditor’s Annual Report to full Council
- The introduction of a Local Public Accounts Committee, following the central government model
- The strengthening of Internal Audit capacity.

Audit Deliverables

Below are some of the audit deliverables planned for 2024/25

2024/25 Deliverables	Planned Date*	Status
Audit Plan We are required to issue a detailed audit plan to the Audit Committee setting out our proposed approach in order to give an opinion on the Council’s 2024/25 financial statements.	April 2024	Complete
Audit Findings Report The Audit Findings Report will be reported to the Audit Committee.	November 2025	Not yet due
Auditors Report This includes the opinion on your financial statements.	November 2025	Not yet due
Auditor’s Annual Report This report communicates the key outputs of the audit, including our commentary on the Council's value for money arrangements.	November 2025	Not yet due

Sector Updates

Reorganisation update

March 2025:

Twenty-one two tier areas were invited by the Minister of State for Local Government and English Devolution to submit interim plans for reorganisation by 21 March 2025. Councils were asked to **“make every effort to work together to develop and jointly submit one proposal”** for each area. Finding the consensus necessary to achieve this has been a challenge though.

The Local Government Chronicle reports that the Minister received in reply at least 40 separate local government reorganisation (LGR) interim plan submissions; outlining across the replies at least 53 separate LGR options. From the replies, none of the 21 areas had agreed a final geography for new unitary councils.



Expected next steps:

26 September 2025 - Deadline for areas in the Devolution Priority Programme to submit final proposals for reorganisation.

28 November 2025 - Deadline for all other areas to submit final proposals for reorganisation.



Recommended reading:

For these challenging times, three sets of material **and our forthcoming webinar** from Grant Thornton may be useful:

September 2024 - [Learning from the new unitary councils](#)

March 2025 - [Navigating the future: The dual challenge of local Government reorganisation and devolution | Grant Thornton](#)

March 2025 - [Dual delivery - How can areas successfully reorganise local government and implement devolution at the same time?](#)

Making decisions

With so much changing in local government, and across the UK economy, making good decisions has perhaps never been more important. Two recent major publications on decision-making for mayoral combined authorities and public sector mega-projects both include content that may be useful for strategic and complex decision-making at other levels of government.

Strategic decision-making:

The Institute for Government published advice in March 2025 on [“How the government can support better decision making in mayoral combined authorities”](#).

To enhance capacity and accountability for strategic decisions, councils need to:

- Provide good technical and administrative resource to ensure that the plans members are voting on are well designed.
- Consider utilising digital tools for community engagement.
- Embed participatory processes, including peer research projects, to inform and support policy making.



Complex decision-making:

The National Audit Office published a report in March 2025 on: [Lessons learned: Governance and decision-making on mega-projects](#)

To improve decision-making for the most complex projects, Councils need to:

- Adopt governance arrangements that reflect the main risks to delivery and to achieving value for money.
- Map out the decision pathway, setting out which decisions will need to be made when, and by whom.
- Ensure those charged with governance over complex projects have the skills, qualification and experience needed to make decisions on the projects.



Homelessness

In May 2025, a new report by the Institute for Government highlighted how local authority spending on homelessness has nearly trebled in real terms over the last 14 years, and yet the number of homeless people has continued to rise, now reaching record proportions:

Local authority spending on homelessness in real terms (2024/25 prices):

- 2010/11: £1.3 billion.
- 2024/25: £3.1 billion.

Local authority median spend on homelessness as a % of all median spend:

- 2010/11: 18%.
- 2023/24: 54%.

Changes in the level of homelessness:

- 2010/11 to 2024/25: More than doubled.
- September 2024: 126,040 households living in temporary accommodation.



The Institute for Government (IFG) highlights that we need to focus not just on how much is spent, but also on what we spend it on. Local authorities often end up spending most of their budget, plus homelessness prevention grants and rough sleeper grants, on acute responses to homelessness. These are often exorbitantly expensive and come at the cost of underlying prevention work. IFG suggests also that individual local authorities work at too small a scale to tackle the extent of the homelessness problem – and that stronger place-based approaches are needed.

A recent report by the [Local Government Chronicle](#) looks at a similar issue through a different lens, suggesting that stronger investment in counter fraud would help slash some of the escalating spend on temporary accommodation.

Although they come at the issue of spend on homelessness from different angles, both reports indicate that challenging **how** the budget is spent, **and on what**, is more important than simply asking what the budget is.



Housing targets and housing enquiry

Figures from the [Office for Budget Responsibility](#) on 26th March 2025 indicate that changes to the planning system mean that housebuilding is at a 40-year high and that 1.3 million new homes will be built across the UK by the end of this decade.

Provisional figures from [Homes England](#) on 20th May 2025 suggest that the agency exceeded its overall targets for new housing starts and completions in 2024/25, for the second year running.

Nevertheless, the government continues to look at even more new ways of opening-up housebuilding and development activity. The UK parliament is now calling for evidence from anyone who can contribute to an enquiry around the effectiveness of the current system for developer contributions.

In 2022/23, some 44% of affordable housing was provided through Section 106 agreements. Parliament wants to consider whether:

- The current system is understandable and accessible to stakeholders;
- Local Planning Authorities are receiving the correct support from MHCLG to ensure they can efficiently and effectively collect and spend developer contributions;
- The Ministry of Housing, Communities and Local Government's (MHCLG's) oversight of the system is effective; and
- MHCLG can learn and apply lessons to the process.

A [National Audit Office](#) report on the Section 106 system is due out in the summer. In the meantime, the deadline for providing evidence to the enquiry is 16th June 2025.

If you want to contribute to the enquiry, please give your evidence here:

[Call for Evidence - Committees - UK Parliament](#)



National Audit Office

The remediation of dangerous cladding

[The Committee of Public Accounts](#) (PAC) reported in March 2025 that progress in establishing the number of buildings affected by dangerous cladding, and in remediating those with dangerous cladding, has been far too slow.

PAC described hearing how local authorities' enforcement work is facing issues of funding; skills; lack of clarity over the money available; and lack of clarity over the regulatory environment. PAC noted that local authorities are trying to train Environmental Health Officers to undertake enforcement activity as quickly as possible, but are at risk of losing them as soon as they qualify to other parts of the construction sector. PAC also stated that the government accepts that where local authorities are spending on cladding enforcement activity, they can't spend the same money on new social housing.

[MHCLG](#) did commit to providing more funding for remediation action, and an update on their plan to do so is due in the summer of 2025. Money alone is unlikely to be enough to speed things up though. As MHCLG itself recognised, there are not enough trained enforcement officers available to speed up identification; and, even if there were, there is insufficient skilled construction capacity to speed up remediation.

Eight years on from the Grenfell fire, the national issue of what to do about cladding still seems to be shrouded in uncertainty.

"We are appalled that those living in affected buildings continue to suffer an unacceptable financial and emotional toll. Far too many people continue to feel trapped in unsafe homes, many facing financial uncertainty and many unable to sell their homes and move on with their lives".

Source: [PAC, 21 March 2025](#)



Complaints data from the Local Government and Social Care Ombudsman



Annual 2024/25 complaints statistics have just been published for each Council by LGSCO: [Your council's performance](#).

This is an earlier publication date for the statistics than in other years – because the Ombudsman is responding to requests that the timetable be made to fit better with Council complaint reporting cycles. LGSCO has also responded to Council requests by including absolute numbers in the data, so that the emphasis is shifted away from percentages (in upheld, satisfactory remedies and compliance) and better context is given.

A very clear traffic light rating system has been adopted – and both Councils and residents will be able to see immediately how well their area fares.

Complaints data is an important tool for judging where energy needs to be directed for risk and performance management. Context and proportion are important as well though for judging overall performance; and earlier data is generally more useful than later data. The improvements made this year to timing and presentation will help Councils and their members make the most of the valuable resource that LGSCO provides.

Climate change - new role for the Energy Ombudsman

The Energy Ombudsman took on a new role on 1 April 2025, as the official dispute resolution body for Great Britain's heat network customers.

The [Association for Decentralised Energy \(ADE\)](#) estimates that heat networks, are projected to unlock £100 billion in UK infrastructure investment by 2050, while at the same time cutting carbon emissions. The sector is poised to play a central role in the UK's net-zero transition.

ADE estimates that most consumers are happy with the experience they have of using heat networks. Nevertheless, having an official ombudsman role boosts the credibility of the industry.

As major providers in the field, Councils do need to be aware of the new dispute resolution arrangements. The Ombudsman invited providers to register with them in the run up to 1 April. Anyone who has not done so yet, should register now so that they can keep abreast with the changes ongoing.

Register here: [Join our Heat Network Supplier scheme | Energy Supplier Portal](#)



Climate change – new report on generating hope

Great British Energy recently announced £10 million of funding for a local government partnership to build clean energy power.

We know that each mayoral strategic authority in England will be invited to apply for a share of the funding, but there is little other detail available yet.

Localis have shared thoughts on how Great British Energy and the metro mayors can build clean power in every part of the country, starting with four simple steps:

- Provide robust data and measurement mechanisms for monitoring and evaluation.
- Target quantifiable benefits to local communities.
- Develop financial instruments such as Community Municipal Investments and Green Bonds to help support local communities.
- Embed Green Public Procurement in their procurement of energy services and utilities.

For a full copy of the Localis Report, see:

“Generating Hope: Local Power in Partnership”

Webinar for Audit Committee members

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We held a webinar for members of Audit Committees on 4th June 2025.

Delivered by Grant Thornton specialists and drawing on experience from across the sector, the webinar covered: How to prepare for devolution and reorganisation; and shared experiences from other reorganisations - with a focus on:

- Learning from the recent formation of eight new unitary councils between 2019 and 2023
- Progress by the eight new unitary councils in 2023/24
- How to successfully reorganise local government at the same time as implementing devolution
- Project management lessons learned for reorganisation
- Performance measurement lessons learned for reorganisation
- Governance lessons learned for reorganisation
- Other relevant findings from Auditors Annual Reports for 2023/24.

The recording of our webinar can be accessed here: [Audit committee webinar](#).

Audit Committee resources

The Audit Committee and organisational effectiveness in local authorities (CIPFA):

<https://www.cipfa.org/services/support-for-audit-committees/local-authority-audit-committees>

LGA Regional Audit Forums for Audit Committee Chairs

These are convened at least three times a year and are supported by the LGA. The forums provide an opportunity to share good practice, discuss common issues and offer training on key topics. Forums are organised by a lead authority in each region. Please email ami.beeton@local.gov.uk LGA Senior Adviser, for more information.

Global Internal Audit Standards

[Global Internal Audit Standards](#)

Code of Audit Practice for local auditors (NAO):

<https://www.nao.org.uk/code-audit-practice/>

Governance risk and resilience framework: material for those with a leadership responsibility on good governance (CfGS):

<https://www.cfgs.org.uk/material-for-those-with-a-leadership-responsibility-on-good-governance/>

The Three Lines of Defence Model (IAA)

<https://www.theiia.org/globalassets/documents/resources/the-iias-three-lines-model-an-update-of-the-three-lines-of-defense-july-2020/three-lines-model-updated-english.pdf>

Risk Management Guidance / The Orange Book (UK Government):

<https://www.gov.uk/government/publications/orange-book>

CIPFA Guidance and Codes

The following all have a charge, so do make enquiries to determine if copies are available within your organisation.

Audit Committees: Practical Guidance For Local Authorities And Police

<https://www.cipfa.org/policy-and-guidance/publications/a/audit-committees-practical-guidance-for-local-authorities-and-police-2022-edition>

Delivering Good Governance in Local Government

<https://www.cipfa.org/policy-and-guidance/publications/d/delivering-good-governance-in-local-government-framework-2016-edition>

Financial Management Code

<https://www.cipfa.org/fmcode>

Implementing Global Internal Audit Standards

[Global Internal Audit Standards in the UK Public Sector](#)

Prudential Code

<https://www.cipfa.org/policy-and-guidance/publications/t/the-prudential-code-for-capital-finance-in-local-authorities-2021-edition>

Treasury Management Code

<https://www.cipfa.org/policy-and-guidance/publications/t/treasury-management-in-the-public-services-code-of-practice-and-crosssectoral-guidance-notes-2021-edition>



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Audit Committee	Thursday, 17 July 2025	Matter for Information and Decision
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Report Title: **Annual Governance Statement (2024/25)**

Report Author(s): **Colleen Warren (Chief Finance Officer/S151 Officer)**

Purpose of Report:	To approve the draft Annual Governance Statement for 2024/25.
Report Summary:	<p>Each year the Council is required to conduct a review of the effectiveness of its internal controls and approve an Annual Governance Statement (AGS).</p> <p>The Council's review is provided within the AGS and is appended to this report. It concludes that the Council is satisfied that appropriate Governance arrangements are in place, however, it remains committed to maintaining and improving these arrangements.</p> <p>The Internal Audit report has given an opinion of Significant Assurance in the Councils Governance arrangements.</p>
Recommendation(s):	That the Members approve the Councils Annual Governance Statement for 2024/25.
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	<p>Colleen Warren (Chief Finance Officer/S151 Officer) (0116) 257 2759 colleen.warren@oadby-wigston.gov.uk</p>
Strategic Objectives:	Our Council (SO1)
Vision and Values:	<p>"Our Borough - The Place To Be" (Vision) Proud of Everything We Do (V2) Resourceful & Resilient (V4)</p>
Report Implications:-	
Legal:	There are no implications arising from this report.
Financial:	There are no implications directly arising from this report.
Corporate Risk Management:	<p>Regulatory Governance (CR6) Other corporate risk(s) Failing to publish an AGS would breach accounts and audit regulations.</p>
Equalities and Equalities Assessment (EA):	There are no implications directly arising from this report. EA not applicable
Human Rights:	There are no implications directly arising from this report.
Health and Safety:	There are no implications directly arising from this report.
Statutory Officers' Comments:-	

Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	As the author, the report is satisfactory.
Monitoring Officer:	The report is satisfactory.
Consultees:	Senior Leadership Team
Background Papers:	None.
Appendices:	1. Annual Governance Statement (2024/25)

1. Background and Scope of Responsibility

- 1.1 The Council is responsible for ensuring its business is conducted in accordance with the law and proper standards and that public money is safeguarded, properly accounted for and used economically, effectively and efficiently. The Council also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement on the way in which its functions are exercised.
- 1.2 In discharging this overall responsibility, the Council must make proper arrangements for proper governance of its affairs and for facilitating the effective exercise of its functions including the management of risk.
- 1.3 The Council has previously approved and adopted a Code of Corporate Governance which is consistent with the principles of CIPFA/SOLACE framework 'Delivering Good Governance in Local Government'. This statement shows how the Council has complied with the code and also meets The Accounts and Regulations 2015, regulation 6(1)(b), which requires each English local authority to conduct a review, at least once a year, of the effectiveness of its systems of internal control and approve the Annual Governance Statement (AGS).

2 Purpose of the Report

- 2.1 The AGS is included at Appendix 1. Section 3 of the AGS includes details on the Councils Governance framework and a fundamental review of the effectiveness of the governance framework including the system of internal control is provided in Section 4.
- 2.2 The AGS links with the Internal Audit opinion for the year and sets out areas that require attention following the detailed assessment.
- 2.3 The Council goes further than carrying out a review of its internal control system and has adopted the Chartered Institute of Public Finance & Accountancy (CIPFA) and the Society of Local Authority Chief Executives (SOLACE) joint annual guidance on corporate governance, which encourages Local Authorities in going beyond consideration of the internal control environment to look at wider arrangements for supporting sound corporate governance.
- 2.4 This further assessment is detailed within the Assurance Review of the AGS which is used to support the overall opinion and conclusion.
- 2.5 The overall conclusion is that the Council is satisfied that appropriate governance arrangements are in place, however it remains committed to maintaining and improving these arrangements.
- 2.6 A draft version of the AGS has been published alongside the Statement of Accounts for 2024/25 in line with Audit requirements on the Councils website. A final version will be published

upon approval.

Annual Governance Statement (2024/25)

Oadby & Wigston Borough Council Annual Governance Statement (2024/25)

Background and Scope of Responsibility

Oadby & Wigston Council (the Council) is responsible for ensuring that its business is conducted in accordance with legislation, regulation, government guidance and that proper standards of stewardship, conduct, probity, and professional competence are set and adhered to by all those representing, working for, and working with the Council. The Council also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

In discharging this overall responsibility, the Council must make proper arrangements for the governance of its affairs and for facilitating the effective exercise of its functions including the management of risk.

The Council has previously approved and adopted a Code of Corporate Governance which is consistent with the principles of the CIPFA/SOLACE framework 'Delivering Good Governance in Local Government'. This statement shows how the Council has complied with the code and also meets the requirements of The Accounts and Audit Regulations 2015, regulation 6(1)(b), which requires each English local authority to conduct a review, at least once a year, of the effectiveness of its systems of internal control and approve an annual governance statement (AGS).

The Purpose of the Governance Framework

The governance framework comprises the systems, processes, culture and values by which the Council is directed and controlled. It reflects activities through which the Council meets the needs of the community. It includes arrangements to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate services and value for money.

The system of internal control is a significant part of that framework and is designed to manage risk at a reasonable level. It cannot eliminate all risks of failure to achieve policies, aims and objectives and therefore can only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an on-going process designed to identify and prioritise the risks to the achievement of the Council's policies, aims and objectives. Evaluation of the likelihood and potential impact of those risks being realised and how to manage them efficiently, effectively, and economically are key parts of the Council's Medium Term Financial Strategy and its Corporate Plan.

This AGS confirms that the governance framework has been in place for the financial year ended 31 March 2025 and up to the date of the approval of the Annual Report and the Statement of Accounts.

The AGS is a summary of how the Council's management arrangements are set up to meet the principles of good governance and how we as a Council assure ourselves that these are effective and appropriate. The main goal of an AGS is to provide the reader with confidence

that the Council has an effective system of internal control to manage risks to reasonable levels.

The CIPFA Delivering Good Governance publication (2016) defines the various principles of good governance in the public sector and how they relate to each other and are defined as:

- Behaving with integrity, demonstrating strong commitment to ethical values and respecting the rule of law.
- Ensuring openness and comprehensive stakeholder engagement.
- Defining outcomes in terms of sustainable economic, social and environmental benefits.
- Determining the interventions necessary to optimise the achievement of the intended outcomes.
- Developing the Council's capacity, including its leadership and the individuals within it.
- Managing risks and performance through robust internal control and strong public financial management.
- Implementing good practices in transparency, reporting and audit, to deliver effective accountability.

The governance framework at Oadby and Wigston Borough Council comprises the systems and processes, culture and values which the Council has adopted in order to deliver on the above principles.

The Governance Framework

Current Governance Structure

Oadby & Wigston Borough Council has retained a committee system. The majority of UK local authorities now operate using a cabinet system where a group of members have been given the power to make the majority of decisions on behalf of their Council.

The benefits of retaining the committee system are that all members are able to sit on a range of decision-making committees and every member has a vote that counts. This is the cornerstone of the Council's governance – members are not marginalised in decision making. All decisions are debated and made during open committee in full public view. Closed sessions, for instance where commercially sensitive matters need to be discussed, are kept to an absolute minimum. Only the most urgent decisions are delegated to the Chair/Vice Chair of committees, and these must be reported back to the main committee as soon as possible. In addition to the statutory committees that deal with development control and licensing, the Council has three main committees:

- The Policy, Finance and Development Committee, which has overall responsibility for setting the long term aims of the Council and moving it forward in line with these objectives.
- The Service Delivery Committee, which has direct responsibility for the day-to-day operation of all services.
- The Audit Committee, which is responsible for Internal and External Audit and Risk Management.

Vision and Priorities

In January 2022 the Local Government Association (LGA) conducted a Peer Review. Two of the key recommendations were for a new vision and corporate plan to be created by

Members. The vision was signed off in September 2022 and our new Corporate Strategy was approved in July 2024.

The Council's Vision, which can be viewed on our website:

https://www.oadby-wigston.gov.uk/pages/our_vision has five Strategic Objectives:

1. Our council:

- To be the local voice of residents and businesses.
- To ensure that we provide high quality, value for money services that meet the needs of residents, businesses and visitors.
- To ensure high connectivity with residents and businesses

2. Our communities:

- To provide a clean and safe place for everyone.
- To support any activities or actions that enhance the health and wellbeing of our Borough.
- To provide good, affordable and efficient housing for everyone.

3. Our economy:

- To support economic growth that is focused on our town centres.
- To make our Borough an inviting place to visit.
- To help to provide good employment opportunities.

4. Our environment:

- To ensure that we are a carbon conscious Borough.
- To be seen to be 'Green'.

5. Our partners:

- To develop, maintain and enhance partnerships to help support delivery of our objectives.
- To ensure we are engaged and listening to all sections of the community.

Corporate Plan & Corporate Strategy

The Council's current Corporate Plan was approved in July 2024, covering the period 2024-2027.

Service plan targets and key performance indicators are set for each department within the annual service delivery and development plans. Progress against targets is monitored monthly by the management team and reported regularly to relevant committees.

The Council ensures that its key priorities determine the allocation of resources to deliver its agreed activities. A robust corporate business planning programme is used to identify projects against agreed criteria, including the Council's policies, its priorities, the outcome of public consultations, demonstration of continuous improvements, and responding to legislative change.

Achievement of the Council's priorities has been monitored throughout the financial year 2024/25 by the Council's Senior Leadership Team (SLT) and reports to the relevant committees. The monitoring of delivery against agreed priorities ensures the Council's capacity to deliver projects within agreed costs, time and resources.

Financial Management

The Council's financial position is reported against budget to every meeting of the Policy, Finance and Development Committee. Detailed budget information is provided to budget holders each month and dedicated project teams provide financial information for large projects or capital schemes.

The financial elements of the Council's corporate business planning process are included in the Medium-Term Financial Strategy, which has a detailed one-year budget and high levels for the forthcoming years given the complete lack of clarity from central government regarding future funding for local authorities. The Council has a good track record of financial management and internal control, but resources are necessarily limited, and ongoing savings targets will be required to balance the Medium Term Financial Plan.

The Council continues to ensure that the accounts are compliant with the Local Authority Accounting Code of Practice. Performance against budget is reported at committee meetings and managed by SLT and through the corporate business planning process. The Council ensures that the levels of reserves it holds are generally sustainable over the medium term. The MTFS takes account of the current economic climate and changes to funding for local government.

The Council has a Treasury Management Strategy that is reviewed each year and monitored on a regular basis. This ensures the Council has sound processes and controls over its treasury function to minimise risk exposure.

Decision Making, Scrutiny and Governance

The Council, the Policy, Finance and Development Committee and the Service Delivery Committee take decisions on service and management matters in line with terms of reference set out in the Constitution. The committees meet four times each municipal year. Financial performance is monitored and scrutinised by the Policy, Finance and Development Committee on a quarterly basis the Service Delivery Committee reviews non-financial performance. Scrutiny and challenge is managed within these core committees and further challenge is provided by elected members through officers pre meeting with Committee Chairmen, Resident Forums and Member Workshops.

The Council has a separate Audit Committee which receives reports from the Internal Audit service and can require managers to attend to answer questions as required. Reports from the External Auditor are also received at these meetings.

The Audit Committee provides an independent and high-level focus on the audit, assurance and reporting arrangements that underpin good governance and financial standards. The Committee also meets quarterly and oversees internal audit and external audit arrangements, the annual accounts and ensures adequate internal controls are in place".

Elected members are responsible for ensuring that effective policy making, scrutiny and monitoring activities occur.

A clear committee structure assists such responsibilities to be effectively carried out. Member expertise and involvement is further enhanced by on-going training and development opportunities.

Internal Audit Arrangements

The Council's internal audit function for 2024/25 was delivered by an external provider, 360 Assurance Ltd. The annual risk-based audit plan contributes to the review of the Council's key internal control systems, risk management processes and corporate governance

arrangements. 360 Assurance supports the design and effectiveness of the governance framework. Each internal audit review is given an assurance level. The definition of each of these assurance levels is provided in the table below.

Definition of Assurance Levels

- Full - No significant risk issues identified.
- Significant - Exposure to levels of risk that may only impair the effectiveness of the system or process under review.
- Moderate - Exposure to levels of risk that render some elements of the system's control environment undeliverable.
- Limited - Exposure to unacceptable level of risk that could have a serious impact upon the system or process under review.
- None - Exposure to unacceptable levels of risk that could have a serious impact upon the organisation as a whole.

Regular meetings are held between 360 Assurance and the Section 151 Officer, and the Client Manager attends the Council's Corporate Management Team meetings. This ensures the high standard of internal audit support is maintained. The annual audit plan is reviewed on a frequent basis to identify any amendments needed to reflect changing priorities, emerging risks or resourcing challenges. Regular reports are taken on a quarterly basis to the Audit Committee on the progress of internal audits and an annual report is also provided each year.

For 2024/25 out of a total of 17 audits, 14 returned significant assurance and 3 moderate assurance.

For 2025/26 our internal audit provider has been changed to SWAP (South West Audit Partnership).

External Audit Arrangements

The Audit Committee receives regular reports from the Council's External Auditors Grant Thornton LLP and Internal Audit (360 Assurance). The Section 151 Officer has direct access to this committee as well as to the External Auditors. Likewise, Audit Committee members have direct access to the External Auditor.

Financial Management Arrangements

Underpinning the Council's financial management arrangements is a regularity framework comprising Financial Regulations, Contract Procedure Rules, annual audits of key financial systems and audits of other systems undertaken on a risk-based basis. Other processes and procedures such as the Procurement Strategy and Risk Management Strategy are monitored on a regular basis.

Role of Statutory Officers

There are governance arrangements in place to ensure that members and officers work together to achieve a common purpose with clearly defined functions and roles. The Council's Constitution includes a scheme of delegation and terms of reference for each committee. Responsibilities are set out to make clear how the Council and its committees operate within the organisation. The scheme of delegation also defines the powers granted to the Chief Executive (the Head of Paid Service) and other chief officers within the areas of their service responsibility.

The Constitution reflects all relevant legislation impacting on decision making in local government and is published on the Council's website.

The Council has a statutory responsibility to have a Head of Paid Service, a Section 151 Officer and a Monitoring Officer. The Council's financial arrangements fully conform to the governance requirements of the CIPFA Statement on the Role of the Chief Financial Officer in Local Government. The Section 151 Officer is a key member of the Senior Leadership Team. The Section 151 Officer is responsible for the proper administration of the Council's financial arrangements and leads a fully resourced and suitably qualified finance function. The Section 151 Officer was actively involved in and able to bring influence to bear on all material business decisions to ensure immediate and long-term implications, opportunities and risks, were fully considered and in alignment with the Medium-Term Financial Strategy.

The Monitoring Officer role is fulfilled by the Council's Legal and Democratic Services Manager, who acts as guardian of the Council's Constitution to ensure lawfulness, probity and fairness in Council decision making. The Monitoring Officer has processes for the review of legislative changes which feed into the annual review of the Constitution.

Consultation meetings and other forms of communication between the Monitoring Officer and senior managers as appropriate ensures that managers can contribute to revisions to the Constitution including the scheme of delegation.

The annual review includes the Constitution's terms of reference.

The Senior Leadership Team

Officer decision making at a strategic level is led by the Senior Leadership Team. For the majority of 2024/25 this comprised of the Chief Executive, a Strategic Director, a Chief Finance Officer/S151 Officer, the Monitoring Officer, the Head of Built Environment and the Head of Customer Service and Transformation. The Team meets formally on a weekly basis and standing items of business include finance, policy, governance, human resources, performance management and the delivery of the Council's priorities.

Standards of Conduct

Officers of the Council are expected to maintain high standards of conduct. The Council has a staff code of conduct that is published on the intranet along with other policies and procedures.

There is an agreed protocol between members and officers to ensure that a constructive working relationship exists, and this Annual Governance Statement also promotes and demonstrates the values of good governance through upholding high standards of conduct and behaviour. In addition, Policy, Finance and Development committee fulfils the functions of the Standards Committee and operates to ensure that councillors and any co-opted members of the Council behave in a way that exemplifies high standards of conduct and effective governance and has regard to the member code of conduct.

Regular records of advice and code issues are kept by the Monitoring Officer.

Declaring interests under the code of conduct is a standard item on the agenda at every committee meeting and Council and declarations are minuted by a member of the Democratic and Electoral Services Officer. A legal advisor attends all Council and committee meetings to advise on the application of the code and other issues where this is requested or otherwise considered appropriate. A planning code of conduct is in place and is adhered to by members who sit on the Development Control Committee.

Members and officers comply with the Council's gift and hospitality policy.

The Council's website explains how complaints can be made against elected members by either downloading a complaint form or making a complaint on-line. The web page also has links to the code of conduct and the Constitution.

A register of the Council's contracts is published on the Council's website. In addition, details of the Council's spend on individual items over £250 is published on a quarterly basis.

Compliance

The Council's policies and procedures are drawn up and regularly reviewed to ensure compliance with current legislation and regulations. Legal Services assist with updating and amending policies and advise on legal implications including legislative impacts on recommendations included in committee reports. Equalities implications are also considered as part of committee reports.

Whistle Blowing

Concerns regarding non-compliance with policies, procedures, laws and regulations can be raised through the Council's anti-fraud and confidential reporting policies. Concerns raised are always investigated and acted upon following clearly defined guidelines.

The Whistle Blowing Policy is published on the Council's intranet and internet to raise awareness and outline procedures in place to staff, contractors and the public. It features in the induction of new staff.

The Monitoring Officer, after consultation with the Chief Executive and Section 151 Officer, has statutory powers to report to Council in relation to any function, proposal, decision or omission that s/he considers would give rise to unlawfulness or any decision or omission that might give rise to maladministration. Such a report would have the effect of stopping the proposal or decision being implemented until the report has been considered.

Officer and Member Development

The Council's staff appraisal process assesses performance and delivery of Council objectives and also identifies any skills gaps that need addressing. Each officer has an agreed annual personal development plan. Progress against these plans is reviewed regularly through one-to-one discussions with line managers. The process ensures that the Council continually keeps under review the levels of skills required to carry out functions with due regard to law, policy and regulation.

As part of the Council's business planning process each service plan includes learning and development needs linked to specific actions.

This ensures that the skill sets required for delivering the key priorities and actions for the Council are identified and provided.

Training programmes and other development opportunities are circulated and shared more broadly using the Council's internal communication mechanisms. The Council also supports the training and development of members.

Consultation

Engaging with local people and other stakeholders to ensure robust public accountability is a key element of the governance framework. The Council takes every opportunity to consult with relevant stakeholders before taking any decisions likely to impact on the level and quality

of services. In addition, the Council's business planning process includes an annual timetable of formal consultation events ensuring statutory, voluntary and business partners have the opportunity to comment on budget proposals under consideration.

The Council has given delegated authority on budget provision to three Resident Forums who can make recommendations to the Policy, Finance & Development Committee on how funds could be allocated to various projects within their geographic area. The Forums' membership is open to people who live in the three areas and this approach has been found to be a very good source of two-way communication and consultation around the Council's policy initiatives.

Reviewing the Effectiveness of the Governance Framework

The Council has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control.

The review of effectiveness is informed by the work of senior managers within the Council who have responsibility for the development and maintenance of the governance environment. The annual report from the Council's Internal Audit service is a key document in assessing the effectiveness of the Council's governance arrangements. Comments from External Auditors Grant Thornton LLP and other agencies and inspectorates such as the Local Government Association are also important.

The Senior Leadership Team, chaired by the Chief Executive, reviews the Council's governance framework and control environment and is responsible for the preparation of the Annual Governance Statement. Appropriate managers are responsible for producing their own service assurance statements and developing an improvement plan to rectify any identified governance weaknesses within their service areas. The Audit Committee reviews the Annual Governance Statement and evaluates the strength of the underlying assurance statements and evidence.

External Audit

The Council's external auditors are Grant Thornton. **Each year the external auditors review the Council's arrangements for:**

- Preparing accounts and compliance with statutory and other relevant requirements.
- Ensuring the proper conduct of financial affairs and monitoring their adequacy and effectiveness in practice.
- Managing performance to secure economy, efficiency and effectiveness in the use of resources.

In April 2025 Grant Thornton issued their Audit Findings Report, covering the audit of the Council's 2023/24 financial statements. Four improvement recommendations were identified within the report and were identified as being agreed and addressed.

The report also identified a follow-up of 7 recommendations from previous audits. Out of these 7 recommendations the Council is confident to have completed 6 of them, and this was formally reported to the Council's Audit Committee 09 April 2025.

Internal Audit

The Council's Head of Internal Audit is required to provide an annual opinion, based upon and limited to the work performed, on the overall adequacy and effectiveness of the organisation's risk management, control and governance processes (i.e. the Council's system of internal

control). This is achieved through a risk-based plan of work, agreed with management and approved by the Audit Committee, which should provide a reasonable level of assurance.

The Head of Internal Audit's role reflects best practice which is compliant with Public Sector Internal Audit Standards (PSIAS).

For 2024/25, the Head of Internal Audit view was that, based on an objective assessment of the framework of governance, risk management and control, an opinion of Significant Assurance was provided.

The Head of Internal Audit Opinion and Annual Report will be presented report to the Audit Committee during July 2025.

The Head of Internal Audit stated that there was a generally sound framework of governance, risk management and control designed to meet the organisation's objectives and controls are generally being applied consistently.

Basis of the Auditors opinion formed

- An initial assessment of the design and operation of the underpinning risk management framework and supporting processes.
- An assessment of the range of individual opinions arising from risk-based audit assignment contained within internal audit risk-based plans that have been reported throughout the year. This assessment has taken account of the relative materiality of these areas and management's progress in respect of addressing control weaknesses.
- Any reliance that is being placed upon third party assurances.

Risk Management

During 2024/25 the Council's Strategic Risk Register was monitored by the Risk Management Group – a small, cross-organisational group of officers, managers and Heads of Service who monitor risk on behalf of the Senior Leadership Team. SLT review and sign off risk updates which are then presented to the Audit Committee on a quarterly basis.

The register identified major risks and commented on their likelihood and impact on the Council's objectives. Each risk is allocated a responsible senior officer for identifying an action plan and provides an update.

Risk management is embedded in processes such as project management, appraisal of new capital investment and service development plans as well as all formal Council reports.

The Role of the Chief Financial Officer (CFO)

The CFO (also referred to as the S151 Officer) conforms to the governance requirements and core responsibilities of two CIPFA Statements on the Role of the Chief Financial Officer; in Local Government (2016) and in the Local Government Pension Scheme (2014). The CFO is a key member of the Senior Leadership Team and is able to bring influence to bear on all material business decisions, ensuring that immediate and long-term implications, opportunities, and risks, are fully considered and in alignment with the MTFS and other corporate strategies.

The CFO is aware of, and committed to, the five key principles that underpin the role of the CFO and has completed an assurance statement that provides evidence against core activities which strengthen governance and financial management across the Council.

The Role of the Monitoring Officer (MO)

The Monitoring Officer has responsibility for ensuring that decisions taken comply with all necessary statutory requirements and are lawful. Where in the opinion of the Monitoring Officer any decision or proposal is likely to be unlawful and lead to maladministration, he/she shall advise the Council.

The MO is also bound to ensure that decisions taken are in accordance with the Council's budget and its Policy Framework and provides advice on the scope of powers and authority to take decisions.

In discharging this role, the Monitoring Officer is supported by officers within the Legal and Democratic Services Teams.

The Monitoring Officer received public complaints during 2024/25.

Level 1 complaints	101
Early resolution	21
Level 2 complaints	19

Local Government Ombudsman

The Local Government Ombudsman were involved in four complaints during 2024/25. One was not investigated and the Council is awaiting the outcome from the other three investigations.

Housing Ombudsman

The Housing Ombudsman Service investigates complaints about social housing landlords when residents have already gone through the landlord's internal complaints process and haven't achieved a satisfactory resolution. In 2024-25 the Housing Ombudsman completed 3 investigations into the Council's Housing Services which resulted in 6 findings with 4 maladministration findings, a total number of 8 orders being made including payments of compensation and 3 recommendations such as further staff training, which the Council accepted.

Constitutional Matters

The key roles and responsibilities of Council committees, of elected members, the Chief Executive, Monitoring Officer and Chief Finance Officer / Section 151 Officer are set out in the Council's Constitution scheme of delegation.

These three officers are responsible for ensuring that the Council acts within the law and in accordance with established policies and procedures. No report can be presented to Council or a committee for approval without first being reviewed by these officers or their delegated representative(s). These officers are also responsible for ensuring that legislation and policy relating to health and safety are implemented in practice.

The Council's Constitution sets out how it operates, how decisions are made and the procedures which are followed to make sure these are efficient, transparent and accountable to the people the Council serves. It's the key guide and 'rulebook' for how the Council; its staff and elected Members fulfil their roles and responsibilities. The Constitution is updated periodically, and the latest version is dated August 2024.

Code of Conduct

The standards of behaviour expected from members and officers are set out in the Member/Officer Codes of Conduct. The Council adopted the LGA Model Code of Conduct with local amendments, in December 2021. A register of members' interests is maintained, and the records of interest are declared at Council and committee meetings. All members are required to complete Related Party Declarations at the end of the financial year in support of the statutory financial statements.

Members' allowances are examined on an annual basis and a review of the allowance scheme was last undertaken in 2024 by an independent remuneration panel.

The Monitoring Officer received two member complaints in 2024/25 which were resolved informally without the need to conduct an investigation.

Effectiveness

Review of Effectiveness

The Council has responsibility for conducting at least annually, a review of its governance framework including the system of internal control.

The review is informed by the Internal Audit Annual Report, the work of the Audit Committee, the comments of external auditors and other review agencies and inspectorates, and the work of the Senior Leadership Team who have responsibility for the development and maintenance of the internal control environment.

The review considers evidence identified to support where the Council meets the CIPFA/SOLACE guidance and sets out this in the Assurance Review and Evidence document. Governance areas are given an assessment scoring as follows:

- Good – Good governance exists and there are no improvements required.
- Fair – Satisfactory governance exists but improvements are required to meet good governance.
- Poor – Significant issues with governance exist which needs addressing.

Areas identified as fair or poor are reported within the annual governance statement and remedial actions are also outlined.

2024/25 Review of Effectiveness and Areas of improvement identified during 2024/25

No significant governance issues have been identified in the annual assurance review for 2024/25.

Full details of the review can be found in the Assurance Review Statement for 2024/25 which is published alongside this Annual Governance Statement and can be found later in this document.

Overall opinion and conclusion

Conclusion

The Council is satisfied that appropriate governance arrangements are in place however it remains committed to maintaining and where possible improving these arrangements, by proactively addressing those issues identified in undertaking the annual review.

The Council will continue to seek to enhance and strengthen governance arrangements within these areas for improvement and monitor progress made as part of our next annual review.

Statement of Leader and Chief Executive


We have been advised on the implications of the result of the review of the effectiveness of the governance framework carried out by members of the Senior Leadership Team and that the arrangements continue to be regarded as fit for purpose in accordance with the governance framework.

Signed

A handwritten signature in black ink, appearing to read 'Samia Haq', with a large, stylized initial 'S'.

Councillor Samia Haq
Leader of the Council
30/06/2025

Signed

A handwritten signature in black ink, appearing to read 'Anne Court', with a large, stylized initial 'A'.

Anne Court
Chief Executive
30/06/2025

Annual Governance Statement

Assurance Review

May 2025

Assurance and evidence in support of the Council's Governance Statement

Assessment Score:

GOOD – Good governance exists and there are no improvements required.

FAIR – Satisfactory governance but improvements are required to meet 'Good Governance'.

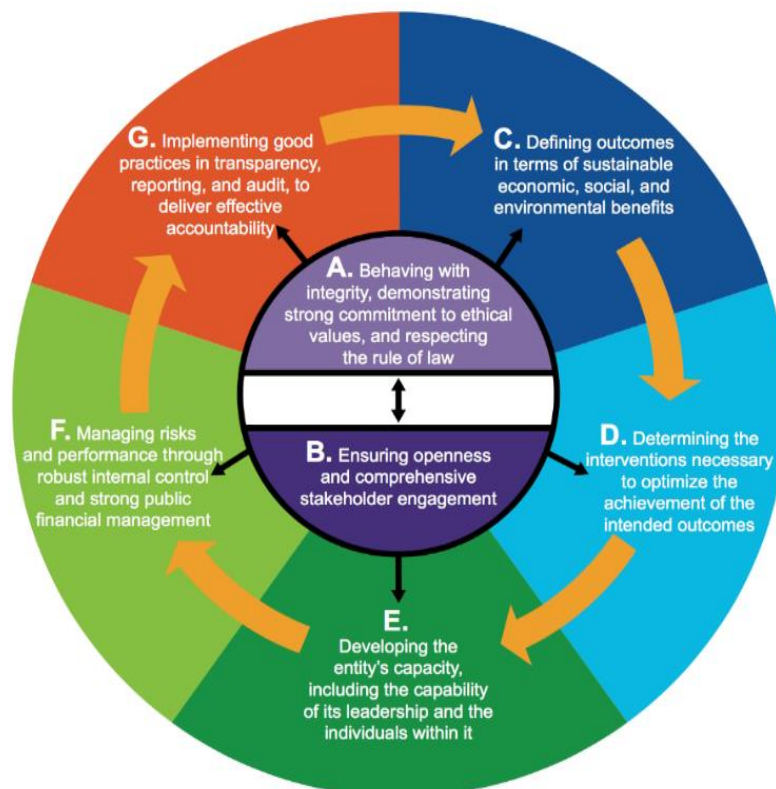
POOR – Significant issues with governance exist which need addressing.

THE COUNCIL'S GOVERNANCE FRAMEWORK

The Council's governance framework is consistent with the seven principles of the CIPFA / SOLACE Framework, which are:

- A. Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law.
- B. Ensuring openness and comprehensive stakeholder engagement.
- C. Defining outcomes in terms of sustainable economic, social, and environmental benefits.
- D. Determining the interventions necessary to optimise the achievement of the intended outcomes.
- E. Developing the Authority's capacity, including the capability of its leadership and the individuals within it.
- F. Managing risks and performance through robust internal control and strong public financial management.
- G. Implementing good practices in transparency, reporting, and audit to deliver effective accountability.

At the core of the framework are the principles of behaving with integrity and ensuring openness.



Core Principle A: Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

Supporting Principle 1: Behaving with Integrity

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring members and officers behave with integrity and lead a culture where acting in the public interest is visibly and consistently demonstrated thereby protecting the reputation of the organisation.	Good.	Constitution (incl. statutory officers, scheme of delegation, financial and procurement procedure rules) Council, Committee Chairs, Committees. OFLOG Self-Assessment Service policies, Complaints procedure Head of Paid Service, Monitoring Officer and S151 Officer HR policies and procedures Fraud policy in place. Induction training for new members and staff. Codes of conduct Ethics report taken to PFDC quarterly. SLT & CMT External & Internal Audit reports.	None.		
2. Ensuring members take the lead in establishing specific standard operating principles or values for the organisation and its staff and that they are communicated and understood. These should build on the Seven Principles of Public Life (the Nolan Principles)	Good.	Corporate Plan Council's values OFLOG Self-Assessment Corporate Strategy 2025/26 Budget Organisational Strategy	None.		
3. Leading by example and using these standard operating principles or values as a framework for decision making and other actions	Good.	Council leadership (Leader of the Council Deputy Leader, Committee Chairs and Vice Chairs, Mayor and Deputy Mayor) Declarations of interest noted. Up-to-date register of gifts and hospitality.	None.		

4. Demonstrating, communicating, and embedding the standard operating principles or values through appropriate policies and processes which are reviewed on a regular basis to ensure that they are operating effectively	Good.	Anti-fraud and corruption policy in place. Register of interests and annual declaration of related parties. The whistle blowing policy and complaints policy are well established and regularly reviewed. The Members and Officers Codes of Conduct refers to a requirement to declare interests. Minutes show declarations of interest were sought, and appropriate declarations made.	None.		
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Supporting Principle 2: Demonstrating strong commitment to ethical values

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Seeking to establish, monitor and maintain the organisation's ethical standards and performance	Good.	Values developed with staff and embedded into induction process for officers and members and appraisals for staff. Standards and Ethics report taken to PFDC quarterly.	None.		
2. Underpinning personal behaviour with ethical values and ensuring they permeate all aspects of the organisation's culture and operation.	Good.	Values embedded into induction process for officers and members and appraisals for staff. Values were developed with staff and are embedded across the Council	None.		
3. Developing and maintaining robust policies and procedures which place emphasis on agreed ethical values	Good.	Appraisal process built upon values of the Council and has been revisited during the year. Equality and Diversity Policy in place. EIAs are part of our standard approach and taken forward where appropriate or required.	None.		
4. Ensuring that external providers of services on behalf of the organisation are required to act with integrity and in compliance with high ethical standards expected by the organisation	Good.	Key partnerships have mechanisms in place to define role and scope of partners. Procurement exercises, where appropriate, include assessment criteria around social value which is incorporate into contracts.	None.		

Supporting Principle 3: Respecting the rule of law

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring members and staff demonstrate a strong commitment to the rule of the law as well as adhering to relevant laws and regulations	Good.	Constitution is adhered to and reviewed regularly. Statutory provisions are adhered to. Head of Paid Service, Monitoring Officer and S151/CFO in place.	None.		
2. Creating the conditions to ensure that the statutory officers, other key post holders and members are able to fulfil their responsibilities in accordance with legislative and regulatory requirements.	Good.	Job descriptions and roles of statutory officers are well defined and understood by the organisation. Structure of SLT ensures statutory officers are included in decision making. The S151 / CFO role complies with CIPFA's Statement on the Role of the Chief Financial Officer in Local Government (CIPFA, 2016). Statutory Officers meet separately to the Senior Leadership Team when necessary and the Directors and CEX regularly meet separately.	None.		
3. Striving to optimise the use of the full powers available for the benefit of citizens, communities, and other stakeholders	Good.	Arrangements in place for legal advice and recording of advice. All reports requiring a decision are considered by Finance and Legal before being considered by the relevant decision-making committee/Council.	None.		
4. Dealing with breaches of legal and regulatory provisions effectively	Good.	Proper arrangements in place for legal advice and recording of advice, Monitoring Officer referenced to give advice and ensure Council's operates within the law at all times. Monitoring Officer authorised to investigate all breaches and refer to appropriate regulatory bodies.	None.		
5. Ensuring corruption and misuse of power are dealt with effectively	Good.	Whistleblowing policy, anti-fraud and corruption policy in place. Segregation of duties on key financial processes.	None.		

Core Principle B: Ensuring openness and comprehensive stakeholder engagement

Supporting Principle 1: Openness

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring an open culture through demonstrating, documenting and communicating the organisation's commitment to openness	Good.	Corporate Plan and emerging Corporate Strategy. Budget considerations are consulted upon, and results are published. FOI requests actively responded to, website, online publishing of expenditure.	None.		
2. Making decisions that are open about actions, plans, resource use, forecasts, outputs and outcomes. The presumption is for openness. If that is not the case, a justification for the reasoning for keeping a decision confidential should be provided	Good.	Record of decision making and supporting materials. Standard report format used. The Council's governance framework aims to ensure it sets and meets its objectives and responsibilities in a lawful, timely, open, inclusive, and honest manner; and that its use of public money and resources are safeguarded, properly accounted for and used economically, efficiently and effectively.	None.		
3. Providing clear reasoning and evidence for decisions in both public records and explanations to stakeholders and being explicit about the criteria, rationale and considerations used. In due course, ensuring that the impact and consequences of those decisions are clear	Good.	Decisions well documented with supporting information and advice included. Forward Plan detailing report publication on a timely basis. Calendar of dates for submitting, publishing, and distributing timely reports is adhered to Council and Committee meetings are normally open to the public unless information is of a commercially sensitive nature. The conduct of business is defined by formal procedures and rules that are set out in the Constitution.	None.		
4. Using formal and informal consultation and engagement to determine the most appropriate and effective interventions / courses of action.	Good	Customer and staff satisfaction surveys carried out regularly. Resident Forums in place for key towns in the borough (Oadby, Wigston and South Wigston). We follow statutory requirements for consultation and very often go above that in terms of community engagement. Ad-hoc approach to informal consultation in place and utilised. Communications Strategy adopted April 2022 and Customer Experience Strategy adopted in 2023. The Tenant and Leaseholder Forum plays a key role ensuring the Council meets its regulatory standards.	None.		

		Comprehensive consultations undertaken in 2023/24 including 2024/25 budget consultation, hackney carriage vehicle consultation, polling districts, places and stations, statement of community involvement, draft climate change strategy, draft damp, mould and condensation policy and housing tenants' perception survey.			
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Supporting Principle 2: Engaging comprehensively with institutional stakeholders

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Effectively engaging with institutional stakeholders to ensure that the purpose, objectives and intended outcomes for each stakeholder relationship are clear so that outcomes are achieved successfully and sustainably	Good.	Formal and informal partnerships in place. Regular diarised meetings with appropriate senior officers and partners (including SLM, Helping Hands). Strong example is relationship with University of Leicester and support from the Council to the Civic Agreement.	None.		
2. Developing formal and informal partnerships to allow for resources to be used more efficiently and outcomes achieved more effectively	Good.	Partnership working across the authority is strong for example the recently formed Building Control partnership. Approach to consideration of shared services embedded as part of alternative service delivery model reviews. Service Level Agreements. Partnership agreements exist. The organisation has a range of partnerships and collaborative relationships. They have appropriate legal agreements and governance commensurate with the nature of the partnership, depending on factors such as legal status, membership, risk, subject matter.	None.	Develop Partnership Toolkit as per Corporate Strategy.	To be allocated
3. Ensuring that partnerships are based on trust, a shared commitment to change, a culture that promotes and accepts challenge among partners and that the added value of partnership working is explicit	Good.	As above.	None.		

Core Principle C: Defining outcomes in terms of sustainable economic, social, and environmental benefits

Supporting Principle 1: Defining outcomes

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Having a clear vision which is an agreed formal statement of the organisation's purpose and intended outcomes containing appropriate performance indicators, which provides the basis for the organisation's overall strategy, planning and other decisions.	Fair.	<p>The Corporate Plan and emerging Strategy defines the vision for the Council, including values and priorities.</p> <p>Service Plans are developed based on the Corporate Plan. The quarterly monitoring report and End of Year report details performance against the performance indicators.</p> <p>Council Vision is widely promoted and embedded within the authority.</p> <p>The emerging Corporate Strategy is firmly aligned with the vision.</p>	None.	Approval of New Corporate Strategy	To be allocated. For 2024/25. To be reallocated from 25/26.
2. Specifying the intended impact on, or changes for, stakeholders including citizens and service users. It could be immediately or over the course of a year or longer	Good.	Intended impacts set out in Corporate Plan / Strategy and Team Business Plans.	None.		
3. Delivering defined outcomes on a sustainable basis within the resources that will be available	Good.	Team Business Plans developed for each service area. Regular performance and finance reports monitored by SLT; Project performance reports monitored by SLT, Service Delivery and Performance, Finance and Development Committees.	None.	Embed the revised PPM approach across the Council.	Strategic Director
4. Identifying and managing risks to the achievement of outcomes	Good.	<p>Quarterly review of risk with SLT.</p> <p>Risk Management Group involves a cross-organisational set of officers from all management levels who monitor risk.</p> <p>Audit Committee review of risk on a quarterly basis.</p>	None.	Ensure that all the agreed Internal Audit actions are implemented in a timely manner (Added focus to given to those Audits with less than Significant Assurance),	Senior Leadership Team (However each SLT Member is responsible for their own service area).
5. Managing service users' expectations effectively with regard to determining	Good.	Performance Indicators within Team Business Plans and Corporate Plan/Strategy include	None.		

priorities and making the best use of the resources available		agreed set of quality standard measures.			
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Supporting Principle 2: Sustainable economic, social and environmental benefits

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Considering and balancing the combined economic, social and environmental impact of policies, plans and decisions when taking decisions about service provision	Fair.	We actively consider the social and economic impact of policies in decisions. An example of this is social value considerations in procurement exercises. Risk management plays an active part in considering and balancing impacts.	None.	A review of committee report format will be undertaken to ensure report authors convey the economic, social and environmental impact of policies, plans and decisions.	Head of Law and Democracy for 2024/25. To be reallocated for 2025/26.
2. Taking a longer-term view with regard to decision making, taking account of risk and acting transparently where there are potential conflicts between the organisation's intended outcomes and short-term factors such as the political cycle or financial constraints	Good.	Record of decision making and supporting materials made available publicly on website. The Medium-Term Financial Strategy adopted includes an affordability approach to assessing the financial implications of the corporate strategy. The MTFP includes a Sustainability Plan for closing budget gaps. The draft Corporate Strategy has been developed in order to be deliverable within the Council's budgetary constraints. The MTFP is updated and presented to members twice annually and to scenario model potential outcomes associated with key factors and impact of decisions.	None.		
3. Determining the wider public interest associated with	Good.	We follow statutory requirements for consultation and as part	None.		

<p>balancing conflicting interests between achieving the various economic, social and environmental benefits, through consultation where possible, in order to ensure appropriate trade-offs.</p>		<p>of very often go above that in terms of community engagement.</p> <p>Ad-hoc approach to informal consultation in place and utilised. Elected members act in public interest. Record of decisions made available to public via website. Consultations on key projects with key groups.</p> <p>Members abide by the code of conduct and all committee reports are prepared to reflect all the relevant options, risks and benefits – so members have all the relevant information in front of them when they make a decision.</p> <p>The Council is transparent in decision making.</p> <p>We publish all our agendas and minutes.</p>			
<p>4. Ensuring fair access to services</p>	<p>Good.</p>	<p>Nominated Equalities lead. All new policies presented for approval require Equalities Impact Assessment to be completed and regularly reviewed as part of ensuring fair access.</p> <p>Equality and Diversity Policy in place. Process in place for equalities impact assessments and action included in Equalities and Diversity Action Plan to assess current processes.</p> <p>The Customer Experience Strategy was adopted in 2023 and progress is regularly monitored to ensure fair access to services is available to all our residents. Our local insight document is available on the intranet and used so that all our staff better understand our customer groups.</p>	<p>None.</p>		

Core Principle D: Determining the interventions necessary to optimise the achievement of the intended outcomes

Supporting Principle 1: Determining interventions

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring decision makers receive objective and rigorous analysis of a variety of options indicating how intended outcomes would be achieved and including the risks associated with those options. Therefore ensuring best value is achieved however services are provided	Good.	<p>All reports details options appraisals and risks associated with decisions.</p> <p>The Medium-Term Financial Strategy adopted includes an affordability approach to assessing the financial implications of the corporate strategy.</p> <p>The MTFP includes a Sustainability Plan for closing budget gaps. This is updated and presented to members twice annually and to scenario model potential outcomes associated with key factors and impact of decisions.</p> <p>The draft Corporate Strategy has been developed in order to be deliverable within the Council's budgetary constraints.</p>	None.		
2. Considering feedback from citizens and service users when making decisions about service improvements or where services are no longer required in order to prioritise competing demands within limited resources available including people, skills, land and assets and bearing in mind future impacts	Good.	<p>Budget consultation undertaken for 2024/25 received 359 replies. Whilst this was a challenging budget, due to the amount of savings that were necessary a change to the draft budget was to reintroduce expenditure on community health and well-being.</p> <p>Other comprehensive consultations undertaken in 2023/24 include the hackney carriage vehicle consultation, polling districts, places and stations, statement of community involvement, draft climate change strategy, draft damp, mould and condensation policy and housing tenants' perception survey.</p> <p>For other areas, we follow statutory requirements for consultation and very often go above that in terms of community engagement. Ad-hoc approach to informal consultation in place and utilised.</p>	None.		

Supporting Principle 2: Planning interventions

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Establishing and implementing robust planning and control cycles that cover strategic and operational plans, priorities and targets.	Good.	Calendar dates for all Council meetings agreed in advance, reports published in a timely manner ensuring a robust planning cycle. Quarterly performance and finance reports monitored by SLT and Service Delivery and Policy, Finance and Development Committees.	None.	Ensure that all Internal Audit Reviews are considered by SLT in detail prior to final sign-off by Service Managers	CFO
2. Engaging with internal and external stakeholders in determining how services and other courses of action should be planned and delivered.	Good.	Resident Forums in existence for each major town in the borough. We regularly consult where changes to policies are made, over and above statutory requirements. Tenant engagement approach for Housing now established and will develop further in 2024/25.	None.		
3. Considering and monitoring risks facing each partner when working collaboratively including shared risks	Good	Strong partnerships exist. Partnership agreements exist where necessary for financial/legal/governance/risk reasons and formal agreements are put in place. (e.g. Shared Building Control).	None		
4. Ensuring arrangements are flexible and agile so that the mechanisms for delivering outputs can be adapted to changing circumstances	Good.	Delegated responsibility in some areas. Constitution is flexible. Delegated decision making can be amended to facilitate urgent decision making.	None.		
5. Establishing appropriate key performance indicators (KPIs) as part of the planning process in order to identify how the performance of services and projects is to be measured	Good.	KPIs established and approved for each service and included in Service Plans. Quarterly Performance Reports are considered by Service Delivery Committee.	None.		
6. Ensuring capacity exists to generate the information required to review service quality regularly	Good.	Performance is included to give context for decisions to be made where necessary. Resource dedicated to Transformation which works across the organisation to make customer, process and financial improvements.	None.		

		Programme of service reviews continues in 2024/25 as part of the council's Sustainability Programme.			
7. Preparing budgets in accordance with organisational objectives, strategies and the medium-term financial plan	Good	<p>Strategic and Financial Planning timetable was reviewed and aligned for 2024/25 planning, enabling a more integrated approach. Numerous Member workshops covering Financial Sustainability were undertaken during the year.</p> <p>Star Chambers where the Council Leader, Deputy Leader, Chairmen of SDC and PFDC and a Councillor from the Opposition were invited to budget meetings in order to scrutinise and understand budget proposals with the respective Heads of Service prior to formal budget setting.</p> <p>2024/25 Budget was approved with the Council committed to not using General Reserves to balance the budget.</p> <p>Emerging Corporate Strategy is prepared with close alignment to financial position.</p>	None.	Ensure 2025/26 budget is prepared in accordance with Corporate Strategy activities.	CFO
8. Informing medium and long term resource planning by drawing up realistic estimates of revenue and capital expenditure aimed at developing a sustainable funding strategy	Good.	<p>Strategic and Financial Planning timetable was reviewed and aligned for 2024/25 planning, enabling a more integrated approach. Numerous Member workshops covering Financial Sustainability were undertaken during the year.</p> <p>Star Chambers where the Council Leader, Deputy Leader, Chairmen of SDC and PFDC and a Councillor from the Opposition were invited to budget meetings in order to scrutinise and understand budget proposals with the respective Heads of Service prior to formal budget setting.</p> <p>A realistic, practical and achievable Sustainability Plan was approved as part of the 2024/25 Budget with Council committed to not using General Reserves to balance the budget.</p>	None.		

Supporting Principle 3: Optimising achievement of intended outcomes

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring the medium-term financial strategy integrates and balances service priorities, affordability and other resource constraints	Fair	<p>A realistic, practical and achievable Sustainability Plan was approved as part of the 2024/25 Budget with Council committed to not using General Reserves to balance the budget.</p> <p>The MTFP updated and presented to members twice annually and to scenario model potential outcomes associated with key factors and impact of decisions.</p> <p>Further work through the Sustainability Programme as outlined above will enhance this.</p>	None.	Ensure savings targets identified in the Sustainability Plan are met and consistently applied.	CFO
2. Ensuring the budgeting process is all inclusive, taking into account the full cost of operations over the medium and longer term	Good.	<p>There is a five-year Capital budget planning window.</p> <p>The detailed revenue budget currently planned one year at a time.</p> <p>The MTFP focuses on five-year medium term.</p>	None.		
3. Ensuring the medium-term financial strategy sets the context for ongoing decisions on significant delivery issues or responses to changes in the external environment that may arise during the budgetary period in order for outcomes to be achieved while optimising resource usage	Good	<p>The Medium-Term Financial Strategy adopted includes an affordability approach to assessing the financial implications of the corporate strategy.</p> <p>The MTFP includes a Sustainability Plan for closing budget gaps.</p> <p>The draft Corporate Strategy has been developed in order to be deliverable within the Council's budgetary constraints.</p> <p>The MTFP is updated and presented to members twice</p>	None.		

		annually and to scenario model potential outcomes associated with key factors and impact of decisions.			
4. Ensuring the achievement of 'social value' through service planning and commissioning.	Good	Social value considered through the Council's Procurement Policy.	None		

Core Principle E: Developing the entity's capacity, including the capability of its leadership and the individuals within it

Supporting Principle 1: Developing the entity's capacity

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Reviewing operations, performance use of assets on a regular basis to ensure their continuing effectiveness	Fair.	<p>Reviews of structures, ways of working and performance carried out as necessary.</p> <p>Acquisitions and Disposals Policies.</p> <p>Work is underway with the asset management policy and capital expenditure plan but this is not yet complete.</p> <p>A comprehensive asset review has been undertaken and associated activities including asset disposals are underway.</p> <p>The approach to purchasing a specific asset management database has been refined so that the asset management is contained within the Council's Housing Asset Management System (therefore maximising the use of that Council IT Asset).</p>	None.	<p>Complete the revision of the Asset Management Policy and Capital Expenditure Plan</p> <p>Ensure the 'Corporate Assets' element of the Asset Management Database is timetabled and completed.</p>	Head of Law and Democracy in 2024/25 and Head of Neighbourhood Services from 2025/26
2. Improving resource use through appropriate application of techniques such as benchmarking and other options in order to determine how the authority's resources are allocated so that	Good	Benchmarking is conducted across the Council, and Customer Services participate in a local benchmarking group with other Leicestershire Councils. There are several other specific groups, for example, the DWP	None.		

outcomes are achieved effectively and efficiently		(Department for Work and Pensions) Benefits Performance Management Group. As a result of benchmarking with regard to planning processes, the Council have streamlined their process so that now they lead in terms of decision times. The management of extensions has also been improved.			
		Finance benchmarking subscription in place via LG Inform.			
3. Recognising the benefits of partnerships and collaborative working where added value can be achieved	Good.	Strong partnership working across the Council.	None.		
4. Developing and maintaining an effective workforce plan to enhance the strategic allocation of resources	Good	Existing Strategic Risk Register. People Strategy approved and rolled out during Summer 2023. Sustainability Plan identified areas for possible redundancy as part of the required savings targets for the 2024/25 Budget.	None.		

Supporting Principle 2: Developing the capability of the entity's leadership and other individuals

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Developing protocols to ensure that elected and appointed leaders negotiate with each other regarding their respective roles early in the relationship and that a shared understanding of roles and objectives is maintained	Good.	Regular meetings between Leader and Chief Executive. Regular meetings also take place between the Chief Executive and Leader of the Opposition. Committee Chairs supported by designated SLT leads. Robust member induction programme, with specific and significant training planned. Code of Conduct for all members.	None.		
2. Publishing a statement that specifies the types of decisions that are delegated and those reserved for the collective	Good.	Regular review of delegation and financial regulations. Constitution.	None.		

decision making of the governing body					
3. Ensuring the leader and the chief executive have clearly defined and distinctive leadership roles within a structure whereby the chief executive leads the authority in implementing strategy and managing the delivery of services and other outputs set by members and each provides a check and a balance for each other's authority	Good.	Clear roles and responsibilities with CEX's objectives set and monitored by Members.	None.		
4. Developing the capabilities of members and senior management to achieve effective shared leadership and to enable the organisation to respond successfully to changing legal and policy demands as well as economic, political and environmental changes and risks by: <ul style="list-style-type: none"> Ensuring members and staff have access to appropriate induction tailored to their role and that ongoing training and development matching individual and organisational requirements is available and encouraged Ensuring members and officers have the appropriate skills, knowledge, resources and support to fulfil their roles and responsibilities and ensuring that they are able to update their knowledge on a continuing basis. Ensuring personal, organisational and system-wide development through shared learning, including lessons learnt from governance weaknesses both internal and external 	Good.	<p>Comprehensive timetable of member inductions. Members trained as and when required for specific issues.</p> <p>Formal induction process for new administration and new members.</p> <p>Robust member induction programme, with specific and significant training was undertaken.</p> <p>Code of Conduct for all members and officers.</p> <p>Detailed and specific induction processes take place for staff and appraisals which detail any specific learning are undertaken annually.</p> <p>Post entry training and CPD is also encouraged, and professional fees are reimbursed.</p>	None.		
5. Ensuring that there are structures in place to encourage public participation	Good.	Resident Forums, Customer feedback, regular formal consultation exercises.	None.		
6. Taking steps to consider the leadership's own effectiveness and ensuring	Good.	LGA Financial Health Check 2021 and LGA Corporate Peer Review in 2022.	None.		

	leaders are open to constructive feedback from peer review and inspections		OFLOG Best Value Self-Assessment undertaken March/April 2024			
7.	Holding staff to account through regular performance reviews which take account of training or development needs	Good.	Staff development plans linked to appraisals. Staff performance appraisal approach was reviewed, refreshed and relaunched in 2023.	None.		
8.	Ensuring arrangements are in place to maintain the health and wellbeing of the workforce and support individuals in maintaining their own physical and mental wellbeing.	Good.	There are numerous health and well-being initiatives such as discount on leisure facilities for staff, free eye-tests, cycle to work scheme, Brocks Hill walks and activities such as pilates. Employee advice line, There are counselling sessions available for those in need. Sickness management ongoing.	None.		

Core Principle F: Managing risks and performance through robust internal control and strong public financial management

Supporting Principle 1: Managing risk

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Recognising that risk management is an integral part of all activities and must be considered in all aspects of decision making	Good.	Risk Management system in place with regular monitoring at Manager/HoS level and SLT and Audit Committee. New cross-service and role Risk Management Group established to monitor risk. Risk Management Policy adopted by Audit Committee January 23.	None.		
2. Implementing robust and integrated risk management arrangements and ensuring that they are working effectively	Good.	Risk Management Policy formally approved and adopted. Health and Safety Action Plan in place.	None.		
3. Ensuring that responsibilities for managing individual risks are clearly allocated	Good.	Risk Management system in place with regular monitoring. Each Strategic Risk has a member of SLT as the strategic risk owner.	None.		

Supporting Principle 2: Managing Performance

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Monitoring service delivery effectively including planning, specification, execution and independent post implementation review	Good.	Monitoring of service delivery currently completed through service plans. Agreed performance targets reported monthly. SLAs for all service areas, reviewed annually.	None.		
2. Making decisions based on relevant, clear objective analysis and advice pointing out the implications and risks inherent in the organisation's financial, social and environmental position and outlook	Good.	Standardised project appraisal and affordability approach developed as part of the MTFS. This new approach was utilised for the Council funding allocation decision for the office relocation.	None.		
3. Encouraging effective and constructive challenge and debate on policies and objectives to support balanced and effective decision making	Good.	Committee system enables all members to contribute towards ensuring policies are effective and objectives are delivered. Support offered to opposition members e.g. through regular briefings with the CEX and relevant members of SLT, through the Buddying System and as part of budget setting.	None.		
4. Providing members and senior management with regular reports on service delivery plans and on progress towards outcome achievement	Good.	Regular quarterly reports to SLT and Service Delivery Committee.	None.		

5. Ensuring there is consistency between specification stages (such as budgets) and post implementation reporting (eg financial statements)	Good.	Standing orders in place. Approval reports are separate from financial updates.	None.		
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Supporting Principle 3: Robust internal control

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Aligning the risk management strategy and policies on internal control with achieving the objectives	Good.	Risk management policy audit plan and regular audit reports.	None.		
2. Evaluating and monitoring the authority's risk management and internal control on a regular basis	Good.	Risk management policy with risks reviewed regularly by Risk Management Group, SLT and Audit Committee.	None.		
3. Ensuring effective counter fraud and anti-corruption arrangements are in place	Fair	<p>Compliance with the Code of Practice on Managing the Risk of Fraud and Corruption (CIPFA, 2014).</p> <p>Anti-fraud policy updated April 2023 and Anti-corruption policy in place.</p> <p>Anti-fraud training has been rolled out across the Council.</p> <p>Annual Report on anti-fraud progress to be provided to Audit Committee</p>	None.	Ant-Fraud Report to be submitted to Audit Committee	Chief Finance Officer/S151 Officer
4. Ensuring additional assurance on the overall adequacy and effectiveness of the framework of governance, risk management and control is provided by the internal auditor	Good.	Annual governance statement, internal audit arrangements adequate with internal audit actively involved in service improvement.	None.		
5. Ensuring an audit committee or equivalent group or function which is independent of the executive and accountable to the governing body:	Good.	<p>Audit committee complies with best practice. See Audit Committees: Practical Guidance for Local Authorities and Police (CIPFA, 2018).</p> <p>Terms of Reference in place for Committee.</p>	None.		

provides a further source of effective assurance regarding arrangements for managing risk and maintaining an effective control environment that its recommendations are listened to and acted upon.		Training for committee members provided June 2022, included session to enable committee members to approve the financial statements. Financial Statement repeated in March 2025. Audit Committee Self-Assessment was undertaken in January 2024			
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Supporting Principle 4: Managing Data

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring effective arrangements are in place for the safe collection, storage, use and sharing of data, including processes to safeguard personal data.	Good.	Policies in place for data management and data protection. Designated data protection officer.	None.	None.	
2. Ensuring effective arrangements are in place and operating effectively when sharing data with other bodies.	Good.	Data sharing agreements in place and data processing agreements where necessary.	None.	None.	
3. Reviewing and auditing regularly the quality and accuracy of data used in decision making and performance monitoring.	Good.	Regular internal audits carried out.	None.	None.	

Supporting Principle 5: Strong public financial management

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring financial management supports both long-term achievement of outcomes and short-term financial and operational performance.	Fair.	The Medium-Term Financial Strategy includes new affordability approach to assessing the financial implications of the corporate strategy and a Sustainability Plan for closing budget gaps.	None.	Progress the outstanding actions to meet the CIPFA Financial Management Code:	CFO

		<p>During 2023/24 the S151 Officer led a number of financial workshops with elected members to emphasise the Council's financial position.</p> <p>Working closely with Councillors and the SLT, the budget setting process for 2024/25 provided challenging yet tangible and achievable savings targets that were necessary to put the Council on a more sustainable footing.</p> <p>The MTFP is updated and presented to members twice annually and to scenario model potential outcomes associated with key factors and impact of decisions.</p> <p>That said, the work undertaken to adopt the CIPFA Financial Management Code in 2022 identified areas where the Council did not achieve the Code requirements and the majority of these have now been taken forward with any outstanding actions outstanding to be implemented in 2024/25</p>		<ul style="list-style-type: none"> • Progress the vision for finance at OWBC • Undertake training needs analysis of finance team and develop training and development plan • Update Financial Procedure Rules • Implement the Internal Audit recs/ 	
2. Ensuring well-developed financial management is integrated at all levels of planning and control, including management of financial risks and controls	Good	<p>There are budget monitoring reports and regular reviews. The relationship between budget managers and business partners has improved and finance play a key role in key projects (such as the introduction of alternate weekly bin collections). This will now be monitored, and continuous improvements undertaken in a 'business as usual' approach.</p>			

Core Principle G: Implementing good practices in transparency, reporting, and audit to deliver effective accountability

Supporting Principle 1: Implementing good practice in transparency

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Writing and communicating reports for the public and other stakeholders in an understandable style appropriate to the intended audience and ensuring that they are easy to access and interrogate	Good.	Website is user friendly, all formal reports written in 'plain English'.	None.		
2. Striking a balance between providing the right amount of information to satisfy transparency demands and enhance public scrutiny while not being too onerous to provide and for users to understand	Good.	Website user friendly, all formal reports written in 'plain English'. Website includes translation tool.	None.		

Supporting Principle 2: Implementing good practices in reporting

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Reporting at least annually on performance, value for money and the stewardship of its resources	Good.	Service and Financial performance are reported quarterly to committees, Statement of Accounts, Annual Governance Statement.	None.		
2. Ensuring members and senior management own the results	Good.	Members and SLT receive and approve reports.	None.		

3. Ensuring robust arrangements for assessing the extent to which the principles contained in the Framework have been applied and publishing the results on this assessment including an action plan for improvement and evidence to demonstrate good governance (annual governance statement)	Good.	Annual Governance Statement.	None.		
4. Ensuring that the Framework is applied to jointly managed or shared service organisations as appropriate	Good.	Annual Governance Statement.	None.		
5. Ensuring the performance information that accompanies the financial statements is prepared on a consistent and timely basis and the statements allow for comparison with other similar organisations	Good.	Format follows best practice.	None.		

Supporting Principle 3: Assurance and effective accountability

Requirement of local authorities to:	Assessment	Evidence	Significant Issues	Areas for Improvement	Lead
1. Ensuring that recommendations for corrective action made by external audit are acted upon	Good.	Recommendations from external audit acted upon. Regular communication between S151 Officer and External Auditor. Progress made against external	None.		

		audit recs are reported to Audit Committee			
2. Ensuring an effective internal audit service with direct access to members is in place which provides assurance with regard to governance arrangements and recommendations are acted upon	Good.	Internal Audit report directly to Audit Committee. Recommendations from internal audit acted upon. Compliance of Internal Audit arrangements with Public Sector Internal Audit Standards. Regular communication between S151 Officer and Internal Auditor.	None.		
3. Welcoming peer challenge, reviews and inspections from regulatory bodies and implementing recommendations	Good.	Corporate Peer Challenge undertaken January 2022. All recommendations were implemented. OFLOG Best Value approach has been approved by Council	None.		



Audit Committee	Thursday, 17 July 2025	Matter for Information
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Report Title: **Strategic Risk Register Update (Q4 2024/25)**

Report Author(s): **Colleen Warren (Chief Finance Officer/S151 Officer)**

Purpose of Report:	To present the latest Strategic Risk Register to Committee for information.
Report Summary:	In accordance with the requirements of the Councils Risk Management Policy, this report presents the Strategic Risk Register for the Committees consideration. The register is updated on a regular basis through discussions with the internal Risk Management group, members of the SLT and CMT.
Recommendation(s):	That the content of the report and the Strategic Risk Register, as set out in Appendix 1, be considered and noted.
Senior Leadership, Head of Service, Manager, Officer and Other Contact(s):	Colleen Warren (Chief Finance Officer/S151 Officer) (0116) 257 2759 Colleen.warren@oadby-wigston.gov.uk
Strategic Objectives:	Our Council (SO1)
Vision and Values:	"Our Borough - The Place To Be" (Vision) Resourceful & Resilient (V4)
Report Implications:-	
Legal:	There are no implications arising from this report.
Financial:	There are no implications directly arising from this report.
Corporate Risk Management:	Decreasing Financial Resources / Increasing Financial Pressures (CR1) Key Supplier / Partnership Failure (CR2) Reputation Damage (CR4) Effective Utilisation of Assets / Buildings (CR5) Regulatory Governance (CR6) Failure to Respond to a Significant Incident (CR7) Organisational / Transformational Change (CR8) Economy / Regeneration (CR9) Increased Fraud (CR10) Cyber Threat / Security (CR11)
Equalities and Equalities Assessment (EA):	There are no implications directly arising from this report. EA not applicable
Human Rights:	There are no implications directly arising from this report.
Health and Safety:	There are no implications directly arising from this report.

Statutory Officers' Comments:-	
Head of Paid Service:	The report is satisfactory.
Chief Finance Officer:	As the author, the report is satisfactory.
Monitoring Officer:	The report is satisfactory.
Consultees:	Risk Management Group Senior Leadership Team Corporate Management Team
Background Papers:	None.
Appendices:	1. Strategic Risk Register (Q4 2024/25)

1. Background

- 1.1 In line with the Risk Management policy, which was approved by the Audit Committee in January 2023, this report presents the Strategic Risk Register (Q4 2024/25) at Appendix 1.
- 1.2 The Risk Management Group and CMT have reviewed and updated the risk register, which has also been reviewed by the Senior Leadership Team (SLT).
- 1.3 This report presents a high-level summary of the risks contained within the register and highlights any movements in the scores reported in January 2025.

2 Strategic Risk Register




- 2.1 The Strategic risk Register contains a total of 14 risks and no additional risks have been added.
- 2.2 The change in mitigated score is visually represented by the arrows shown in the far right column "Direction of travel of mitigated score risk".
- 2.3 Changes have been made to the existing controls, management actions and target dates, which are detailed in the review Commentary column of the Risk Register and are highlighted in red for ease of reading.

IMPACT		
Level	Score	Description
Insignificant	1	<ul style="list-style-type: none">no impact on serviceno impact on reputationcomplaint unlikelylitigation risk remote
Minor	2	<ul style="list-style-type: none">slight impact on serviceslight impact on reputationcomplaint possiblelitigation possible
Moderate	3	<ul style="list-style-type: none">some service disruptionpotential for adverse publicity - avoidable with careful handlingcomplaint probablelitigation probable
Major	4	<ul style="list-style-type: none">service disruptedadverse publicity not avoidable (local media)complaint probablelitigation probable
Extreme / Catastrophic	5	<ul style="list-style-type: none">service interrupted for significant timemajor adverse publicity not avoidable (national media)major litigation expectedresignation of senior management and boardloss of beneficiary confidence

LIKELIHOOD		
Level	Score	Description
Remote	1	<ul style="list-style-type: none">may only occur in exceptional circumstances
Unlikely	2	<ul style="list-style-type: none">expected to occur in a few circumstances
Possible	3	<ul style="list-style-type: none">expected to occur in some circumstances
Probable	4	<ul style="list-style-type: none">expected to occur in many circumstances
Highly probable	5	<ul style="list-style-type: none">expected to occur frequently and in most circumstances




		Impact				
		1	2	3	4	5
Likelihood	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5

Risks that are red require mitigating action to reduce to amber or white

Strategic Risk Register																						
Ref	Risk Definition	2019-2024	Root Cause:	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score			Existing Controls (sources of assurance)	Mitigated Risk Score			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score		
	What is the headline risk/issue?		What is the root cause or problem?		(no controls)				(with controls)													
			What could go wrong?																			
					Likelihood	Impact	Overall risk rating		Likelihood	Impact	Overall risk rating			Likelihood	Impact	Overall risk rating						
CR1	Decreasing Financial resources / Increasing Financial Pressures	Resourceful and Resilient	<input type="checkbox"/> Increase demand for services e.g. benefits <input type="checkbox"/> Continuing Austerity <input type="checkbox"/> Political promises <input type="checkbox"/> Change in priorities <input type="checkbox"/> Deflated housing market <input type="checkbox"/> Lack of business growth <input type="checkbox"/> Further changes in legislation <input type="checkbox"/> Pooling/Unpooling of NNDR <input type="checkbox"/> Universal Credit <input type="checkbox"/> Political hesitancy in decision making for fundamental service reform. <input type="checkbox"/> Cost-of-living crises <input type="checkbox"/> Supplier price variations as a result of inflation Spending Review Fair Funding Review	<input type="checkbox"/> Cuts in services <input type="checkbox"/> Political and customer expectations not met <input type="checkbox"/> Quality of service <input type="checkbox"/> Reputation damage <input type="checkbox"/> Knock on impact on the local community and economy e.g. spiral effect <input type="checkbox"/> Legal challenge, <input type="checkbox"/> Reduction in rent/monies owed to the council through the introduction of UC, <input type="checkbox"/> Increased homelessness adding stresses to council finances and the local economy. <input type="checkbox"/> Supplier price variations significant. Devolution Reduction in Government Funding Reduction in NNDR (pooling)	5	4	20	<input type="checkbox"/> Budgetary Control processes and committee reporting <input type="checkbox"/> Medium Term Financial Strategy and HRA Business Plan - including scenario planning <input type="checkbox"/> Setting and monitoring of savings and efficiency targets <input type="checkbox"/> Annual Fees and Charges review <input type="checkbox"/> Disclosure of expenditure over £250 <input type="checkbox"/> Review of reserves and balances <input type="checkbox"/> Treasury Management and Investment Strategy <input type="checkbox"/> Prudential Indicators <input type="checkbox"/> Revised Financial Regulations <input type="checkbox"/> Business Rates Pooling <input type="checkbox"/> Procurement Policy. <input type="checkbox"/> Homelessness team increased <input type="checkbox"/> Assessment of viability of capital projects. <input type="checkbox"/> Financial Inclusion Officer assists vulnerable residents <input type="checkbox"/> Service/Review Transformation Programme across the council to improve service delivery <input type="checkbox"/> Ongoing impacts of inflation captured in medium term financial plan. <input type="checkbox"/> New MTFS approved February 2025 <input type="checkbox"/> Engagement with MP, LGA and DLUHC about the council's unique financial Sustainably Programme now <input type="checkbox"/> The savings targets are constantly monitored by SLT and is a standing item on SLT agenda and opportunities for innovation are regularly sought such as winning an award to install solar panels at Wigston Pool and parklands, therefore reducing energy costs for the Council. Final budget presented to full council in February 2025. Financial challenges of Devolution to be managed through budget set aside from reserves. Vacancy Management Part of the S151 Leicestershire Group Marketing of public spaces for income generation	4	4	16	<input type="checkbox"/> Delivery of Service Delivery Changes – Financial Sustainability Plan. Regular review of savings targets. New PID developed including all aspects linked to sustainability of the Councils finances, eg establishments, contracts etc Final Budget for 2025/26 approved at Full Council in February 2025. Monitoring of reserves quarterly - set amount for Devolution with further requirements to be brought to members for approval. Complete Government surveys, monitor information from Government Sustainability Plan reviewed by SLT in Qtr 1	<input type="checkbox"/> Monthly reviews 2025	4	4	16	Chief Financial Officer	Jun-25	Updated existing controls to remove historic / controls no longer relevant. The delivery of Service Delivery Changes – Financial Sustainability Plan, where activity is well under way. New PID completed.			
CR2	Key Supplier Failure	Our Borough - the place to be. Resourceful and Resilient.		<input type="checkbox"/> Cost implications <input type="checkbox"/> Business Continuity <input type="checkbox"/> Loss of revenue <input type="checkbox"/> Service failure <input type="checkbox"/> TUPE issues <input type="checkbox"/> Potential court action <input type="checkbox"/> Increased complaints <input type="checkbox"/> Reputation issues <input type="checkbox"/> Political damage <input type="checkbox"/> Delays Impact of TUPE Inability to process payroll	5	4	20	<input type="checkbox"/> Formal contracts and agreements including realistic notice periods <input type="checkbox"/> Tender arrangements and pre qualification financial assessments <input type="checkbox"/> Qualified internal officers to provide legal advice <input type="checkbox"/> Use of external counsel <input type="checkbox"/> Performance management of contracts, Comprehensive Contract Register, Partnership working with Local Authority Partners <input type="checkbox"/> Part of management Board to oversee delegated services such as Lightbulb and Building Control. <input type="checkbox"/> Creation of Project and Procurement Team and Procurement Policy promotes use of established frameworks, thus reducing risk of supplier failure. <input type="checkbox"/> Partnership and contract risk registers <input type="checkbox"/> Contract term renegotiation with key providers as necessary <input type="checkbox"/> Contract Management review is undertaken as part of the Sustainability Programme <input type="checkbox"/> Contracts information has been incorporated into draft service plan template. <input type="checkbox"/> Contracts an item on 1-2-1's. <input type="checkbox"/> Specialists engaged where required i.e. Leisure Operator Contract (LOC) negotiations. <input type="checkbox"/> LOC Contract renegotiation approved at Council 12 December 2023 and SLM has agreed to changes. Formal Contract management training has been rolled out via CMPP Contract Procedure Rules training to be rolled out Summer 25	4	3	12	Contract review complete (Sustainability programme). Further external review of our contract management process and support with improvements (CMPP) Updating of Contract Procedure Rules went to PFD in June 25	Jun-25	2	2	4	Head of Law and Democracy/ Monitoring Officer	Jun-25				
CR3	Failure to work effectively with other public sector partner organisations (PSOs) and 3rd sector organisations	Our Borough - the place to be. Resourceful and Resilient.	<input type="checkbox"/> Poor service delivery from PSOs the Council has agreements with <input type="checkbox"/> Lack of engagement from partner PSOs <input type="checkbox"/> Governance arrangements which foster effective relationships may be inadequate leading to relationship breakdown Failure of relationships at strategic level in County & across members	<input type="checkbox"/> Loss of public confidence in Community Safety Partnership <input type="checkbox"/> Loss of funding for LLR Sports Alliance partnership <input type="checkbox"/> May not realise potential economies of scale <input type="checkbox"/> Impact on staff morale	4	3	12	<input type="checkbox"/> Formal agreements with public sector partners which clearly identify roles & responsibilities including H&WB, Lightbulb, Building Control and Local Land Charges. <input type="checkbox"/> Governance arrangements which manage performance against agreements <input type="checkbox"/> Lead officer arrangements/contract manager <input type="checkbox"/> Financial controls ensuring payments are only authorised where service being delivered by partner organisation is received and is of appropriate quality <input type="checkbox"/> Strategic Planning Group - governance arrangements are in place for this. Member Advisory Group also in place Performance of these arrangements is formally reviewed and changes are made if necessary. <input type="checkbox"/> Regular account meetings with contracted 3rd sector organisations. <input type="checkbox"/> Service Level Agreements in place where necessary. Cost of Living support programme has funded 3rd sector organisations and support for warm hubs. Contract review complete. OWBC representation at all Partnership Executive Board Meetings. Working with all districts and boroughs across Leicestershire and Rutland.	2	3	6		Jun-25	2	3	6	Head of Law and Democracy/ Monitoring Officer	Jun-25	Updated management control			

Strategic Risk Register																							
Ref	Risk Definition What is the headline risk/issue?	2019-2024	Root Cause:	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score			Existing Controls (sources of assurance)	Mitigated Risk Score			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score			
			What is the root cause or problem?																				
			What could go wrong?																				
					Likelihood	Impact	Overall risk rating		Likelihood	Impact	Overall risk rating			Likelihood	Impact	Overall risk rating							
CR4	Hard to reach demographics feel disenfranchised through lack of specific communication and engagement.	Our Borough - the place to be. Resourceful and Resilient.	<div><input type="checkbox"/> Staff capacity could impact on engagement</div> <div><input type="checkbox"/> hard to reach communities</div> <div><input type="checkbox"/> some resident groups not digitally connected</div> <div><input type="checkbox"/> change in political power could result in non-statutory service being stopped</div> <div><input type="checkbox"/> Failure to consult when appropriate to do so</div> <div><input type="checkbox"/> Funding changes impacting on roles</div> <div><input type="checkbox"/> Digital exclusion as a result of cost of living crises</div> <div><input type="checkbox"/> Reputational damage</div> <div><input type="checkbox"/> lack of support for community initiatives</div> <div><input type="checkbox"/> missed opportunity to impact on equalities agenda and HWB of residents</div> <div><input type="checkbox"/> Citizens panel not representative of demographic.</div> <div><input type="checkbox"/> Services may not meet the needs of this demographic</div> <td>4</td> <td>4</td> <td>16</td> <td><div><input type="checkbox"/> Public consultation surveys to obtain feedback for influencing strategy/policy through Citizens Panel and other communication channels, compliant with the Code of Practice on Consultations</div><div><input type="checkbox"/> Communications Strategy in place</div><div><input type="checkbox"/> Gov.Delivery digital e-mail system – targeted delivery on specific topics e.g. tenants newsletter in place</div><div><input type="checkbox"/> Financial Inclusion Officer</div><div><input type="checkbox"/> Volunteer community champion Digital Newsletter - specifically relating to health and wellbeing targeting socially vulnerable</div><div><input type="checkbox"/> Events programme run by Community Health Improvement Officers to target vulnerable and hard to reach residents/communities.</div><div><input type="checkbox"/> Statement of community involvement in place</div><div><input type="checkbox"/> Residents Forums meet regularly</div><div><input type="checkbox"/> Sports and physical activity commission plan to target hard to reach</div><div><input type="checkbox"/> Customer Experience Strategy in place</div><div><input type="checkbox"/> Appointment hubs in operation as well as reception point open at Brockshill</div><div><input type="checkbox"/> Website offers the facility to change language.</div><div><input type="checkbox"/> Use language line for translation services.</div><div><input type="checkbox"/> Tenant & Leaseholder focus group established and meeting on a quarterly basis.</div><div><input type="checkbox"/> Language Translation Service incorporate.</div><div>All households are to receive 2*letter communications regarding change to the bin collection regime.</div><div><input type="checkbox"/> Customer Experience Strategy Action Plan being monitored</div><div><input type="checkbox"/> Housing Regulators new Tenant Satisfaction collected</div><div>Virtual Appointments to increase customer contact have commenced</div><div>Volunteer event took place in November 24.</div><div>Volunteer thank you lunch took place in June 25</div><div>Engaging with Local Communities in relation to LGR, Tenant Forum representation and young people.</div><td>2</td><td>2</td><td>4</td><td>Members session planned for January 2025</td><td>Jun-25</td><td>1</td><td>2</td><td>3</td><td>Head of Customer Service and Transformation</td><td>Jun-25</td><td>Updated management control</td><td><div></div></td><td></td><td></td></td>	4	4	16	<div><input type="checkbox"/> Public consultation surveys to obtain feedback for influencing strategy/policy through Citizens Panel and other communication channels, compliant with the Code of Practice on Consultations</div> <div><input type="checkbox"/> Communications Strategy in place</div> <div><input type="checkbox"/> Gov.Delivery digital e-mail system – targeted delivery on specific topics e.g. tenants newsletter in place</div> <div><input type="checkbox"/> Financial Inclusion Officer</div> <div><input type="checkbox"/> Volunteer community champion Digital Newsletter - 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CR5	Political Dynamics	Our Borough - the place to be. Resourceful and Resilient.	<div><input type="checkbox"/> Change in political power</div> <div><input type="checkbox"/> Change in leader</div> <div><input type="checkbox"/> New members</div> <div><input type="checkbox"/> Public perception changes</div> <div><input type="checkbox"/> Change in priorities</div> <div><input type="checkbox"/> Change in member/officer engagement</div> <div><input type="checkbox"/> Breakdown in communication</div> <div><input type="checkbox"/> Inability to meet expectations</div> <div><input type="checkbox"/> Reputation issues (organisational and political)</div> <div><input type="checkbox"/> Reactive decision making (rather than planned)</div> <div><input type="checkbox"/> Failure to follow legislative requirements e.g. equalities</div> <div><input type="checkbox"/> Further strain on council finances</div> <td>3</td> <td>4</td> <td>12</td> <td><div><input type="checkbox"/> Member development programmes</div><div><input type="checkbox"/> New Code of Conduct has been adopted which comes into force on 1/4/22, with training planned to familiarise members with its content</div><div><input type="checkbox"/> Policies e.g. Safeguarding/Equalities and DBS checks</div><div><input type="checkbox"/> Provision of chairing skills training</div><div><input type="checkbox"/> Constitution, which is in the process of being reviewed to reflect new management structure</div><div><input type="checkbox"/> Public consultation,</div><div><input type="checkbox"/> Development of member enquiry system</div><div><input type="checkbox"/> Training for members covering a range of areas including IT and Planning</div><div><input type="checkbox"/> Buddying system in place for Elected Members to use</div><div><input type="checkbox"/> Members bulletin</div><div><input type="checkbox"/> Customer Service training and Political awareness training has been undertaken</div><div><input type="checkbox"/> Member and officer training undertaken with Centre for Governance and Scrutiny November 2022</div><div><input type="checkbox"/> Full review of members induction programme has been completed.</div><div><input type="checkbox"/> Induction training delivered for new members during May to July 2023.</div><div><input type="checkbox"/> SLT/Member workshops July, Sept. Nov</div><div><input type="checkbox"/> CMT/Member training sept 'meet the teams'.</div><div><input type="checkbox"/> OFLOG Self Assessment presented to Full Council in April 2024.</div><div>Member Working Group established to engage with the Alternate Weekly Waste Collection Project</div><div>Member Advisory Group in place, funded by UK Government projects.</div><td>3</td><td>3</td><td>9</td><td><div><input type="checkbox"/> New Corporate Strategy to be presented to Members - presented 16/7/24 at full council</div><div><input type="checkbox"/> Planning Member training externally facilitated</div><div>Audit Committee training to be investigated (CIPFA)</div><td>Ongoing</td><td>2</td><td>3</td><td>6</td><td>Head of Law and Democracy/ Monitoring Officer</td><td>Jun-25</td><td>Updated management controls and updated further actions</td><td><div></div></td><td></td><td></td></td></td>	3	4	12	<div><input type="checkbox"/> Member development programmes</div> <div><input type="checkbox"/> New Code of Conduct has been adopted which comes into force on 1/4/22, with training planned to familiarise members with its content</div> <div><input type="checkbox"/> Policies e.g. Safeguarding/Equalities and DBS checks</div> <div><input type="checkbox"/> Provision of chairing skills training</div> <div><input type="checkbox"/> Constitution, which is in the process of being reviewed to reflect new management structure</div> <div><input type="checkbox"/> Public consultation,</div> <div><input type="checkbox"/> Development of member enquiry system</div> <div><input type="checkbox"/> Training for members covering a range of areas including IT and Planning</div> <div><input type="checkbox"/> Buddying system in place for Elected Members to use</div> <div><input type="checkbox"/> Members bulletin</div> <div><input type="checkbox"/> Customer Service training and Political awareness training has been undertaken</div> <div><input type="checkbox"/> Member and officer training undertaken with Centre for Governance and Scrutiny November 2022</div> <div><input type="checkbox"/> Full review of members induction programme has been completed.</div> <div><input type="checkbox"/> Induction training delivered for new members during May to July 2023.</div> <div><input type="checkbox"/> SLT/Member workshops July, Sept. 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CR6	Reputation Damage	Our Borough - the place to be. Resourceful and Resilient.	<div><input type="checkbox"/> Litigation</div> <div><input type="checkbox"/> Breakdown in a partnership</div> <div><input type="checkbox"/> Failure to have regard to officers advice</div> <div><input type="checkbox"/> Whistle blowing</div> <div><input type="checkbox"/> Freedom of Information (Fol)</div> <div><input type="checkbox"/> Inconsistent decision making</div> <div><input type="checkbox"/> Poor Media Relations</div> <div><input type="checkbox"/> Poor communication</div> <div><input type="checkbox"/> Failure to provide or reduce services</div> <div><input type="checkbox"/> Poor performance</div> <div><input type="checkbox"/> Poor business planning and consideration of financial implications</div> <div><input type="checkbox"/> Intervention</div> <div><input type="checkbox"/> Loss of public confidence</div> <div><input type="checkbox"/> Ombudsman findings</div> <div><input type="checkbox"/> Court costs</div> <div><input type="checkbox"/> Quality of service affected</div> <div><input type="checkbox"/> Breakdown in a partnership</div> <div><input type="checkbox"/> Adverse publicity</div> <div><input type="checkbox"/> Lower public satisfaction level</div> <div><input type="checkbox"/> Time spent mitigating damage/rectifying the situation</div> <div><input type="checkbox"/> Low Morale</div> <div><input type="checkbox"/> Difficulties to recruit/staff retention</div> <div><input type="checkbox"/> Inadequate budget provision, inappropriate financial decisions made</div> <td>4</td> <td>4</td> <td>16</td> <td><div><input type="checkbox"/> Review of external communication by Heads of Service</div><div><input type="checkbox"/> Use of modern.gov</div><div><input type="checkbox"/> Whistle blowing and Anti Fraud and Corruption policies</div><div><input type="checkbox"/> Freedom of Information log</div><div><input type="checkbox"/> Qualified in house legal team</div><div><input type="checkbox"/> Officer complaints training & new complaints process</div><div><input type="checkbox"/> Performance reporting and Key Performance Indicators</div><div><input type="checkbox"/> Public and media consultation</div><div><input type="checkbox"/> Achieved accreditation for customer service excellence award</div><div><input type="checkbox"/> Communications Policy and Communications Plan in place</div><div><input type="checkbox"/> Online customer care training in place for all new staff and a separate module also in place for managers.</div><div><input type="checkbox"/> Partnership working eg Lightbulb & Local Plan</div><div><input type="checkbox"/> Marketing & Communications Manager</div><div><input type="checkbox"/> Social Media Policy</div><div><input type="checkbox"/> Service Standards</div><div><input type="checkbox"/> Project Comms Plans e.g. external communications regarding alternate weekly waste collection project.</div><div><input type="checkbox"/> Performance Review Plans</div><div><input type="checkbox"/> Standardised project appraisal and affordability approach as per Corporate Peer Review Action Plan built into new MTFS</div><div><input type="checkbox"/> Complaints handling and investigation training for all managers undertaken</div><div><input type="checkbox"/> Safety Risk assessments always consider reputational damage as a risk.</div><div><input type="checkbox"/> Anti Fraud Policy in place.</div><div><input type="checkbox"/> Good relationships built with media i.e. cemetery</div><div><input type="checkbox"/> Consultations conducted i.e budget</div><div>Recruitment pages revamped on Corporate website and Corporate Strategy published Aug 24</div><div>Staff Survey and Engagement group</div><td>2</td><td>2</td><td>4</td><td></td><td>Ongoing</td><td>2</td><td>2</td><td>4</td><td>Chief Executive</td><td>Jun-25</td><td>Updated further controls</td><td><div></div></td><td></td><td></td></td>	4	4	16	<div><input type="checkbox"/> Review of external communication by Heads of Service</div> <div><input 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Strategic Risk Register																						
Ref	Risk Definition	2019-2024	Root Cause:	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score			Existing Controls (sources of assurance)	Mitigated Risk Score			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score		
	What is the headline risk/issue?		What is the root cause or problem?		(no controls)				(with controls)													
			What could go wrong?																			
					Likelihood	Impact	Overall risk rating		Likelihood	Impact	Overall risk rating			Likelihood	Impact	Overall risk rating						
CR7	Effective utilisation of Assets/Buildings (non-housing)	Resourceful and Resilient	<div><input type="checkbox"/> Failure to follow Health and Safety</div> <div><input type="checkbox"/> Insurance/Public Liability</div> <div><input type="checkbox"/> Financial investment</div> <div><input type="checkbox"/> Contractor going into liquidation</div> <div><input type="checkbox"/> Political will</div> <div><input type="checkbox"/> Facility Management</div> <div><input type="checkbox"/> Depreciation</div>	<div><input type="checkbox"/> Loss of investment opportunities</div> <div><input type="checkbox"/> Loss of income</div> <div><input type="checkbox"/> Loss of capital</div> <div><input type="checkbox"/> Higher revenue costs</div> <div><input type="checkbox"/> Costs</div> <div><input type="checkbox"/> Death or injury</div> <div><input type="checkbox"/> Higher insurance premiums</div> <div><input type="checkbox"/> Reputation damage</div> <div><input type="checkbox"/> Public liability</div> <div><input type="checkbox"/> Personal liability for corporate team e.g. corporate manslaughter</div>	4	3	12	<div><input type="checkbox"/> Physical controls (e.g. Door Codes, fire alarms)</div> <div><input type="checkbox"/> Designated first aiders</div> <div><input type="checkbox"/> Capital Programme and HRA Business Plan - annual reiteration and regular monitoring</div> <div><input type="checkbox"/> Fixed Asset Register</div> <div><input type="checkbox"/> Annual valuation of property by external valuer</div> <div><input type="checkbox"/> Designated Health and Safety Officer</div> <div><input type="checkbox"/> Implementation of controls within Health and Safety Executive review</div> <div><input type="checkbox"/> Health and Safety risk assessments</div> <div><input type="checkbox"/> Designated Facilities Manager</div> <div><input type="checkbox"/> Accommodation Reviewed</div> <div><input type="checkbox"/> Health and safety assessments carried out on all buildings</div> <div><input type="checkbox"/> Move to Bushloe House to Brocks Hill complete</div> <div><input type="checkbox"/> Asset Management a theme as part of the Sustainability Programme</div> <div><input type="checkbox"/> Health and Safety Action Plan approved by full Council April 2023.</div> <div><input type="checkbox"/> Asset Review received end of November - Report to PFDC regarding disposal of assets.</div>	3	3	9	<div><input type="checkbox"/> Revision of Asset Management Policy and Capital Expenditure Plan</div> <div><input type="checkbox"/> Asset review</div> <div><input type="checkbox"/> Holistic Asset Management database/system purchased and timetabled for implementation. Roll out of the system has begun.</div> <div><input type="checkbox"/> Completion of the sale of Bushloe House and Oadby Pool site.</div> <div><input type="checkbox"/> Marketing all of our assets for hire to generate additional income to support the sustainability plan</div>	Ongoing	2	2	4	Head of Law and Democracy/ Monitoring Officer	Jun-25	Further Management controls updated.	<div></div>		
CR8	Regulatory Governance	Resourceful and Resilient	<div><input type="checkbox"/> New or changes to legislation</div> <div><input type="checkbox"/> Resources (staff)</div> <div><input type="checkbox"/> Failure to identify new legislation</div>	<div><input type="checkbox"/> Substantial fines e.g. Data Protection</div> <div><input type="checkbox"/> Judicial review</div> <div><input type="checkbox"/> Reputation</div> <div><input type="checkbox"/> Code of conduct</div> <div><input type="checkbox"/> Financial loss</div> <div><input type="checkbox"/> Cost orders</div> <div><input type="checkbox"/> Personal liability</div>	3	4	12	<div><input type="checkbox"/> Data Protection Policy and log</div> <div><input type="checkbox"/> Freedom of Information log</div> <div><input type="checkbox"/> Code of Conduct and training</div> <div><input type="checkbox"/> HR Induction</div> <div><input type="checkbox"/> Statutory Monitoring Officer</div> <div><input type="checkbox"/> Subscriptions (e.g. legal journals and LGA) and CPD of legal officers</div> <div><input type="checkbox"/> Prosecution Policy</div> <div><input type="checkbox"/> Purchased GDPR/DPA learning modules to be rolled out in the future.</div> <div><input type="checkbox"/> Appraisal training and 1-2-1 training has been rolled out. to all managers.</div> <div><input type="checkbox"/> New Social Housing Regulation Act 2023 strengthens the regulation regime associated with the Council as a social landlord. A full inspection by the regulator can be expected by end of 2026 - Housing Manager is preparing for mock-inspection during 2024.</div> <div><input type="checkbox"/> Building Safety Act 2022 places increased compliance responsibilities and scrutiny on Building Control and the construction industry generally and the Leicestershire Building Control Partnership has put in place an action plan to manage this risk</div> <div><input type="checkbox"/> Reviewed and improved HR induction approach.</div> <div><input type="checkbox"/> Key managers trained in undertaking investigations and Disciplinarys.</div> <div><input type="checkbox"/> Having Difficult Conversations rolled out to relevant managers.</div> <div><input type="checkbox"/> Building Control Partnership has been audited and shows no major area of concern.</div>	1	1	1	<div><input type="checkbox"/> Refresher training on GDPR/DPA to be completed by all.</div> <div><input type="checkbox"/> Resources in Housing Team to be focused around meeting the requirements of the new act.</div> <div><input type="checkbox"/> Mandatory Bullying Harassment and Dignity Respect training to be rolled out from June 2025</div>	<div><input type="checkbox"/> Summer 2025</div>	1	1	1	Head of Law and Democracy/ Monitoring Officer	Jun-25	Existing Control and further actions have been updated	<div></div>		
CR9	Failure to respond to a significant incident	Resourceful and Resilient	<div><input type="checkbox"/> Loss of staff</div> <div><input type="checkbox"/> Loss of ICT</div> <div><input type="checkbox"/> Loss of Building</div> <div><input type="checkbox"/> Loss of Key supplier</div> <div><input type="checkbox"/> Loss of facilities</div> <div><input type="checkbox"/> Loss of systems</div> <div><input type="checkbox"/> Act of God</div> <div><input type="checkbox"/> Adverse Weather</div> <div><input type="checkbox"/> Pandemic</div> <div><input type="checkbox"/> Adverse staff impact as a result of cost of living</div>	<div><input type="checkbox"/> Insurance – higher premiums</div> <div><input type="checkbox"/> Loss of essential services</div> <div><input type="checkbox"/> Adverse publicity</div> <div><input type="checkbox"/> Reputation damage</div> <div><input type="checkbox"/> Loss of public confidence</div> <div><input type="checkbox"/> Loss of income</div> <div><input type="checkbox"/> Financial damage</div> <div><input type="checkbox"/> Death and injury</div> <div><input type="checkbox"/> Litigation risks</div> <div><input type="checkbox"/> Insurance – higher premiums</div> <div><input type="checkbox"/> Loss of essential services</div> <div><input type="checkbox"/> Adverse publicity</div> <div><input type="checkbox"/> Loss of public confidence</div> <div><input type="checkbox"/> Financial damage</div> <div><input type="checkbox"/> Death and injury</div> <div><input type="checkbox"/> Litigation risks</div> <div><input type="checkbox"/> Staff unavailable after major incident</div> <div><input type="checkbox"/> large proportion of staff becoming ill</div>	4	4	16	<div><input type="checkbox"/> Insurance policies and annual review - new insurers from 1 Jan 2024</div> <div><input type="checkbox"/> Risk Management policies and procedures</div> <div><input type="checkbox"/> Membership of Local Resilience Forum</div> <div><input type="checkbox"/> Standby rota</div> <div><input type="checkbox"/> IT backup. Business Continuity Plans in place</div> <div><input type="checkbox"/> Community Engagement with Health professionals</div> <div><input type="checkbox"/> Agile Working Policy</div> <div><input type="checkbox"/> Coordination of Out of Hours Service</div> <div><input type="checkbox"/> Additional training from Leicestershire Resilience Partnership underway (incl power lose scenario)</div> <div><input type="checkbox"/> Business Continuity training exercise and refresh undertaken December 2022</div> <div><input type="checkbox"/> BC Plans refresh and incorporate into service plans</div> <div><input type="checkbox"/> SLT and CMT additional training scheduled with LRF</div> <div><input type="checkbox"/> Mighty Oak national power outage LRF Training exercise</div> <div><input type="checkbox"/> Brockshill project has incorporated business continuity improvements inc generator if power outage.</div> <div><input type="checkbox"/> New accident investigation form</div> <div><input type="checkbox"/> Refresher of Health and Safety Training</div> <div><input type="checkbox"/> Health and Safety face to face training for manual workers delivered.</div> <div><input type="checkbox"/> BCPs being reviewed; Implications from Martyn's Law have been considered.</div> <div><input type="checkbox"/> New insurance processes being rolled out to operational staff</div> <div><input type="checkbox"/> Foremost Security to carry out any Out of Hours calls for our assets.</div> <div><input type="checkbox"/> Emergency Centre resilience training taking place June 25</div> <div><input type="checkbox"/> Protect Training has now been carried out.</div> <div><input type="checkbox"/> SLT review of the flooding incident in January 2025, recording what went well and areas for improvement.</div>	2	3	6	<div><input type="checkbox"/> LRF training course attendance to be reviewed by SLT</div> <div><input type="checkbox"/> Further LRF training for new managers to be completed.</div> <div><input type="checkbox"/> RG & SB have completed 3 intro courses via the LRF (Intro to resilience, JESIP & On-Call Manager training, last training session on 26th June on documentation)</div> <div><input type="checkbox"/> JB to complete the above being arranged with LRF.</div> <div><input type="checkbox"/> 15 People have attended Rest Centre Training on 24/06/25</div> <div><input type="checkbox"/> Prevent training still to take place by end of 2025.</div>	Jun-25	2	3	6	Head of Law and Democracy/ Monitoring Officer	Jun-25	Existing controls uand further management actions are updated	<div></div>		

Strategic Risk Register																							
Ref	Risk Definition	2019-2024	Root Cause: What is the root cause or problem? What could go wrong?	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score (no controls)			Existing Controls (sources of assurance)	Mitigated Risk Score (with controls)			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score			
	What is the headline risk/issue?				Likelihood	Impact	Overall risk rating		Likelihood	Impact	Overall risk rating			Likelihood	Impact	Overall risk rating							
CR10	Organisational/ Transformational Change	Our Borough - the place to be. Resourceful and Resilient.	<div><div><div><div><div><div></div></div><div>Restructure</div></div><div><div><div></div></div><div>Transformational change</div></div><div><div><div></div></div><div>Transferable skills</div></div><div><div><div></div></div><div>Reduction in funding</div></div><div><div><div></div></div><div>Change in personnel</div></div><div><div><div></div></div><div>Change in the way the council delivers services</div></div><div><div><div></div></div><div>Redundancy</div></div><div><div><div></div></div><div>Less controls in place due to limited resources</div></div><div><div><div></div></div><div>Change in office location</div></div></div></div><div>Devolution/Local Government Reform</div></div>	<div><div><div><div><div><div></div></div><div>Redundancy</div></div><div><div><div></div></div><div>Staff morale</div></div><div><div><div></div></div><div>Staff retention</div></div><div><div><div></div></div><div>Change in working practices</div></div><div><div><div></div></div><div>Impact on quality of service</div></div><div><div><div></div></div><div>Legal implications</div></div><div><div><div></div></div><div>HR implications</div></div><div><div><div></div></div><div>Reputation damage/perception</div></div><div><div><div></div></div><div>Financial loss</div></div><div><div><div></div></div><div>Possible litigation</div></div><div><div><div></div></div><div>Increased fraud</div></div></div></div><div>Increased workload</div></div>	3	3	9	<div><div><div><div><div><div></div></div><div>Organisation review policy</div></div><div><div><div></div></div><div>Recruitment and selection policies and procedures</div></div><div><div><div></div></div><div>Union and staff consultation</div></div><div><div><div></div></div><div>Staff Wellbeing Group and Wellbeing Teams</div></div><div><div><div></div></div><div>Staff Health and Wellbeing Action Plan</div></div><div><div><div></div></div><div>Internal Audit</div></div><div><div><div></div></div><div>Staff newsletters</div></div><div><div><div></div></div><div>Monitoring and supervision of management/1:1's</div></div><div><div><div></div></div><div>Training and professional qualification support</div></div><div><div><div></div></div><div>Performance appraisal process</div></div><div><div><div></div></div><div>Formal induction programme</div></div><div><div><div></div></div><div>Comms plans for key projects - includes PR, Public, Staff and member and other stakeholder comms plans</div></div><div><div><div></div></div><div>Staff engagement on organisational culture and values as part of People Strategy undertaken</div></div><div><div><div></div></div><div>Introduction of live vacancy management plan with SLT</div></div><div><div><div></div></div><div>People Strategy approved by PFD 12/09/2023</div></div></div></div><div>Organisation Strategy update completed.</div><div>Clean & Green / Corporate Assets Service Review and Revs and Bens review underway /</div><div>Service changes post budget approval are well underway . Project Management approach has been refined; Joint SLT/CMT Meetings are being programmed into diaries focusing on finance and performance/ Sustainability Plan is a standing item on SLT agenda</div><div>Health</div><div>Wellbeing Action Plan agreed in Feb 2025</div><div>SLT</div><div>structure reviewed due to retirement, new structure in place from June 2025.</div></div>	3	2	6	<div><div><div><div><div><div></div></div><div>Organisation Strategy to be approved.</div></div><div><div><div></div></div><div>Service Reviews being undertaken.</div></div><div><div><div></div></div><div>Sustainability Plan Review /ongoing</div></div><div><div><div></div></div><div>Management plan developed and implemented for Waste Transformation.</div></div><div><div><div></div></div><div>Opportunities being considered for joint working with other local authorities.</div></div></div></div></div>	January 2025	<div><div><div></div></div><div>Ongoing</div></div>	2	2	4	Strategic Director	Jan-25	Existing controls updated for progress against budget/service implications and revised PPM approach and senior management meetings. Waste transformation project has been delivered within timescale. Agreement reached for Blaby DC to pay for additional days of IT support.			
CR11	Economy/ Regeneration	Resourceful and Resilient	<div><div><div><div><div><div></div></div><div>Further decline in the economy</div></div><div><div><div></div></div><div>BREXIT COVID Ukraine/Russia conflict and also energy costs crisis (uncertainty of cost impact)</div></div><div><div><div></div></div><div>Pooling/Unpooling of NNDR</div></div><div><div><div></div></div><div>Cost of living Crisis</div></div></div></div><div>Economic Regeneration Manager and Economic Development posts removed from establishment to enable savings to Council budget</div><div>Conflict in the Middle East could give further inflation rises (June 25)</div></div>	<div><div><div><div><div><div></div></div><div>Relocation (Business and Domestic)</div></div><div><div><div></div></div><div>Lack of inward investment</div></div><div><div><div></div></div><div>Increased demand for certain services e.g. benefits</div></div><div><div><div></div></div><div>Loss of value in public assets</div></div><div><div><div></div></div><div>Need to continually adapt/change</div></div><div><div><div></div></div><div>Conflicting pressures - decreased funding – increased demand</div></div><div><div><div></div></div><div>Spiral effect</div></div><div><div><div></div></div><div>Short term decision making – uncertainty</div></div><div><div><div></div></div><div>Increased autonomy leads to greater risk</div></div><div><div><div></div></div><div>Decrease in collection levels</div></div></div></div></div>	5	4	20	<div><div><div><div><div><div></div></div><div>Demand management of services that come under pressure as a result of decline in economy</div></div><div><div><div></div></div><div>Debt Recovery Policy in place</div></div><div><div><div></div></div><div>Local Council Tax and Business Rate Retention scheme in place</div></div><div><div><div></div></div><div>Contract monitoring of bailiffs</div></div><div><div><div></div></div><div>Paying out business grants to support local businesses during pandemic</div></div><div><div><div></div></div><div>Regular programme of business webinars to provide information and support to businesses</div></div><div><div><div></div></div><div>Monthly newsletter issued to businesses</div></div><div><div><div></div></div><div>Helping Hands - energy champion</div></div><div><div><div></div></div><div>Business microsite live and accessible via Council's website.</div></div><div><div><div></div></div><div>UKSPF Investment Plan 2022 to 2025 being implemented</div></div><div><div><div></div></div><div>Levelling Up bid developed in partnership with The University of Leicester and ready to submit if an opportunity arises. Currently supporting University in investigating a Heritage Lottery Fund bid</div></div><div><div><div></div></div><div>Capital Projects Sub-committee established</div></div><div><div><div></div></div><div>Cost of Living report to members sets our proposal to review discretionary rates relief which may provide additional relief to businesses.</div></div><div><div><div></div></div><div>Business Networking Event held 14/09/2023 - 80 businesses attended.</div></div><div><div><div></div></div><div>Business Improvement District - Phase feasibility completed and to be progressed during 2024</div></div><div><div><div></div></div><div>Horsewell Lane Business Case agreed by Members - approach made to Homes England for potential funding. Awaiting details of new Government funding available.</div></div><div><div><div></div></div><div>Discussions with members held regarding developing a 25/26 programme for the UKSPF funding. UKSPF programme has been signed off and is progressing well.</div></div><div>In</div><div>order to mitigate the risk of there being no single manager of the UKSPF programme and to provide advice to businesses in the Borough funding has been identified to recruit an Economic Dev Mgr, appointed June 2025.</div><div>Qtr 3 and 4 monitoring submitted on time.</div></div></div></div>	4	4	16	<div><div><div><div><div><div></div></div><div>Monitor progress against ER Strategy & UKSPF Programme.</div></div><div><div><div></div></div><div>Project review meetings undertaken with all UKSPF funded projects to ensure outcomes and expenditure will be achieved by 31/03/25.</div></div></div></div></div>	Ongoing	2	3	6	Head of Built Environment	Jun-25	24/25 Q3 and 4 UKSPF monitoring due by the end of April 2025. In addition, a programme for spending 25/26 UKSPF funding has been developed and will be reported to Government. Econ Dev manager likely to be in post in Q1 of 25/26.				
CR12	Increased Fraud	Resourceful and Resilient	<div><div><div><div><div><div></div></div><div>Dilution of internal controls due to less staff</div></div><div><div><div></div></div><div>Increase in unemployment</div></div><div><div><div></div></div><div>Reduction in benefits</div></div><div><div><div></div></div><div>Inflation</div></div><div><div><div></div></div><div>Debt</div></div><div><div><div></div></div><div>Opportunity</div></div><div><div><div></div></div><div>Sub-letting of Council properties</div></div></div></div></div>	<div><div><div><div><div><div></div></div><div>Homelessness, poverty and social deprivation</div></div><div><div><div></div></div><div>Financial loss</div></div><div><div><div></div></div><div>Resources of the authority to investigate fraud issues</div></div><div><div><div></div></div><div>Reputation impact</div></div><div><div><div></div></div><div>Litigation</div></div></div></div></div>	3	3	9	<div><div><div><div><div><div></div></div><div>Internal and External Audit</div></div><div><div><div></div></div><div>Financial Regulations</div></div><div><div><div></div></div><div>Segregation of Duties</div></div><div><div><div></div></div><div>Supervision and Management</div></div><div><div><div></div></div><div>Investigation and disciplinary procedures</div></div><div><div><div></div></div><div>Litigation</div></div><div><div><div></div></div><div>Anti Fraud and Corruption Policy</div></div><div><div><div></div></div><div>Whistle blowing process</div></div><div><div><div></div></div><div>Tone from the top - no tolerance</div></div><div><div><div></div></div><div>Budgetary Control</div></div><div><div><div></div></div><div>Participation in National Fraud Initiative</div></div><div><div><div></div></div><div>Transaction review (e.g. invoices/mileage)</div></div><div><div><div></div></div><div>All related Policies to be reviewed and an annual rolling training programme to be implemented.</div></div><div><div><div></div></div><div>Anti Fraud Policy reviewed and approved PFD July 2023</div></div><div><div><div></div></div><div>Fraud Awareness Training rolled out.</div></div></div></div></div>	2	3	6	<div><div><div><div><div><div></div></div><div>Update of anti-fraud activities to Audit Committee</div></div></div></div></div>	July 2025	2	2	4	Chief Financial Officer	Jun-25	Updated to include Audit Committee Report July 2025				

Strategic Risk Register																						
Ref	Risk Definition	2019-2024	Root Cause:	Consequence /effect: What could occur as a result, how much of a problem would it be?	Inherent Risk Score			Existing Controls (sources of assurance)	Mitigated Risk Score			Further management actions/controls	Target Implementation date for further mgt actions	Target Score with further management actions/			Risk Owner	Review Date	Review Commentary	Direction of Travel of mitigated risk score		
	What is the headline risk/issue?		What is the root cause or problem?		(no controls)				(with controls)													
			What could go wrong?		Likelihood	Impact	Overall risk rating		Likelihood	Impact	Overall risk rating			Likelihood	Impact	Overall risk rating						
CR13	Cyber Threat/Security, Cyber security is seen as an ICT risk and not a corporate risk that needs to be managed and monitored by senior management.	Resourceful and Resilient	Cyber threats are increasing on a worldwide basis, with criminals known to target public sector organisations in an attempt to obtain personal data on a significant scale. The Council is thus at high risk of being attacked.	<div><input type="checkbox"/> Financial loss</div> <div><input type="checkbox"/> Resources of the authority to investigate fraud issues</div> <div><input type="checkbox"/> Reputation impact</div> <div><input type="checkbox"/> Litigation, Loss of data, breaches of GDPR, SMT lack of oversight</div>	4	5	20	<div><input type="checkbox"/> Cyber security is always the highest priority, and at all times. This is considered with any support ticket, change request or new digital implementation and must be approved through change .</div> <div>other IT Team is reviewing its security policies to ensure they are in line with the latest cyber security guidance and ensuring the organisation operates in a safe yet effective way. This includes managing the IT infrastructure, but also with how staff function, use equipment and undertake regular security training within their respective roles.</div> <div>other Council has now implemented a duplicate firewall, for added security and resilience to the Councils network. This further protects us, but also gives us dual connectivity so we are not restricted by a single point of failure in a key security component.</div> <div>other Council has a BCP but this will continuously be checked and updated to ensure we are as prepared as possible for emergency situations (if it were to arise).</div> <div>member briefing completed to advise of current security features and their responsibility as stakeholders to the authority.</div> <div>all Staff have undertaken their yearly security training (Q1 2024).</div> <div>oPSN compliance has been achieved and certification received in Q1 of 2024. The Council is currently submitting information for its 'Cyber essentials' certification as well – both giving assurance the organisation is as secure as reasonably possible.</div> <div>Member training delivered in September 24 with a mop up session planned for January 2025 and further sessions as needed</div> <div>Cyber Essentials of Excellence Assessment - shows high levels of protection.</div> <div>Commencement of 2 factor authentication from June 2025</div>	2	3	6	oWe are looking to use the cyber security attack on Leicester City Council as a 'lessons learnt' process to ensure we improve and stay ahead of the threats. This is looking to be initiated via the Resilience partnership	Ongoing	2	3	6	Head of Customer Service and Transformation	Jun-25	As part of cyber security review and changes in IT Team structure, all existing controls have been updated.	<div></div>		
CR14	19. Staff lone working including out of hours	Our Borough - the place to be. Resourceful and Resilient.	Increased risk of staff harm from violence & aggression from service users.	Staff could suffer physical and emotional harm, which could lead to long periods of sick leave.	4	5	20	<div><input type="checkbox"/> Council has Lone Worker Policy & Procedure</div> <div><input type="checkbox"/> Equipment is available such as panic alarms & body cameras</div> <div><input type="checkbox"/> Records are maintained of challenging residents which are reviewed prior to visits taking place</div> <div><input type="checkbox"/> Relationship with local Police, who will attend visits where there is a potential for aggression & violence</div> <div><input type="checkbox"/> Training session undertaken for lone working staff on (pick Protect) system</div> <div><input type="checkbox"/> Contract ended for Solo Protect and moved to Pick Protect.</div> <div><input type="checkbox"/> Risk Assessment for appointment hubs included consideration of lone working and guidance provided.</div> <div>Head of SC&T and H&S officer reviewed the Customer Alert System including the monitoring of lone working procedures.</div>	2	3	6	Moving to Foremost Security from 1/4/25 to mitigate risk to staff on call outs as this function will be carried out by the security company. <div>Significant assurance on the 24/25 audit and continuous monitoring of lone working.</div>	Jun-25	2	3	6	Head of Law and Democracy/ Monitoring Officer	Jun-25	Further management controls updated	<div></div>		

Roll out of Multi Factor Authentication across the Council