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Dear Members

Audit and Accounts Committee

A meeting of the Audit and Accounts Committee will be held in the **Walton Room, Civic Centre, Riverside, Stafford on Wednesday 25 November 2026 at 5.00pm** to deal with the business as set out on the agenda.

Please note that this meeting will be recorded.

Members are reminded that contact officers are shown in each report and members are welcome to raise questions etc in advance of the meeting with the appropriate officer.

Head of Law and Governance

AUDIT AND ACCOUNTS COMMITTEE

25 NOVEMBER 2026

Chair - Councillor R A James

AGENDA

1 Minutes of 29 September 2026 as circulated and published on 20 October 2026.

2 Apologies

3 Officers' Reports

		Page Nos
ITEM NO 3(a)	**Auditor's Annual Report** AZETS	To Follow
ITEM NO 3(b)	**Audit Build Back Plan** AZETS	To Follow
ITEM NO 3(c)	**Governance Improvement Plan - Progress Report for Quarter 2 2026-27** HEAD OF BUSINESS SUPPORT AND ASSURANCE	3 - 16
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Chair - Councillor R A James

J A Barron	A R McNaughton
M G Dodson	A Nixon
R A James	D P Rouxel

Agenda Item 3(c)

Governance Improvement Plan - Progress Report for Quarter 2 2026-27

Committee: Audit and Accounts Committee

Date of Meeting: 25 November 2026

Report of: Head of Business Support and Assurance

Portfolio: Resources Portfolio

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1 Purpose of Report

1.1 To advise Members on the progress in the delivery of the Governance Improvement Plan at the end of Quarter 2 2026-27.

2 Recommendations

2.1 To note the progress made in the delivery of the Governance Improvement Plan set out at **APPENDIX 1**.

Reasons for Recommendations

2.2 The information allows the Audit and Accounts Committee to ensure that all appropriate steps are being taken to improve the Council's governance arrangements.

3 Key Issues

3.1 The findings of the annual review of the Council's governance arrangements for 2025-26 were reported to the Audit and Accounts Committee on 25 June 2026. The report included an action plan to address the findings.

3.2 This report sets out the progress made in delivering the action plan up to the end of quarter 2 2026/27. Of the 27 actions due to be completed, 19 have been completed or are in progress.

4 Relationship to Corporate Priorities

4.1 Good governance and financial management specifically links to the Council's priority to be "an effective Council" and the objectives relating to:

- Value for money to local taxpayers.
- Good governance across the Council.

It also underpins the delivery of the Council's other corporate priorities and operational services.

5 Report Detail

5.1 The Council has a statutory responsibility to undertake an annual review of the effectiveness of its governance arrangements, which includes the system of internal control and to publish an "annual governance statement" with the annual accounts.

5.2 In reviewing the effectiveness of the governance arrangements, the Council has to identify any 'significant governance issues' and what action will be taken to address these. There is no single definition as to what constitutes a 'significant governance issue' and judgement has to be exercised. Factors used in making such judgements include:

- the issue has seriously prejudiced or prevented achievement of a principal objective;
- the issue has resulted in a need to seek additional funding to allow it to be resolved, or has resulted in significant diversion of resources from another service area;
- the issue has led to a material impact on the accounts;
- the Chief Internal Auditor has reported on it as significant, for this purpose, in the Internal Audit Annual Report;
- the issue, or its impact, has attracted significant public interest or has seriously damaged the reputation of the Council;
- the issue has resulted in formal action being taken by the Chief Financial Officer and/or the Monitoring Officer.

5.3 The Annual Governance Statement (AGS) for 2025-26 was approved by the Audit and Accounts Committee on 25 June 2026. The statement sets out details of the review undertaken, the "significant governance issues" identified and the actions to be taken to address them. This includes the outstanding actions identified during the VFM review undertaken by the External Auditors.

5.4 This report provides an update on the progress in delivering the planned actions at the end of quarter 2 (30 September 2026). Details of the progress is given at **APPENDIX 1** and overall performance is summarised in the table below:

Table 1: Summary of Progress - Governance Improvement Plan

			Not Applicable	Total Actions
Action Complete	Work in progress but behind schedule	Work due but not yet started		
7	**12**	**6**	**2**	**27**

5.5 At the end of quarter 2, of the 27 actions due for delivery 70% are in progress or have been completed.

5.6 Progress continues to be made across the improvement plan but this has been hampered by a lack of capacity and competing priorities, with key officers supporting the delivery of major projects such as regeneration of the town centre, tree management improvement plan etc. LGR also had an impact in the first part of Q2 with preparatory work well underway, before work on this was paused in September. A business support post is being recruited to in Q3 which should provide additional capacity to support work on a number of the actions in the improvement plan.

6 Implications

6.1 Financial

There are no direct financial implications arising from the report.

6.2 Legal

None

6.3 Human Resources

None

6.4 Risk Management

A failure to deliver good governance, which includes the delivery of the improvement plan, has been included in the Council's Strategic Risk Register.

6.5 Equalities and Diversity

None

6.6 Health

None

6.7 Climate Change

None

7 Appendices

Appendix 1: Governance Improvement Plan - Summary of Progress

8 Previous Consideration

None

9 Background Papers

Report to Audit and Accounts Committee 25 June 2026

Contact Officer:	Judith Aupers
Telephone Number:	01543 464411
Ward Interest:	All
Report Track:	Audit and Accounts Committee 25 November 2026 (Only)
Key Decision:	No

Appendix

Governance Improvement Plan - Progress Report

Summary of Progress at 30 September 2026

			**Not Applicable**	**Total Number of Actions Due to End of Quarter 2**
Action Complete	**Work in progress but behind schedule**	**Work due but not started**	**N/A**	
7	**12**	**6**	**2**	**27**

Commentary on Progress:

Progress continues to be made across the improvement plan but this has been hampered by a lack of capacity and competing priorities, with key officers supporting the delivery of major projects such as regeneration of the town centre, tree management improvement plan etc.

LGR also had an impact in the first part of Q2 with preparatory work well underway, before work on this was paused in September.

A business support post is being recruited to in Q3 which should provide additional capacity to support work on risk management and procurement (contracts register).

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
1	**Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law**				
1.1	**Behaving with Integrity** - Code of Conduct for Employees and Values to be rolled out across the Council and awareness training provided	Head of Business Support and Assurance	Rollout in Quarter 1	Code of Conduct and Values have been launched via staff briefings, weekly notices and email to service managers.	✓
			Training in Quarter 2	Training on Code of Conduct launched as part of new learning & development portal in Q2	✓
1.2	**Ethical Values** - Update the Anti-Fraud and Bribery Framework and the Confidential Reporting Framework (External Audit - Significant Recommendation 2)	Chief Internal Auditor & Risk Manager	Completed April 2026	Complete	✓
1.3	**Ethical Values** - Develop a fraud risk register (Outstanding action from 25/26)	Chief Internal Auditor & Risk Manager	Quarter 2	Work is underway on developing a fraud risk register. Input is awaited from services across the Council	▲
1.4	**Ethical Values** - declaration of conflict of interests - awareness to be raised and annual review to be built into Employee Review process	Head of Business Support and Assurance/HR Manager	Quarter 1 - awareness raising	Email sent to senior managers raising awareness of update Code of Conduct	✓
			Quarter 2 - Employee Review process	Reminder included in the updated employee review template. This has been approved by Leadership Team and will be launched in Q3. Training has also been included in the new Learning and Development Portal - launched in Q2	✓

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
1.5	**Respecting the rule of law -** managers checks on compliance with the law and local policies/guidance needs to be evidenced. Guidance on this to be issued	Head of Business Support and Assurance/Chief Internal Auditor & Risk Manager	Quarter 3		
2	**Ensuring openness and comprehensive stakeholder engagement**				
2.1	Openness - Checklist to be introduced to ensure that Legal, Financial and HR implications in committee reports are completed and signed off by the relevant professional officers	Head of Law and Governance	Quarter 2	A checklist has been drafted. It is intended to finalise and issue this in Q3	
2.2	Reports which are not coming to Leadership Team for consideration prior to going to Cabinet, Council etc must be identified and agreement reached in advance 0 to be embedded into sign-off checklist (action above)	Leadership Team	Quarter 2	The report checklist will require authorisation by 2 out of the 3 statutory officers to fast track any reports directly to Cabinet/Council where the item is urgent	
2.3	Engaging with Stakeholders - plan of key consultations for next 2 years to be developed	Communications Manager	Quarter 2 – dependent on Leadership Team completing work plans	The workplans have not been finalised yet. However, work has commenced on a Consultation and Engagement Framework which will support the delivery of this work going forwards.	
3.	**Defining the vision and outcomes for the local area and determining the actions necessary to achieve the intended outcomes**				
3.1	**Ensuring VFM** - Put in place a formal SLA with Staffs County	Head of Business Support & Assurance	**No further action**	It was agreed not to progress this due to the advent of LGR.	

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
	Council re the shared procurement arrangements External Audit - Other Recommendation 4)			Now LGR has been paused the position on this will be reviewed. It will depend on how long LGR is paused.	
3.2	**Ensuring VFM** - Provide regular reports to Members on single tender waivers. Waivers to be reported on to the Responsible Council Scrutiny Committee quarterly. External Audit - Other Recommendation 4)	Head of Law and Governance	Quarter 1 onwards Revised to Quarter 4	Following review of options as to how best to report on waivers and collate the information needed, it has been decided to produce an annual report for the first year and review future report cycle after this	N/A
3.3	**Ensuring VFM** - Update the contracts register and ensure it is compliant with transparency requirements - to be updated as part of the preparations for LGR. This will also include the development of a plan of those contracts which need to be re-tendered in the next 2 years. External Audit - Other Recommendation 4)	Head of Business Support and Assurance and Leadership Team	Quarter 1	Work has not progressed during Q2 due to other work taking priority. But a new post is being recruited to which will help with this work.	
3.4	**Fair access to services** - Equality, Diversity and Inclusion Policy, Equality Impact Assessment Template and guidance to be updated and training provided	Head of Business Support and Assurance and HR Manager	Quarter 2	Work is underway on reviewing the policy and Equality Impact Assessment template. Aiming to finalise this in Q3 for approval by Leadership Team.	

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
4.	**Determining the interventions necessary to achieve the intended outcomes**				
4.1	**Performance Management** - Develop a data quality policy or similar process for providing assurance on KPIS as part of performance management reporting (External Audit - Other Recommendation 3)	Head of Business Support and Assurance	**No further action**	Agreed not to progress this due to limited capacity and LGR. Now LGR has been paused the position on this will be reviewed. It will depend on how long LGR is paused.	
4.2	Develop work plans for all Heads of Service for the next 2 years to manage the lead up to LGR. To include the development of a performance reporting framework for Leadership Team (Outstanding action from 25/26)	Deputy Chief Executive (Resources) and Deputy Chief Executive (Place)	Quarter 1	Draft work plans and delivery plans have been prepared. These have been reviewed and feedback to be given to Heads of Service in Q3	
4.3	Review of service delivery information (KPIs) and approach to service improvements to identify what information is being collected and to assess and fill any key gaps.	Head of Business Support and Assurance and Leadership Team	Quarter 3		
4.4	Facilitated session with Leadership Team to progress developing a culture of ownership and accountability.	Deputy Chief Executive (Resources) and S151 Officer and Head of Business Support and Assurance	Quarter 3		

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
4.5	Provide training for key officers (LT, Service Managers and relevant Principal Officers/Team Leaders) on project management. (Outstanding action from 25/26)	Deputy Chief Executive (Resources) and S151 Officer and Head of Business Support and Assurance	Quarter 2	This action has not been progressed due to other work taking priority. It has been rescheduled for Q4	
5.	**Developing the entity's capacity, including the capability of its leadership and the individuals within it**				
5.1	Statutory Officer (Golden Triangle) meetings to be formally established with an agenda designed to cover governance issues	Deputy Chief Executive - Resources	Quarter 1	These have continued to place at ad hoc intervals during Q1 and Q2 but there are plans in place to formalise the meeting from Q3 onwards	
5.2	Employee induction process to be refreshed	HR Manager	Quarter 3		
5.3	Employee review process to be refreshed and relaunched	HR Manager	Quarter 2	The employee review process has been refreshed and will be launched in early Q3	
5.4	Complete review of hybrid working and develop a hybrid working policy. (Outstanding action from 25/26)	Head of Business Support and Assurance and HR Manager	Quarter 2	The review of the hybrid trial has been completed and the way forward agreed. Hybrid working policy to be drafted in Q4.	
6.	**Managing risks and performance through robust internal control and strong public financial management**				
6.4	**Risk Management** • Put in place directorate/departmental risk registers for all service areas	Head of Business Support and Assurance, Chief Internal Auditor & Risk	Quarter 2	Work on the departmental risk registers has not progressed due to a lack of capacity and other work taking priority. A discussion has taken place at	

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
	• Risk registers to be subject to regular review to ensure mitigating actions are being taken - to be done quarterly • Process to be put in place to escalate risks to the strategic risk register where appropriate - and significant risks identified from the quarterly reviews will be reported to Leadership Team for inclusion in the Strategic Risk Register (External Audit - Other Recommendation 2)	Manager and Leadership Team		Leadership Team to move this work forward in Q3	
6.5	Deliver the health & safety action plan which aims to embed a pro-active Health and Safety culture. The key actions include: • Update the overarching Health and Safety Policy	Head of Business Support and Assurance and Chief Internal Auditor & Risk Manager	Quarter 2	Health and Safety policy has been updated and is due to come to Leadership Team for approval in Q3	
	• Deliver targeted training to Leadership Team and Managers		Quarter 2	Training will follow once the updated Health and Safety policy has been approved. Now planned for Q4	
	• Determine a programme for reviewing and updating H&S policies		Quarter 3		

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
6.1	**Financial Management** - Ensure adequate capacity in the Finance Team - efforts will continue to recruit to vacancies in the Finance Team and/or to continue to use agency staff where appropriate. Ensure that budget holders receive formal financial monitoring reports – it is unlikely that the resourcing situation will improve sufficiently to increase reporting from half yearly to quarterly. Produce draft financial statements in line with statutory requirements and work with external auditors to deliver the audits effectively (External Audit - Significant Recommendation 1)	Deputy Chief Executive (Resources)	Quarter 2 - End of Summer 2026	Agency staff continue to be used to fill vacant posts but expecting a new starter in Q3. P6 monitoring reports are being prepared Draft financial statements have been produced and published	  
6.2	**Financial Management** - Review the need to implement further savings ahead of LGR given the potential funding gaps identified in26/27 and 27/28 as a result of changes to the financial settlement after the MTFS and 26/27 budgets were approved in January 26 (External Audit - Other Recommendation 1)	Deputy Chief Executive (Resources)	**No further action**	Agreed not to take any further action due to the high uncertainty around the settlement and the previous late interventions by central government to ensure no decrease in core funding. There are sufficient reserves in place to be able to prudently adopt this approach should central government not change the current settlement amounts.	

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
6.3	Review of Financial Regulations and training for managers (Outstanding action from 2025/26)	Deputy Chief Executive (Resources) and S151 Officer	Quarter 2	Not progressed due to work on LGR and Regeneration Schemes taking precedence. Will now be done in Q1 27/28 due to budget taking precedence in Q3/4	
6.6	Develop a structured approach/framework to the management of corporate assets	Head of Housing and Corporate Assets and Corporate Asset Manager	Quarter 4		
6.7	**Assurance and Scrutiny** - Development of Assurance Model, to include: • Annual Assurance Report for Health and Safety	Head of Business Support and Assurance and Chief Internal Auditor & Risk Manager	All rescheduled to Q4 • Quarter 2	Further consideration has been given to the timing of the production of assurance reports; these will now be completed in Quarter 4 in readiness for the Annual Governance Statement for 2026/27.	N/A
	• Annual Assurance Report for Technology (Outstanding action from 2025/26) • Heads of Service Assurance Statements		• Quarter 1 • Quarter 1		
6.9	**Data and IT Security -** AI policy to be developed	Technology Manager	Quarter 2	Guidance on the use of AI has been included in the updated draft of the Technology Security and Acceptable Use Policy. This is due to go to Leadership Team for approval in Q3	

Appendix

No	Action	Lead Officer	Timescale	Progress Update	Rating
6.10	**Data and IT Security** - Ensure that annual refresher training is undertaken	Technology Manager/ Data Protection Officer	Quarter 4		
7.	**Implementing good practices in transparency, reporting and audit to deliver effective accountability**				
7.1	Develop a lessons learnt approach eg from projects and complaints. Initial discussion to be held with Leadership Team to establish any current best practice and build on this	Head of Business Support and Assurance and Leadership Team	Quarter 3		
8.	**General/Other**				
8.1	Training and reminders for managers on good governance and key components of the framework (Outstanding action from 2025/26)	Deputy Chief Executive (Resources), Head of Business Support and Assurance and Head of Law and Governance	Quarter 2	Work is in progress to develop a suite of screensavers, which will be rotated, to remind all staff of key elements of the Council's governance framework. The first phase will be launched in Q3 and will include: • Code of Conduct • Values • Declaration of Interests • Health and Safety • Speaking Up • Data Protection • IT Security • Safeguarding	

Agenda Item 3(d)

Internal Audit Update - October 2026

Committee: Audit and Accounts

Date of Meeting: 25 November 2026

Report of: Chief Internal Auditor and Risk Manager

Portfolio: Resources Portfolio

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1 Purpose of Report

1.1 To present to the Audit and Accounts Committee for information a progress report on the work of Internal Audit up to 31 October 2026.

2 Recommendations

2.1 That the Committee considers the progress report.

Reasons for Recommendations

2.2 The Audit and Accounts Committee have responsibility for monitoring the work of Internal Audit and the Council's risk, control and governance arrangements.

3 Key Issues

3.1 Attached is a progress report showing the audits which have been issued between 1 April and 31 October 2026.

4 Relationship to Corporate Priorities

4.1 The system of internal controls reviewed by Internal Audit is a key element of the Council's corporate governance arrangements which cuts across all corporate priorities. Management are responsible for the control environment and should put in place policies, procedures and controls to help ensure that the system is functioning appropriately. Internal Audit work primarily supports the Effective Council objective.

5 Report Detail

5.1 This report is a summary of the Internal Audit work between 1 April 2026 and 31 October 2026; full details are given in **APPENDIX 1**.

5.2 The report is a snapshot view of the areas at the time that they were reviewed and does not necessarily reflect the actions that have been or are being taken by managers to address the weaknesses identified. The inclusion or comment on any area or function in this report does not indicate that the matters are being escalated to Members for further action. Internal Audit routinely follow-up the recommendations that have been made and will bring to the attention of the committee any relevant areas where significant weaknesses have not been addressed by managers.

5.3 The table below gives a summary of the level of assurance for each of the audits completed since the last update. More detailed information on each of the reports issued is contained in **APPENDIX 2**.

Number of Audits	Assurance	Definition
0	**Substantial** ✓	All High (Red), Medium (Amber) and Moderate (Yellow) risks have appropriate controls in place, and these controls are operating effectively.
2	**Partial** ▲	One or more Moderate (Yellow) risks are lacking appropriate controls and/or controls are not operating effectively to manage the risks. Prompt action is required by management to address the weaknesses identified in accordance with the agreed action plan.
0	**Limited** !	One or more Medium (Amber) risks are lacking appropriate controls and/or controls are not operating effectively to manage the risks. Prompt action is required by management to address the weaknesses identified in accordance with the agreed action plan.
0	**No Assurance** ✖	One or more High (Red) risks are lacking appropriate controls and/or controls are not operating effectively to manage the risks. Immediate action is required by management to address the weaknesses identified in accordance with the agreed action plan.

Number of Audits	Assurance	Definition
0	**N/A**	Audit Work and Consultancy Reports which have not been given an Assurance

5.4 **APPENDIX 3** lists the audits that were in progress but had not been completed to draft report stage by the end of the reporting period.

5.5 **APPENDIX 4** shows information relating to follow-ups.

5.6 It is pleasing to report that the CRM System (Goss) has improved from Limited to Partial Assurance at the time of the follow-up. Work is still required to improve the level of assurance to Substantial.

5.7 S106 Agreements and Projects and Licensing remain Partial Assurance, with further work required to fully implement the remaining agreed actions.

5.8 Following a request at the last Audit Committee a list of all audit areas which are currently at Limited or Partial Assurance has been attached for Memberss information at **APPENDIX 5.**

5.9 The current indicative list of areas for review in 2026-27 which have not been started is contained in **APPENDIX 6**.

6 Implications

6.1 Financial

None

6.2 Legal

None

6.3 Human Resources

None

6.4 Risk Management

None

6.5 Equalities and Diversity

None

6.6 Health

None

6.7 Climate Change

None

7 Appendices

Appendix 1: Progress Monitoring - 1 April 2026 to 31 October 2026

Appendix 2: Audits Completed - 1 September 2026 to 31 October 2026

Appendix 3: Audits in Progress - October 2026

Appendix 4: Follow-ups Completed - 1 September 2026 to 31 October 2026

Appendix 5: Audit Areas with Limited and Partial Assurance

Appendix 6 Provisional Audit Plan Work for 2026-27 Not Yet Started

8 Previous Consideration

None

9 Background Papers

None

Contact Officer:	Stephen Baddeley
Telephone Number:	01543 464415
Ward Interest:	None
Report Track:	Audit and Accounts 25 November 2026 (Only)
Key Decision:	No

Appendix 1

Progress Monitoring - 1 April 2026 to 31 October 2026

Audits Completed Year to Date	Audits In Progress
4	8

The completed and in-progress figures include audits carried forward from the 2025-26 Audit Plan

Level of Assurance	No Assurance	Limited	Partial	Substantial	N/A
Number of Audits Issued in Year to date	0	0	3	0	1

N/A is where the nature of the review did not enable an opinion to be issued on the area under review. This is normally where the focus is narrow or where a project is at an early stage of progress.

Included in the 4 audits above are the 2 reports issued since the previous progress update (August 2026). More detail is contained in Appendix 2 for these reports.

Level of Assurance	No Assurance	Limited	Partial	Substantial	N/A
Number of Audits Issued since last update	0	0	2	0	0

Appendix 2

Audits Completed - 1 September 2026 to 31 October 2026

Audit	Head of Service	Status	Number of High Recommendations	Number of Medium/Moderate Recommendations	Assurance	Comments and Key Issues
Land Charges Transfer to Land Registry Project	Regulatory Services	Final	0	1	Partial ▲	• There is still a need to establish a full project plan and process to follow. It is recognised that the absence of a clear timescale from HM Land Registry is part of the reason this is not in place.
Private Sector Housing	Regulatory Services	Final	0	3	Partial ▲	• Not all supporting evidence was retained on file as part of the HMO licensing process. This included an absence of evidence to ensure conditions imposed on the licence have been followed. • There was no effective monitoring of overdue inspections of HMOs

Audit	Head of Service	Status	Number of High Recommendations	Number of Medium/Moderate Recommendations	Assurance	Comments and Key Issues
						• There was a lack of comprehensive performance monitoring for Private Sector Housing activities

Appendix 3

Audits in Progress - October 2026

Audit	Head of Service
Delivery of Planning Review Outcomes (Deferred 2025-26)	Economic Development and Planning
Disabled Facilities Grants County Assurance	Wellbeing
CCTV	Wellbeing
SBC Leisure Contract	Wellbeing
Waste Management Contracts	Operations
Housing Benefits	DCE Resources
Fleet Management Compliance (Deferred 2025-26)	Operations
Contracts and Contract Variation Management	Corporate

Appendix 4

Follow-ups Completed - 1 September 2026 to 31 October 2026

Audit	Head of Service	Original Assurance	Recommendations Implemented	Recommendations In Progress	Recommendations Not Implemented	Total	Revised Assurance	Comments/Key Issues
CRM Application (GOSS)	Business Support and Assurance	Limited !	2	1	0	3	Partial ▲	• There was still a need to develop a formal policy for user authentication for the citizen facing services
S106 Agreements and Projects (4th Follow-up)	Economic Development and Planning	Partial ▲	0	2	0	2	Partial ▲	• There remains a need to review procedures, configure the Planning System to enforce completion of the s106 marker and ensure Legal supply s106 documentation. • Furthermore the revised procedures still require clear allocation of roles and responsibilities to relevant posts/teams.

Audit	Head of Service	Original Assurance	Recommendations Implemented	Recommendations In Progress	Recommendations Not Implemented	Total	Revised Assurance	Comments/Key Issues
Licensing	Regulatory Services	Partial ▲	1	0	3	4	Partial ▲	There was a need to: • update and develop income reconciliation and collection processes. • develop a structured reporting framework for management. • develop a risk assessed compliance monitoring regime for licences

Appendix 5

Audit Areas with Limited and Partial Assurance

Limited Assurance

Audit	Original Audit Date	Head of Service
Property Management and Rentals	**2023-24**	Housing and Corporate Assets
Closed Churchyards	**2025-26***	Operations
Mobile Device Management	**2025-26***	Business Support and Assurance
Remote Working	**2025-26***	Business Support and Assurance

* Audit not yet due a follow-up

Partial Assurance

Audit	Original Audit Date	Head of Service
Staff Expenses	2022-23	Business Support and Assurance
Project Governance Arrangements	2022-23	Business Support and Assurance
Landscape/Leisure Projects	2023-24	Operations
Pest and Dog Control	2023-24	Operations/Regulatory Services
Environmental Protection and Pollution Control	2023-24	Regulatory Services
s106 Agreements and Projects	2024-25	Economic Development and Planning
Tree Management (SBC)	2024-25	Operations
Tree Preservation orders	2024-25	Operations
Commercial Activities	2024-25	Operations
Food Safety and Inspections (SBC)	2024-25	Regulatory Services
Homelessness and Housing Options	2024-25	Wellbeing
Website Security	2024-25	Business Support and Assurance
Civil Contingencies	2025-26	Regulatory Services
Licensing	2025-26	Regulatory Services
Payroll (Variations to Pay and Deductions)	2025-26	Business Support and Assurance
Customer Relationship System (GOSS)	2025-26	Business Support and Assurance

Audit	Original Audit Date	Head of Service
Development Management - Applications and Validations	2025-26*	Economic Development and Planning
Planning - Determinations and Notifications	2025-26*	Economic Development and Planning
Debtors	2025-26*	DCE Resources
Civica Finance	2025-26*	DCE Resources
NNDR	2025-26*	DCE Resources
Purchasing Cards	2025-26*	DCE Resources
Private Sector Housing (SBC)	2026-27*	Regulatory Services
Land Charges Transfer to Land Registry Project	2026-27	Regulatory Services

* Audit not yet due a follow-up

Appendix 6

Provisional Audit Plan Work for 2026-27 Not Yet Started

Audit Area	Head of Service	Notes
Payroll	Business Support and Assurance	
Recruitment and Selection (Deferred 2025-26)	Business Support and Assurance	
Local Government Reorganisation	Corporate	No work will be performed on this whilst LGR is paused
Use of Consultants	Corporate	
Bank Reconciliation (Deferred 2024-25)	DCE Resources	
Council Tax	DCE Resources	
Grants Procedures	DCE Resources	
National Non-Domestic Rates	DCE Resources	
Planning Enforcement (deferred from 2024-25)	Economic Development and Planning	
SBC Regeneration Schemes	Economic Development and Planning	
Property Management Compliance/ Stock Condition Surveys	Housing and Corporate Assets	
Public Buildings - (Deferred 2025-26)	Housing and Corporate Assets	
Food Waste Project	Operations	
Tree Management IT Project	Operations	
Tree Preservation Orders	Operations	
Pest and Dog Control	Operations/ Regulatory Services	
Enviro-crime/Environmental Fines and Misc. Enforcement	Regulatory Services	
Food Safety Arrangements	Regulatory Services	
Private Water Supply and Distribution (Deferred 2025-26)	Regulatory Services	
Housing Partnership Arrangements (Deferred 2025-26)	Wellbeing	
SBC Housing Provision	Wellbeing	

Agenda Item 3(e)

Updated Strategic Risk Register

Committee: Audit and Accounts Committee

Date of Meeting: 25 November 2026

Report of: Head of Business Support and Assurance

Portfolio: Resources Portfolio

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1 Purpose of Report

1.1 To set out details of the Council's Strategic Risk Register as at 30 September 2026.

2 Recommendations

2.1 That the Audit Committee notes the updated Strategic Risk Register and considers the progress made in the identification and management of the strategic risks.

Reasons for Recommendations

2.2 The Audit is responsible for monitoring the progress made in relation to the management of the risks identified. Cabinet is responsible for approving the Strategic Risk Register produced by Leadership Team.

3 Key Issues

3.1 All strategic risks and associated action plans have been reviewed and updated for 30 September 2026, and the Council's risk profile is summarised in the table below:

Risk Status	Number of Risks at 30 June 2026	Number of Risks at 30 September 2026
Red (High)	**5**	**4**
Orange (Medium)	**4**	**4**
Yellow (Moderate)	**0**	**1**
Green (Low)	**0**	**0**
Blue (Negligible)	**0**	**0**
TOTAL	**9**	**9**

4 Relationship to Corporate Priorities

4.1 Risk Management as a process supports the Council's Effective Council priority.

4.2 The Risk Register supports the Council's Corporate Priorities as follows:

(i) Risk management is a systematic process by which key business risks/opportunities are identified, prioritised, and controlled so as to contribute towards the achievement of the Council's aims and objectives.

(ii) The strategic risks set out in the Appendices have been categorised against the Council's priorities.

5 Report Detail

5.1 The Accounts and Audit Regulations 2015 state that:

"A relevant body must ensure that it has a sound system of internal control which:-

(a) facilitates the effective exercise of its functions and the achievement of its aims and objectives;

(b) ensures that the financial and operational management of the authority is effective; and

(c) includes effective arrangements for the management of risk."

5.2 Risk can be defined as uncertainty of outcome (whether positive opportunity or negative threat). Risk is ever present and some amount of risk-taking is inevitable if the council is to achieve its objectives. The aim of risk management is to ensure that the council makes cost-effective use of a risk process that has a series of well-defined steps to support better decision making through good understanding of risks and their likely impact.

Management of Strategic Risks/ Opportunities

5.3 Central to the risk management process is the identification, prioritisation, and management of strategic risks/opportunities. Strategic Risks are those that could have a significant impact on the Council's ability to deliver its Corporate Priorities and Objectives.

5.4 The updated Strategic Risk Register Summary is attached as **APPENDIX 1**. Work has continued to enhance and refine the risks and actions identified to manage them as the Strategic Risk Register matures.

5.5 The risk summary illustrates the risks/opportunities using the "traffic light" method i.e.

Red	High risk, score 12 and above (action plan required to reduce risk and/or regular monitoring by Cabinet/Audit and Accounts Committee)
Orange	Medium risk, score 6 to 9 (action plan required to reduce risk and monitored by Leadership Team)
Yellow	Moderate risk, score of 3 to 4 (risk within risk appetite, no action plan required but watching brief to ensure controls are effective and operating)
Green	Low risk, score of 2 (risk tolerable, no action plan required)
Blue	Negligible Risk, score of 1 (risk tolerable, no action plan required)

5.6 The summary risk register and detailed information on Red Risks are reported to Cabinet and the Audit and Accounts Committee throughout the year. The updated risk register summary as at 30 September is attached at **APPENDIX 1** and information on the red risks and the reduced LGR Risk is at **APPENDIX 2**.

5.7 Leadership Team monitor the progress on all risks throughout the year and will advise on any changes to risk scores.

5.8 At the 30 September, there has been no overall change in the number of strategic risks. However:

5.9 2025-03 Local Government Reorganisation has reduced from a risk score of 12 to residual risk of 4 due to the pause on LGR reducing the likelihood of LGR having an impact on organisational capacity. The risk is being retained as a strategic risk until we know the outcome of the Government review of LGR and it will then be reviewed.

5.10 2025-02 Safety and compliance arrangements for corporate properties [SB1.1][KB1.2] has had some minor wording updates made as part of this review to strengthen the description. These do not affect the detail of the risk.

6 Implications

6.1 Financial

None

6.2 Legal

None

6.3 Human Resources

None

6.4 Risk Management

The Risk Management implications are included within the body of the report and appendices.

6.5 Equalities and Diversity

None

6.6 Health

None

6.7 Climate Change

None

7 Appendices

Appendix 1: Summary of Strategic Risks - 30 September 2026

Appendix 2: Strategic Risk Register as at 30 September 2026

8 Previous Consideration

None

9 Background Papers

File of papers held by the Chief Internal Auditor and Risk Manager.

Contact Officer:	Stephen Baddeley
Telephone Number:	01543 464415
Ward Interest:	All
Report Track:	Audit and Accounts Committee - 25 November 2026
	Cabinet - 10 December 2026
Key Decision:	N/A

Appendix 1

Stafford Borough Council
Summary of Strategic Risk Register as at 30 September 2026

Risk Ref	Risk Owner	Risk Name	Inherent Risk Score	Residual Risk Score June	Residual Risk Score September	Direction of Travel in Period	Target Score
2025-06	Chief Executive	Corporate capacity	16	12	12	↔	12
2025-16	Economic Development and Planning	Delivery of Town Centre Regeneration Project	16	12	12	↔	8
2025-09	Operations	Safe Management of Trees	16	12	12	↔	8
2025-02	Housing and Corporate Assets	Safety and compliance arrangements for corporate properties	12	12	12	↔	8
2025-08	Deputy Chief Executive (Resources)	Financial Stability - SBC	16	9	9	↔	6
2025-10	Deputy Chief Executive (Resources)	Failure to deliver good governance	16	8	8	↔	4

Risk Ref	Risk Owner	Risk Name	Inherent Risk Score	Residual Risk Score June	Residual Risk Score September	Direction of Travel in Period	Target Score
2025-04	Business Support and Assurance	IT Resilience	16	8	8	↔	8
2025-12	Chief Executive	Health and safety arrangements for people	12	8	8	↔	4
2025-03	Chief Executive	Local Government reorganisation	16	12	4	↓	8

Key to Direction of Travel

↓	Risk has decreased	↔	Risk level unchanged	↑	Risk has increased

Appendix 2

Stafford Borough Council
Strategic Risk Register as at 30 September 2026

Risk Ref	2025-02
Risk Owner	Head of Housing and Corporate Assets
Risk Name	Safety and compliance arrangements for corporate properties
Risk Description	Operational property procedures, including Big 6 compliance, maintenance and commercial management of Corporate Asset properties, are not sufficient to adequately ensure they are safe for Commercial tenants, employees, leaseholders or visitors, leading to death or serious injury.
Consequences	Death, serious or minor injury, prosecution by the HSE and private legal action. Reputational damage. Deterioration in condition of buildings. Depreciation of buildings.
Corporate Objective SBC	Effective Council
Main Risk Category	Health and Safety

Inherent Impact	**Inherent Likelihood**	**Inherent Risk Score**
4	3	12
Residual Impact	**Residual Likelihood**	**Residual Risk Score**
4	3	12
Target Score		8
Comment on Target Score: There are situations outside our control which may lead to accidents, and holding a large property portfolio means that a risk score of 4 is unlikely, as accidents and incidents may still happen.		

Controls	Assurances
Compliance data is held for all properties.	Monthly data validation by managers
	Monitoring of spreadsheets by management
	Internal Audit reviews

Actions

Actions Planned	Person Responsible	Timescale	Progress/Comments
Review of Health and Safety compliance records of contractors	Corporate Asset Manager	Q4 2026-27 (Updated from Q1 to Q4 Sept 2026)	The framework has been set up to identify what is required from each contractor as they are all different. The initial correspondence to collate the data has been sent out. Information is being received and collated. Work is still ongoing at the end of September as some contractors are not returning documentation. We aim to complete by end of Jan 2027
Appoint contractor to undertake building condition surveys, prioritising the top five properties out of 60 in total	Corporate Asset Manager	Q3 2026-27 (Updated from Q1 to Q3 Sept 26)	This action has been delayed due to contractor capacity. There were a small number outstanding at the end of the quarter they are booked in , just awaiting visit and report. Due by end of Q3.
Asset reviews will be carried out on all Council properties.	Corporate Asset Manager	Quarter 4 2026-27 (ongoing)	Due to limited staffing resources this action is on hold.
Fire Compartment works for the Civic Centre as identified in the Fire Risk Assessment will be completed	Corporate Asset Manager	Quarter 4 2026-27	

Progress Updates

Current Position	Fire compartmentation works are being scheduled for the Civic Centre. The survey has been completed, and remedial actions are being progressed. Due to the nature of the actions identified, it will take time to reduce the risk score, as some of the actions require specialist skills, for which there is limited availability within the existing team.

Risk Ref	2025-03
Risk Owner	Chief Executive
Risk Name	Local Government reorganisation
Risk Description	The Council has to divert resources to the management of its response plans for Local Government Reorganisation, which threatens its ability to maintain the quality of services at a time when capacity is already stretched.
Consequences	Core services and major projects fail to be delivered. Reputational damage.
Corporate Objective SBC	Effective Council
Main Risk Category	Capacity/Service Delivery

Inherent Impact	**Inherent Likelihood**	**Inherent Risk Score**
4	4	16
Residual Impact	**Residual Likelihood**	**Residual Risk Score**
4	1	4
Target Score		8

Comment on Target Score:

The residual score has been revised to reflect the current position following the Government's announcement on 7 September 2026 to pause work on LGR.

The target score is based on the position before the Government announcement whereby it is considered we can potentially reduce the likelihood to a 2 giving a target score of 8. Progress with this risk is also linked to the risk regarding capacity (ref 2025-06).

This will need to be revisited as and when a decision is taken to recommence work on LGR.

Please see current position

Controls	**Assurances**
LGR lead officers have been identified	Cabinet
	Scrutiny Committee
	Leadership Team

Actions

Actions Planned	Person Responsible	Timescale	Progress/Comments
Development of an action plan for internal preparation, pending a decision	Head of Business Support and Assurance	Q1 2026-27	Work plans were being developed but are now on hold. See current position.

Progress Updates

Current Position	On 7 September 2026, the Government announced that plans for LGR have been paused pending a further review. All work by the Council has been put on hold until we have an update. The risk is being retained until we have a clearer understanding of the Government's intentions.

Risk Ref	2025-06
Risk Owner	Chief Executive
Risk Name	Corporate capacity is insufficient to maintain provision of core services and deliver major projects
Risk Description	The inability to recruit and retain staff particularly in statutory and other core areas threatens service delivery across the Council. This risk is exacerbated by other factors such as the number of high priority projects, large procurement exercises, demand for new software, competing priorities and Local Government Reorganisation.
Consequences	Projects are delayed or not implemented Operational services are delivered to a lower standard; backlogs arise or service not delivered at all Complaints/damage to reputation Wellbeing of staff who are under pressure to deliver
Corporate Objective SBC	Effective Council
Main Risk Category	Capacity/Service Delivery

Inherent Impact	**Inherent Likelihood**	**Inherent Risk Score**
4	4	16
Residual Impact	**Residual Likelihood**	**Residual Risk Score**
4	3	12
Target Score		12
Comment on Target Score: Due to the limited market in key professions such as Finance, Legal, Planning etc, the uncertainty created by Local Government Reorganisation and the volume of major projects in progress, it is considered that the residual risk score cannot be reduced further and actions planned are focussed on maintaining the current position.		

Controls	**Assurances**
Corporate Plan sets out priorities and key projects	Performance reporting
Use of agency staff and contractors to cover posts which are difficult to recruit to	
Market supplements to enhance salary to attract candidates	
Management of absences	Oversight by HR

Actions

Actions Planned	Person Responsible	Timescale	Progress/Comments
Development of work plans for the next 2 years. This will allow us to assess capacity and pinch points and prioritise work accordingly.	Leadership Team	Quarter 1 2026-27	Each Head of Service has developed a summary work plan and a detailed delivery plan for their service area.
Monitoring delivery of workplans	Leadership Team	From Quarter 2 2026-27 onwards	Progress monitoring template being developed
Monitoring capacity	Leadership Team	From Quarter 2 2026-27 onwards	Work on the vacancy template paused during Q2 due to other work priorities but will be picked up in Q3 Sickness reporting re-established with leadership Team.
Management of expectations/discussion with Cabinet	Chief Executive/ Leadership Team	Q1 2026-27	Discussions with Cabinet Members are ongoing.

Progress Updates

Current Position	Despite the pausing of work on LGR, capacity and workload continue to be an ongoing issue and this is not expected to change due to the volume of work, complexity of major projects and vacancies in key service areas. The intention is to manage this through regular reviews of the workplans which set out the key projects for the next 2 years. Leadership Team is continuing to focus on managing capacity within current resources and maintaining the current position so that this does not deteriorate.

Risk Ref	2025-09
Risk Owner	Operations
Risk Name	Safe Management of Trees
Risk Description	Risk of a tree or part of a tree falling on an individual/s causing death or serious injury. Risk of a tree or part of a tree falling onto a building causing severe damage to a property or the death or serious injury of an individual/s.
Consequences	• Death/Serious Injury • Damage to property • HSE Investigation/Prosecution • Corporate Manslaughter • Insurance Claims
Corporate Objective SBC	Climate Change, Nature Recovery and the Environment
Main Risk Category	Health and Safety and Capacity/Service Delivery

Inherent Impact	**Inherent Likelihood**	**Inherent Risk Score**
4	4	16
Residual Impact	**Residual Likelihood**	**Residual Risk Score**
4	3	12
Target Score		8

Comment on Target Score:

Given the number of trees and the unpredictability of the weather, and the increase in the number of severe weather events, it is considered the current residual likelihood score sits at a 3. With the residual impact score remaining at a 4, it makes the overall residual risk score a 12. It is unlikely that the impact score can be reduced below a 4. Due to its categorisation, the nature, and the subject area it may also be difficult to reduce the likelihood from a 3 to a 2. The residual risk score will remain high for some time at a 12 until re-inspections have been undertaken, and resultant work programmes are well established. Given the circumstances of the risk, while currently higher than preferred at 12, an overall goal of a residual risk score of an 8 is considered acceptable in the longer-term.

Controls	**Assurances**
Trained Manager, Tree Officers, and Arboriculturists. Tree and TPO officers covered by consultants	IA Reviews.
Tree Surveys	Management Information

Controls	Assurances
Policies and Procedures for Tree Management, urban forest strategy best practice.	
Trees maintained using recognised tree risk management process	
SBC - Urban Forestry Strategy	
Allocation of semi-dedicated management resource.	
Knowledge of tree locations	
Historic/recent tree inspections	
Historical tree database/system in place	

Actions

Actions Planned	Person Responsible	Timescale	Progress/Comments
Review tree service, policies and procedures	Natural Environment Manager	Q3 2026-27	Review completed and Action Plan developed Completed
Joint Tree Team Structure to be developed and implemented	Natural Environment Manager	Q1- 2027/28	Scheduled interviews for all seven posts were held during Q2. Three posts were appointed into; two Tree Officers, and one Arborist Team Leader. Request to be made to Leadership Team for Market supplements to be applied to the Principal Tree Officer and Senior Tree Officers posts
Implement new full risk-based tree management procedure	Natural Environment Manager	Q3 2026-27	In progress, trees are now being managed on a shared risk based methodology. Which is continuing to be developed.
Implement new joint tree management ICT GIS based system	Natural Environment Manager	Q2 2027/28	Data inputting and verification is underway. 699 sites have been zoned to enable the production of specification documents for outsourcing the inspection work for red zones trees
Outsource next round of tree inspections for all trees to create new baseline data (78,000 trees) and ongoing inspections	Natural Environment Manager	Q4 2026-27	Trees in red zones are to be prioritised. Procurement process to commence in Q3 with inspections of redzone trees to begin in Q4. Amber zone trees will be programmed for reinspection following-on.

Actions Planned	Person Responsible	Timescale	Progress/Comments
Deliver and monitor tree risk-based works and ongoing inspections	Natural Environment Manager	Ongoing	Progress against Tree Management action plan is monitored and reported to Trees Oversight Group. This includes monitoring the delivery of identified works

Progress Updates

Current Position	Part-time consultant tree officers continue to be used to cover vacant posts until permanent staff can be recruited and a large amount of tree maintenance works continues to be contracted out. Interviews undertaken during Q2 with limited success; only three of the seven posts appointed. A market supplement will be applied where possible for the unfilled posts, and they will go back out to advert in the market during Q4. The limited capacity currently within the team continues to be prioritised and focused on responsive inspections and tree works, while recruitment takes place and alternative arrangements are sought, where available. Prioritisation also continues around the outsourcing of the redzone trees. Progress continues to be made to deliver the planned actions to improve the service. Two officers continue to support the implementation of the new tree management system to allow for the input of tree data which can then be used to inform tree inspection works. Work has commenced on the procurement process for a contractor to undertake inspections of trees in red zones as a priority, with inspections of other areas to follow. Specification to be issued in Quarter 3. Due to the nature of the risk, it is considered the overall residual likelihood score will not be reduced until the full tree inspection survey has been completed and the majority of the high-risk remedial tree works identified from this has been carried out. This may take upward of 2-3 years.

Risk Ref	2025-16
Risk Owner	Head of Economic Development and Planning
Risk Name	Delivery of Town Centre Regeneration Project
Risk Description	There is a risk that the high-profile large regeneration projects may not deliver as anticipated, to time or to budget, leading to reputational risks to the Council and creating financial risks that impact on the Council's financial position and could impact on service delivery and hinder the Council's wider ambition to secure economic prosperity for the Borough. There is a risk that either the Council may not be able to complete the demolition phase of the project or secure a development partner to re-develop the cleared sites.
Consequences	• Major reputational risk for the Council in terms of not delivering the schemes that local residents expect; potential that Council may be unsuccessful with future funding bids • Reduced growth and economic prosperity for local residents • Decline of town centres/impact on major redevelopment proposals • Council exposed to unplanned financial risks and pressure on revenue resources which impacts on delivery of core services • Increased pressure on already stretched services/functions of the council which have capacity issues. • Cleared sites could sit empty for indeterminate period if developer interest doesn't materialise
Corporate Objective SBC	Prosperous Economy
Main Risk Category	Reputation, Customer/Public Perception

Inherent Impact	**Inherent Likelihood**	**Inherent Risk Score**
4	4	16
Residual Impact	**Residual Likelihood**	**Residual Risk Score**
4	3	12
	Target Score	8

Comment on Target Score:
Inherent nature of the risk profile of the regeneration schemes makes it difficult to reach a score of 4, therefore a target score of 8 has been set at this stage. External influences may affect the ability to secure operators/end users to build out development within the agreed footprint of the scheme. Although the main demolition works to the former Guildhall Shopping Centre and co-op have completed and there has been a strong level of interest in the town centre from potential operators, the residual risk

score will remain at 12 until the Council completes the demolition works to the former Wilko site and properties at 10 - 12 Gaolgate Street and secures agreements with developers/operators following a competitive procurement process. It should be noted that the risk profile of the scheme will change over time as the Council secures development partners/operators to bring forward development on the cleared sites.

Controls	**Assurances**
Monitoring/finance returns being prepared and submitted to MHCLG in line with timescales in agreed memorandum of understanding	Project Sponsor
Key decisions taken by Cabinet in relation to the project with relevant delegations and budget approvals in place	Project Sponsor
Procurement using approved frameworks to select and appoint key contractors/developers/operators	SCC Procurement team Internal Audit Reviews Project Sponsor
Detailed risk registers and project plans to Operational Group	Project Board Project Sponsor Internal Audit reviews.
Governance arrangements to ensure oversight of programme delivery, spend and risks; with Programme Boards, Steering groups and project delivery meetings taking place on a regular basis	Project Board Project Sponsor Internal Audit reviews.
Ensure that the Council is effectively managing contractors and consultants	Project Sponsor
Ensure that the Council has sufficient capacity to deliver the projects including dedicated programme management support, commercial advice, legal, finance and comms resource.	Project Board Project Sponsor Deputy Chief Executive Resources (S151)
Ensure that the Council's Health and Safety/CDM requirements are met, and demolition/construction works are managed safely and in line with regulations	Project Sponsor

Actions

Actions Planned	Person Responsible	Timescale	Progress/Comments
Approval of refreshed Governance structure for the project and additional resource/capacity to deliver the project	Deputy Chief Executive - Place Deputy Chief Executive - Resources (S151) Head of Economic Development and Planning	Q2 2026-27	A revised governance framework for the Town Centre Regeneration Programme has been developed and will be presented to Cabinet for approval on 14 October 2026. Furthermore, as part of this report, a proposal for the Council to strengthen resource and capacity across the regeneration programmes will be presented for approval.
Communications to stakeholders, partners and the public - development of Comms Strategy and Plan	Head of Economic Development and Planning, Communications Manager	Q2 2026-27	Between July and September, the Council undertook a number of drop in engagement events on the Town Centre Development Framework with stakeholders, businesses and the public. The events were very well attended and there was general support for the proposals. Work is underway to design the information hoardings with installation expected in Q3.

Actions Planned	Person Responsible	Timescale	Progress/Comments
Formal procurement process to appoint development partner(s) for residential parcels.	Head of Economic Development and Planning	Q3 - 2026-27 (revised from Q1 June 26)	Officers have completed work to research procurement frameworks and other routes to market that could be used to select developers/ operators. Once the sourcing strategy has been finalised and agreed, it is intended to seek formal expressions of interest from developers.
Business cases for the Market Hall proposal and College expansion on the former Wilko site	Head of Economic Development and Planning	Q3 2026-27	A business case for a new Market Hall has been prepared and will be presented for consideration in November, subject to the governance framework being approved by Cabinet in October. Officers continue to progress discussions with NSCG regarding the potential expansion of the College.

Progress Updates

Current Position	A Development Framework was approved by Cabinet on 9 April 2026, which sets out the Council's vision for the regeneration scheme and proposed uses for the 6 development parcels identified within the red line boundary. Officers have finalised a refreshed governance structure for the project and will present this to Cabinet for consideration in October 2026. Officers continue to progress detailed business cases and technical work to inform delivery of the development plots identified in the Framework.

Agenda Item 3(f)

Annual RIPA Review

Committee: Audit and Accounts Committee

Date of Meeting: 25 November 2026

Report of: Head of Law and Governance

Portfolio: Resources Portfolio

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1 Purpose of Report

1.1 This annual report provides details of the use of powers under the Regulation of Investigatory Powers Act (RIPA) by the Council.

2 Recommendations

2.1 That the report be noted.

Reasons for Recommendations

2.2 This is an annual report to members, in accordance with good practice, and is for information only.

3 Key Issues

3.1 Local authorities carry out investigations for a variety of regulatory services. In carrying out these duties, they have general powers to conduct surveillance of individuals suspected of committing offences. The Regulation of Investigatory Powers Act 2000 (RIPA) was introduced to regulate public authority use of covert surveillance powers to ensure that any use is compliant with human rights.

3.2 The Home Office Code of Practice for Covert Surveillance and Property Interference, recommends that elected members of an authority should review the authority's use of RIPA and set the policy at least once a year.

4 Relationship to Corporate Priorities

4.1 This report supports the Council's Corporate Priorities as follows:

(i) Regular review of the Councils use of surveillance ensures that enforcement is carried out lawfully and proportionately and assists in improving community wellbeing

5 Report Detail

5.1 The Regulation of Investigatory Powers Act 2000 (RIPA) regulates the use of certain surveillance powers by public authorities, including:

- Directed Surveillance (covert surveillance conducted as part of a specific investigation likely to result in obtaining private information about an individual),

- Use of Covert Human Intelligence Sources (CHIS), and

- Access to communications data (e.g. details of subscribers to telephone numbers or email accounts)

5.2 The Council is a very rare user of these powers. However, it is important that it has sufficient oversight of its activities to ensure that any considered use is compliant with the subject's human rights.

5.3 The Home Office publishes national Codes of Practice on the use of RIPA powers by public authorities. The Council must have regard to the relevant Code of Practice whenever exercising powers covered by RIPA. The Investigatory Powers Commissioner conducts regular inspections of all public authorities to ensure compliance with RIPA, and the Codes of Practice. The Commissioner undertook a routine paper evaluation of the Councils RIPA functions in August 2023 and was satisfied that there was assurance of ongoing RIPA compliance at the Council. A further routine inspection is due in 2026.

5.4 The Council has adopted its own Surveillance Policy to advise officers on RIPA obligations and to regulate any use of these powers. The Policy was last updated by Cabinet in September 2019 to reflect changes in the law and Codes of Practice. The Policy has been reviewed recently and it is considered that it would benefit from some further updating. The Policy has therefore been amended and will be put before Cabinet for approval in January 2027.

5.5 The Head of Law and Governance acts as the Senior Responsible Officer for RIPA, with oversight of the Councils internal procedures. The Legal Services Manager acts as the RIPA Co-ordinating Officer, ensuring that any request to use RIPA powers is co-ordinated through, and recorded in, a central register. The Legal Services Manager also acts as a source of advice to regulatory officers and supports the Senior Responsible Officer in keeping the Councils policy up to date.

5.6 As part of the policy, the use of any RIPA powers must first be approved by a Chief Officer trained to be a RIPA Authorising Officer. The number of Authorising Officers certified to act is limited to a maximum of three to ensure consistency and experience in procedures. The Council has three Chief Officers who received suitable training in November 2025. Training will be repeated in November 2026. In addition, surveillance awareness raising communications went out to all staff in October 2025 and January 2026. If the Chief Officer gives approval, then an application must still be made to the Magistrates Court for independent judicial approval before the surveillance takes place (NB. the Office for Communications Data Authorisations gives judicial approval in respect of accessing communications data).

5.7 The Council has not used RIPA powers in the last 12 months.

6 Implications

6.1 Financial

None

6.2 Legal

Set out in the report

6.3 Human Resources

None

6.4 Risk Management

None

6.5 Equalities and Diversity

None

6.6 Health

None

6.7 Climate Change

None

7 Appendices

None

8 Previous Consideration

None

9 Background Papers

None

Contact Officer:	Ian Curran
Telephone Number:	01785 619220
Ward Interest:	None
Report Track:	Audit and Accounts Committee 25 November 2026 (Only)
Key Decision:	N/A