A meeting of the **CORPORATE GOVERNANCE COMMITTEE** will be held in the **CIVIC SUITE (LANCASTER/STIRLING ROOMS), PATHFINDER HOUSE, ST MARY'S STREET, HUNTINGDON, CAMBS, PE29 3TN** on **WEDNESDAY, 18 NOVEMBER 2026** at **7:00 PM** and you are requested to attend for the transaction of the following business:-

AGENDA

APOLOGIES AND SUBSTITUTES

1. **MINUTES** (Pages 7 - 14)

   To approve as a correct record the Minutes of the meeting of the Committee held on 16th September 2026.

   Contact Officer: Democratic Services - (01480) 388169

2. **MEMBERS' INTERESTS**

   To receive from Members declarations as to disclosable pecuniary, other registerable and non-registerable interests in relation to any Agenda item. See Notes below.

   Contact Officer: Democratic Services - (01480) 388169

3. **CODE OF CONDUCT COMPLAINTS - ANNUAL UPDATE** (Pages 15 - 24)

   To receive a report providing a summary and update of completed or ongoing complaints received regarding alleged breaches of the Code of Conduct under the Localism Act 2011 since the start of the year.

   Contact Officer: L Jablonska
   (01480) 388004

4. **ANNUAL REPORT OF COMPLAINTS & FEEDBACK** (Pages 25 - 38)

   To receive a report providing an overview of complaints, compliments and Ombudsman activity for the period April 2025 to March 2026, together with an update on the changes made to support compliance with the LGSCO Complaints Handling Code.

Contact Officer: L Sboui (01480) 388032
M Greet (01480) 388707

5. **ANNUAL REPORT ON HDC COMPLIANCE WITH THE INFORMATION RIGHTS ACTS (FREEDOM OF INFORMATION ACT, ENVIRONMENTAL INFORMATION REGULATIONS AND UK GDPR) AND INFORMATION GOVERNANCE** (Pages 39 - 50)

To receive a report providing an update on Information Governance activity and performance during 2025-26 and highlighting any issues encountered and actions to be undertaken to improve performance.

Contact Officer: A Brown
07849 700855

6. **AMENDMENTS TO THE CONSTITUTION - COUNCIL PROCEDURE RULES, CALL-IN AND PLANNING PROCEDURE** (Pages 51 - 86)

To consider a report by the Interim Monitoring Officer on proposed changes to the Constitution.

Contact Officer: L Gardner
(01480) 388764

7. **CORPORATE RISK REGISTER**

To receive a report presenting an update on the Council's Corporate Risk Register.

Contact Officer: L Morrison
(01480) 388178

8. **LGR RISK REGISTER** (Pages 87 - 100)

To receive a report presenting the approach being taken to identify, access and manage risks associated with Local Government Reorganisation (LGR).

Contact Officer: C Oliphant
(01480) 388733

9. **INTERNAL AUDIT PROGRESS REPORT** (Pages 101 - 122)

To receive a report providing an update of the work of the Internal Audit Service since the last meeting and progress against the Internal Audit Plan 2026/27 that was approved by the Committee on 18th March 2026.

Contact Officer: L Morrison
(01480) 388178

10. INTERNAL AUDIT ACTIONS UPDATE (Pages 123 - 152)

To receive a report setting out the current position with respect to implementation of actions arising from Internal Audit reports.

Contact Officer: L Morrison
(01480) 388178

11. CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT (Pages 153 - 154)

To receive the Corporate Governance Committee Progress Report and Future Work.

Contact Officer: Democratic Services - (01480) 388169

10 day of November 2026

Michelle Sacks

Chief Executive and Head of Paid Service

Disclosable Pecuniary Interests and other Registerable and Non-Registerable Interests.

Further information on Disclosable Pecuniary Interests and other Registerable and Non-Registerable Interests is available in the Council's Constitution

Filming, Photography and Recording (including Live Streaming) at Council Meetings

This meeting will be filmed for live and/or subsequent broadcast on the Council's YouTube site. The whole of the meeting will be filmed, except where there are confidential or exempt items. If you make a representation to the meeting you will be deemed to have consented to being filmed. By entering the meeting you are also consenting to being filmed and to the possible use of those images and sound recordings for webcasting and/or training purposes. If you have any queries regarding the streaming of Council meetings, please contact Democratic Services on 01480 388169.

The District Council also permits filming, recording and the taking of photographs at its meetings that are open to the public. Arrangements for these activities should operate in accordance with guidelines agreed by the Council.

Please contact Democratic Services, Tel: (01480) 388169 / email: Democratic.Services@huntingdonshire.gov.uk if you have a general query on any Agenda Item, wish to tender your apologies for absence from the meeting, or would like information on any decision taken by the Committee/Panel.

Specific enquiries with regard to items on the Agenda should be directed towards the Contact Officer.

Members of the public are welcome to attend this meeting as observers except during consideration of confidential or exempt items of business.

Agenda and enclosures can be viewed on the District Council's website.

Emergency Procedure

In the event of the fire alarm being sounded and on the instruction of the Meeting Administrator, all attendees are requested to vacate the building via the closest emergency exit.

Attending Council and Committee Meetings

Huntingdonshire District Council welcomes members of the public to attend meetings that are open to the public.

Members of the public may attend, film, photograph, and report on meetings that are open to the public. *

In some circumstances, a meeting may resolve to exclude the public and press to consider confidential or exempt information. Where this occurs, members of the public and press will be asked to leave the meeting room for that part of the meeting.

Most public meetings are webcast live, and recordings are available afterwards. This means you do not need to attend in person to follow proceedings.

The council permits public speaking at the Development Management Committee (planning) meetings.

View further information about **public speaking at Development Management Committees [PDF, 0.5MB]**

The council permits public questions at full council meetings. View further information about **submitting a question [PDF, 0.1MB]**.

Public access and seating

Meetings that are open to the public can be attended by anyone.
Seating in public areas is limited. Where demand exceeds the number of seats available, admission will be managed on a first-come, first-served basis, with priority given in the following order:

1. People who live, work or own property within the Huntingdonshire District
2. Other interested members of the public.

This means that attendees within each priority group will be admitted in the order they arrive, subject to the number of seats available.

Reserved seating

Council Meetings - If you have registered in advance to ask a public question at a meeting of Full Council in accordance with the Council's **Constitution [PDF, 1.5MB]**, a seat will be reserved for you.

Development Management, Licensing and Other Regulatory Hearings - If you have registered to speak or make representations in relation to an application or matter being considered by the Committee, a seat will be reserved for you.

You do not need to arrive early to secure your place.

When seating is full

Once all public seats are occupied, no further admission will be possible.
Standing is not permitted in meeting rooms. Additional seating cannot normally be provided, except where required as a reasonable adjustment for accessibility needs, including carers or support workers.
For meetings of the Development Management Committee, Licensing Committee and other regulatory hearings, priority will be given to applicants, objectors, registered speakers and other parties directly involved in agenda items.

Arrival, sign-in and security

All visitors must sign in on arrival.

If attendance is expected to exceed capacity, you may be asked to provide evidence that you live, work or own property within the Huntingdonshire District so that seating priority can be allocated fairly. In these circumstances, we would request a photographic ID and evidence of your address or work premises
We recommend bringing only essential items.

Bags and personal belongings may be subject to security checks. Where necessary, security staff may also conduct further searches.

These arrangements apply equally to all public attending and are intended to help ensure meetings can take place safely and without disruption.

Any personal information collected as part of the sign-in process will be used only for meeting management and safety purposes in accordance with the **Council's Privacy Notice**. Information will be retained no longer than is necessary.

Items not permitted

- Placards, banners, flags or similar items
- Knives, scissors or other sharp objects
- Whistles, air horns, loudhailers or other noise-making devices
- Bottles or other containers containing liquids, except drinking water intended for personal use during the meeting

- Any item that security staff reasonably believe could compromise safety or disrupt the meeting.

If you wish to bring large or specialist equipment into the meeting, such as recording equipment, please contact **Democratic Services** in advance via email to help avoid delays when entering the meeting.

Behaviour at meetings

Everyone attending a meeting is expected to treat others with courtesy and respect. Any form of verbal or physical abuse will not be tolerated. Anyone presenting such behaviour will be asked to leave immediately.

Accessibility

If you have any accessibility requirements, it would be helpful to contact **Democratic Services** before the meeting so we can fully support you.

Speaking at a meeting or asking a question

Members of the public may ask questions at meetings of Full Council.

Members of the public may also speak or make representations at meetings of the Development Management Committee, Licensing Committee, and other regulatory hearings where public participation arrangements apply.

Please note that this must be arranged in advance in accordance with the Council's Constitution.

Feedback

If you have concerns about how these arrangements were applied at a meeting, please contact **Democratic Services**.

Legal framework

*Public access to meetings, and the right to film, photograph, record and report proceedings, are governed by legislation including the Local Government Act 1972, Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012, Local Audit and Accountability Act 2014 and Openness of Local Government Bodies Regulations 2014.

HUNTINGDONSHIRE DISTRICT COUNCIL

MINUTES of the meeting of the CORPORATE GOVERNANCE COMMITTEE held in the CIVIC SUITE (LANCASTER/STIRLING ROOMS), PATHFINDER HOUSE, ST MARY'S STREET, HUNTINGDON, CAMBS, PE29 3TN on Wednesday, 16 September 2026.

PRESENT:	Councillor P J Hodgson-Jones – Chair.
	Councillors R Coogan, J A Gray, G Seeff, H Tobias, N Wells (substituted for Councillor M J Burke) and M Young.
APOLOGY:	An apology for absence from the meeting was submitted on behalf of Councillor M J Burke.
SUBSTITUTES:	Councillor N Wells substituted for Councillor M J Burke.
IN ATTENDANCE:	Councillors S Claffey, L Dewey-Beckett, M Hassall and A Wood.

85. MINUTES

The Minutes of the meeting of the Committee held on 8th July 2026 were approved as a correct record and signed by the Chair.

86. MEMBERS' INTERESTS

No declarations were received.

87. CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT AND FUTURE WORK

The Committee received and noted a report (a copy of which is appended in the Minute Book) on progress of actions in response to decisions taken at previous meetings and the Future Work of the Committee.

The Interim Monitoring Officer outlined proposals for establishing a joint monitoring Group consisting of representatives of the Corporate Governance Committee and the Overview & Scrutiny Panel (Performance & Growth). He advised that the purpose would be to oversee the progress of the independent review relating to the Capital and Centric projects, ensure the agreed scope was being addressed and monitor the delivery of the final report. The proposed membership of the Group was Councillors Hassall, P Hodgson-Jones, Tobias, Tomlinson, Seeff and Wood. Members were advised that the Group would not direct findings or influence conclusions. The final report would remain entirely independent.

Councillors Hassall and Wood were in attendance for the discussion of the item.

The Committee discussed the need to ensure the independence of the review process, appropriate oversight arrangements, transparency and a procurement process capable of securing genuinely independent reviewers. In response to a question from the Committee, the Chair confirmed that none of the proposed representatives had been involved in Cabinet decision-making relating to the original project, and several Members had only been elected in May 2026. It was reiterated that the Group would not conduct the investigation, it would oversee its progress and ensure its completion.

The Interim Monitoring Officer further advised that:

- the review would be independently commissioned;
- at least three quotations would be sought;
- procurement would be undertaken in accordance with Council procedures;
- the objective would be the publication of a full report in open session, without redactions, unless there were legal reasons for doing so;
- the target remained to complete the review before the end of the calendar year, subject to the procurement process and complexity of the work involved; and
- Members would not influence the final report, but the expectation was the Committee would see a final draft to ensure all questions and concerns had been addressed.

The Committee also discussed the Future Work scheduled for its upcoming meetings. Members noted that an additional meeting of the Committee may be required in December to consider the Annual Governance Statement and Statement of Accounts.

The Committee considered the proposal for establishing the joint monitoring Group. On being put to the vote, Councillors Gray, Hodgson-Jones, Seeff, Wells and Young voted in favour, and Councillors Coogan and Tobias voted against. The motion was therefore declared to be carried.

Accordingly, it was

RESOLVED

that the proposal to establish a joint monitoring Group, be agreed.

88. WHISTLEBLOWING POLICY

The Committee received a report (a copy of which is appended in the Minute Book) setting out the revised Whistleblowing Policy for endorsement.

The Executive Councillor for Climate, Transformation and Workforce, Councillor Claffey and the Head of HR & OD presented the report.

In response to questions from the Committee, the Head of HR & OD advised that the Policy would be clarified that quarterly reports of whistleblowing that may have taken place would be reported to the Committee on an annual basis. Individuals would be informed if

investigations exceeded target timescales. The wording of the Policy could also be clarified regarding the evidence needing to be provided before an investigation took place, to ensure it was in line with Government guidelines. Furthermore, she would look into staff receiving training and guidance following the adoption of the Policy. The Policy had been reviewed against local authority best practice and supported by legal advice. The Committee noted that only one genuine whistleblowing case had been recorded during the previous twelve months, although some matters incorrectly described as whistleblowing had also been received.

Whereupon it was

RESOLVED

that the revised Whistleblowing Policy, be approved.

89. CHANGES TO THE CODE OF PROCUREMENT (PART 4 RULES OF PROCEDURE OF THE COUNCIL'S CONSTITUTION)

The Committee received a report (a copy of which is appended in the Minute Book) setting out the proposed required replacement of the Council's existing Code of Procurement with a new set of Contract Procedure Rules (CPRs).

The Executive Councillor for Climate, Transformation & Workforce, Councillor Claffey and the Head of Procurement introduced the report.

In response to questions from the Committee, the Procurement Manager advised that:

- any significant changes arising during a procurement process would be communicated to all bidders to ensure fairness and transparency, with procurement timescales extended where necessary. It was also confirmed that suppliers would not be permitted to renegotiate contractual terms following award;
- procurement training would shortly be delivered to all officers involved in procurement activity where contracts exceeded £5,000, and training would also be offered to be delivered to Members;
- all contracts valued above £5,000 should be recorded on the Council's contract register and officers advised how the register was linked to financial systems to assist with monitoring expenditure against contracts;
- in response to concerns regarding repeat use of suppliers and compliance with procurement thresholds, the Monitoring Officer and Section 151 Officer undertook to review existing arrangements and explore opportunities to strengthen oversight and reporting;
- provisions relating to contract management and post-award monitoring had been strengthened through the revised arrangements; and
- the Council's contract register was publicly accessible, providing transparency of awarded contracts.

The Committee raised concerns around the number of lower value

contracts, below £10,000, with the same supplier and how these were managed, along with the governance on spend with suppliers being directly linked to their contracts. The Interim Monitoring Officer advised he would take the matter away and report back to the Committee at a later date.

Whereupon it was

RESOLVED

that

(1) the Committee has reviewed the CPRs, as set out at Appendix A;

(2) the changes made between the existing Code of Procurement and the new CPRs in Appendix B, be noted;

(3) that the Council be recommended to endorse the required amendments to the Constitution for the Council to remain compliant with procurement legislation;

(4) the Procurement Guide as set out at Appendix C, be approved; and

(5) the draft Procurement Outcomes - the Social Value Policy at Appendix D, be approved.

90. SCHEME OF DELEGATION

The Committee received a report (a copy of which is appended in the Minute Book) setting out the updated Scheme of Delegation which had been reviewed and redrafted.

The Interim Monitoring Officer introduced the report, advising that the review represented a housekeeping exercise to reflect organisational changes, revised job titles and updated officer responsibilities.

Officers noted the request from the Committee that future changes to documents be accompanied by a tracked-change version to help provide clarity on amendments made, and that this practice be adopted more widely across Council reports.

Whereupon it was

RESOLVED

that the Council be recommended to approve of the revised Scheme of Delegations as set out in Appendix 1 to the report.

91. CORPORATE RISK REGISTER

The Committee received a report (a copy of which is appended in the Minute Book) setting out the approach taken to improve the Council's management of risk, in particular, for work undertaken on corporate risks where the residual risk score has not yet met the target risk score. Heatmaps and a summary risk register were included as

appendices to support the Committee's oversight of the Council's current corporate risk profile.

The Risk Manager introduced the report.

In response to comments from the Committee regarding the new Local Government Reorganisation (LGR) corporate risk, the Risk Manager advised that the risk reflected uncertainty pending Government decisions regarding LGR, and recognised the potentially significant implications for services, finances, economic growth and strategic direction for Huntingdonshire.

The Committee noted that the adoption of the revised Whistleblowing Policy discussed earlier in the meeting, Minute Number 88 refers, would help reduce governance-related risks around fraud and corruption.

Whereupon it was

RESOLVED

that the Committee commented on the reports in the appendices and progress with risk management and noted the risks to the organisation and whether they are being managed in line with the Risk Management Strategy.

92. LGR RISK REGISTER

The Committee received a report (a copy of which is appended in the Minute Book) providing an update on the approach being taken to identify, access and manage risks associated with Local Government Reorganisation (LGR). Heatmaps and a summary LGR risk register were included as appendices to support the Committee's oversight of the current LGR risk profile.

The Risk Manager introduced the report, advising that it had been written before the Government's recent pause announcement and that some references to programme management structures and workstreams would therefore no longer reflect the current position. Despite this, officers considered the identified risks to remain valid and capable of being reactivated once Government decisions were confirmed.

Members welcomed the work undertaken to establish a comprehensive framework and acknowledged that the register would provide a valuable basis for future risk management when the programme resumed.

In response to comments from the Committee regarding the risks relating to delayed decision-making, contract uncertainty and staffing arrangements associated with the pause, the Risk Manager advised that:

- appropriate contractual provisions had been incorporated into relevant arrangements;
- staff seconded into programme roles would return to substantive positions; and

- internal resources were being redirected to other projects pending Government announcements.

Whereupon it was

RESOLVED

that the Committee commented on the progress the Council is making in regard to its management of risk related to Local Government Reorganisation, including the summary and heatmap reports in the appendices.

93. INTERNAL AUDIT PROGRESS REPORT

The Committee received a report (a copy of which is appended in the Minute Book) providing an update on the work of the Internal Audit Service since the last meeting and progress against the Internal Audit Plan 2026/27 that was approved by the Committee on 18th March 2026.

The Head of Internal Audit, Dan Harris of RSM introduced the report.

Members questioned how employees could operate without up-to-date job descriptions. Officers explained that whilst individuals had continued to perform their functions, documentation had not always been updated to reflect evolving responsibilities over time. Officers confirmed that comprehensive reviews had now been undertaken and systems improved to ensure job descriptions formed part of annual review processes.

The Executive Councillor for Governance & Democratic Services confirmed that regular meetings were taking place with Internal Audit and senior officers to monitor implementation of recommendations and ensure risk and governance issues remained a priority.

Whereupon it was

RESOLVED

that the Committee commented on and noted the update on work undertaken by Internal Audit to date.

94. INTERNAL AUDIT ACTIONS UPDATE

The Committee received a report (a copy of which is appended in the Minute Book) summarising the progress made in implementing management actions arising from final internal audit reports.

The Corporate Director – Finance & Resources introduced the report.

The Committee commented on the volume of actions being managed and questioned whether sufficient resources existed to deliver all improvements.
The Corporate Director – Finance & Resources advised that Heads of Service were encouraged to identify any resource implications during discussions with Internal Audit and that Corporate Leadership Team oversight and ongoing dialogue remained in place to manage

priorities appropriately.

The Committee requested officers to enhance future reporting by showing the opening number of ongoing audit actions to better illustrate movements between categories during each reporting period. Officers agreed to review the format of future reports.

Whereupon it was

RESOLVED

that the Committee commented on and noted the current position regarding actions arising from internal audit reports.

Chair

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Corporate Governance Committee – 18th November 2026

Report by: Interim Monitoring Officer/Deputy Monitoring Officer

Lead Cllr: Councillor L Dewey-Beckett
Executive Councillor for Governance and Democratic Services

Wards	Open / Exempt	Key Decision?
All	Open	No

Code of Conduct Complaints – Annual Update

Executive Summary: This report provides Members with an annual update on complaints cases regarding alleged breaches of the Code of Conduct. The Committee is responsible for maintaining high standards of conduct by Members of the District and Town and Parish Councils, for monitoring operation of the Code of Conduct and for considering the outcome of investigations in the event of breaches of the Code.

Recommendations

1.1. To note the progress of any outstanding Code of Conduct complaints and the conclusion of cases resolved to date, as set out in Appendix 1.

	Key Corporate Plan Priorities
1	*Doing our core work well.*
2	

	Place Strategy Priorities
1	*Not directly applicable – the report concerns the Council's statutory governance and ethical standards arrangements and does not directly deliver a Place Strategy priority.*
2	

Report Author(s)

Lee Gardner, Interim Monitoring Officer (lee.gardner@huntingdonshire.gov.uk)
Lisa Jablonska, Elections and Democratic Services Manager & Deputy Monitoring Officer (lisa.Jablonska@huntingdonshire.gov.uk)

1. PURPOSE OF THE REPORT

1.1 The purpose of this report is to provide a summary and update of completed or ongoing complaints received regarding alleged breaches of the Code of Conduct under the Localism Act 2011 since the start of the year.

2. BACKGROUND & CONTEXT

2.1 In accordance with the functions of the Committee, this report seeks to provide a summary of the current position in relation to the Code of Conduct complaints since the last meeting.

2.2 The Committee has the responsibility for promoting and maintaining high standards of conduct within the Council, including monitoring operation of the Code of Conduct which also includes Town and Parish Councils.

2.3 Details of allegations/complaints in relation to the Code of Conduct have been outlined in the table in Appendix 1 to the report. Specific detailed information regarding the complaint has not been provided as this may be prejudicial to the conduct of the ongoing complaints process and to protect the identity of councillors who may not have breached the Code of Conduct.

2.4 The process for dealing with conduct complaints is set out in the Monitoring Officer Protocol but once referred to the Monitoring Officer investigation stage, they are required to consult with the Independent Person following an initial assessment and before any decisions are taken as to what, if any, further action is considered appropriate.

2.5 There has been a substantial increase on the number of complaints received since May 2026. So far, this financial year we have received 58 this year compared to 3 in the whole of the last financial year, which have caused delays in dealing with these matters.

3. ALTERNATIVE OPTIONS CONSIDERED & NOT RECOMMENDED

3.1 No alternative options have been identified. This is an information report and no decision is required beyond noting the current position.

3.2 The Monitoring Officer however intends to review the current procedures, forms and consider if a further Independent Person is required. This will be subject to further reports to be considered by the Committee.

4. COMMENTS OF OVERVIEW & SCRUTINY

4.1 N/A

5. POST-DECISION IMPLEMENTATION

5.1 Following consideration by the Committee, the Monitoring Officer will continue to progress outstanding complaints in accordance with the Council's adopted arrangements. A further update will be provided through the next annual report, or earlier where a matter requires consideration by the Committee.

6. IMPLICATIONS OF THE DECISION

6.1 Council Key Priorities and Performance

6.1.1 The report supports the Corporate Plan priority of 'Doing our core work well' by providing transparent oversight of the Council's arrangements for maintaining high standards of member conduct and by demonstrating that complaints are managed consistently under the adopted process.

6.1.2 There is no specific Corporate Plan performance measure associated with this information report. The annual reporting process provides a governance control by enabling the Committee to monitor the operation of the Code of Conduct complaints arrangements.

6.2 Financial Implications

6.2.1 There has been a greater need for the use of external support due to the increase in complaints. The administration and consideration of Code of Conduct complaints will continue to be met from existing Democratic Services, Monitoring Officer and Legal Service resources and approved revenue budgets. If further budget provision is required there is sufficient underspend in the Directorate budget to cover these expenses.

6.2.2 Should an individual complaint require external legal advice or an independent investigation, additional costs may arise. Any such costs would be considered and managed on a case-by-case basis in accordance with the Council's financial procedures and available budgets.

6.3 Policy Implications

6.3.1 The report relates to the Council's adopted Members' Code of Conduct and arrangements for dealing with complaints. No change to existing policy is proposed.

6.4 Legal & Constitutional Implications

6.4.1 The report is presented in the context of Part 1, Chapter 7 of the Localism Act 2011. Section 27 requires the Council to promote and maintain high standards of conduct by members and co-opted members and to adopt a code dealing with their conduct. Section 28 requires the Council to have arrangements in place for investigating and determining written allegations that the Code has been breached, including provision for consultation with at least one Independent Person.

6.4.2 The Corporate Governance Committee's responsibilities for standards and ethical governance are set out in its Terms of Reference within the Council's Constitution. The report does not seek a determination on any individual complaint and does not alter the Council's existing complaints arrangements.

6.5 Community Impact

6.5.1 There are no direct community impacts arising from noting the report. Effective and transparent arrangements for dealing with conduct complaints support public confidence in local democratic governance.

6.6 Environment & Climate Change Implications

6.6.1 There are no direct environment or climate change implications arising from this information report.

6.7 Equality & Diversity Implications

6.7.1 The report is for information and does not propose a change to policy or service delivery. The complaints process applies consistently to allegations concerning District, Town and Parish Councillors. Individual cases will continue to be considered on their facts, with reasonable adjustments and accessible communication provided where required.

6.8 Implications on Resources

6.8.1 Due to the substantial increase in the number of complaints there has been the need for additional external support. Complaints will continue to be administered within existing Monitoring Officer and Democratic Services resources.

6.9 Health & Wellbeing Implications

6.9.1 There are no direct community impacts arising from noting the report. Effective and transparent arrangements for dealing with conduct complaints support public confidence in local democratic governance.

6.10 Local Government Reorganisation (LGR) Implications

6.10.1 There are no direct Local Government Reorganisation implications arising from this information report. Any future changes to standards arrangements resulting from reorganisation would be considered separately through the appropriate governance process.

7. RISK MANAGEMENT

7.1 The principal risk is that delays, inconsistency or insufficient oversight in handling Code of Conduct complaints could undermine confidence in the Council's standards arrangements and expose the Council to reputational or legal challenge. This risk is mitigated through use of the adopted complaints process, consultation with the Independent Person where required, proportionate legal advice, appropriate confidentiality and regular reporting to the Corporate Governance Committee. As the recommendation is to note the report, no additional decision-related risk has been identified.

8. BACKGROUND PAPERS– LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

8.1 The principal background documents are listed below.

Document List	Custodian	File Location
Constitution – Members' Code of Conduct	Monitoring Officer/Democratic Services	Constitution
The Localism Act 2011	UK Parliament / legislation.gov.uk	Localism Act 2011

Appendix 1

Code of Conduct Complaints – Annual Report

The tables below provide an anonymised summary of Code of Conduct complaints received and considered during the reporting period. Complaints relating to District Councillors are shown separately from those relating to town and parish councillors to assist the Committee in monitoring the operation of the Code across the area.

Table 1: Headline complaints summary

Complaints activity	District Councillors	Town and Parish Councillors	Total
Complaints concluded during the previous reporting period	2	1	3
Complaints brought forward from the previous reporting period	0	0	0
New complaints received during the reporting period	46	10	56
Total complaints considered during the reporting period	**46**	**10**	**56**
Complaints concluded during the reporting period	22	6	28
Complaints outstanding at the end of the reporting period	24	4	28

Note: "Complaints considered" includes complaints brought forward from the previous reporting period and new complaints received during the current reporting period. Where multiple complaints concern the same incident, these have been counted separately unless stated otherwise.

Table 2: Outcome of complaints concluded

Outcome	District Councillors	Town and Parish Councillors	Total
A. Outside the scope or jurisdiction of the Code	0	4	4
B. No further action following initial assessment	19	0	19
C. Informally resolved	0	2	2
D. Withdrawn by the complainant	0	0	0
E. Not progressed for another stated reason	2	0	2
F. Referred for formal investigation	0	0	0

Outcome	District Councillors	Town and Parish Councillors	Total
G. Investigation concluded with no breach found	1	0	1
H. Investigation concluded with a breach found	0	0	0
I. Referred to a hearing or standards sub-committee	0	0	0
Total complaints concluded	**22**	**6**	**28**

Table 3: Principal nature of allegations

Principal category of allegation	District Councillors	Town and Parish Councillors	Total
A. Failure to treat others with respect	21	3	24
B. Bullying, harassment and discrimination	20	7	27
C. Impartiality of officers of the Council	0	0	0
D. Confidentiality and Access to Information	0	0	0
E. Bringing the Council into disrepute	1	0	1
F. Improper use of position	1	0	1
G. Use of local authority resources and facilities	0	0	0
H. Conduct outside the scope of the Code	0	0	0
I. Other	3	0	3
Total principal allegations	**46**	**10**	**56**

Note: Each complaint has been allocated to the category that most closely reflects its principal allegation. A complaint may contain more than one allegation or cite more than one provision of the Code. Consequently, the categories indicate the principal themes and are not intended to reproduce every element of each complaint.

Table 4: Stage of outstanding complaints

Current stage	District Councillors	Town and Parish Councillors	Total
A. Awaiting information or clarification	12	0	12
B. Initial assessment in progress	9	2	11
C. Independent Person being consulted	1	0	1

Current stage	District Councillors	Town and Parish Councillors	Total
D. Informal resolution being explored	0	0	0
E. Formal investigation in progress	0	2	2
F. Investigation completed and decision pending	0	0	0
G. Hearing or standards sub-committee pending	2	0	2
Total outstanding	**24**	**4**	**28**

Note: Outstanding complaints remain subject to the Council's adopted arrangements. No inference should be drawn from the fact that a complaint remains ongoing, and the inclusion of a complaint in this report does not indicate that a breach of the Code has occurred.

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Agenda Item 4

Corporate Governance Committee – 18th November 2026

Report by: Louise Sboui – Customer Services Complaints & Project Lead

Lead Cllr: Cllr Nathan Hunt
Executive Councillor for Resident Services & Corporate Performance

Wards	Open / Exempt	Key Decision?
All	Open	No

Annual Report of Complaints & Feedback

Executive Summary:

In line with the Local Government and Social Care Ombudsman's (LGSCO) Complaints Handling Code, a report is present to Elected Members each year setting out activity in respect of complaints and compliments received.

This report covers the period April 2025 to March 2026, detailing how complaints reduced across both stages compared with the previous year, while compliments remained broadly stable.

The report demonstrates how complaints continue to provide valuable learning opportunities and drive service improvement, with actions taken to strengthen processes, guidance, training, systems and communications. The report also outlines the progress made to ensure the Council's ongoing compliance with the LGSCO Complaints Handling Code.

Recommendations

The Corporate Governance Committee is recommended to:

- Note the 2025/26 complaints, compliments and Ombudsman performance data.
- Note the changes made to complaints policies and processes to ensure compliance with the LGSCO Complaints Handling Code.

	Key Corporate Plan Priorities
	The report outlines activity undertaken in relation to Priority 3 of the Corporate Plan: *Doing our core work well*, by demonstrating how complaints and customer feedback are used to support service quality, value for money, effective control and compliance with statutory obligations.

Report Author: Louise Sboui, Customer Services Complaints and Project Lead
Louise.sboui@huntingdonshire.gov.uk

PURPOSE OF THE REPORT

1.1 This report provides Members with an overview of complaints, compliments and Ombudsman activity for the period April 2025 to March 2026, together with an update on the changes made to support compliance with the LGSCO Complaints Handling Code.

1.2 Although this report is presented to Members annually, complaints are monitored throughout the year via the Performance and Efficiency Board, with more detailed updates provided to the Corporate Leadership Team (Governance) on a monthly basis.

2. WHY IS THIS REPORT NECESSARY

2.1 Huntingdonshire District Council values customer feedback as an important source of learning, accountability and service improvement. Effective complaint handling relies on clear processes, skilled staff and a positive organisational culture, enabling issues to be resolved early, customer relationships to be strengthened, and operational insight to be used to improve services.

2.2 The Council operates a two-stage complaints process; Where a customer remains dissatisfied following the Stage One response, they may escalate their complaint to Stage Two for review by the relevant senior manager, or by a manager independent of the service complained about. Customers are then signposted to the LGSCO where they remain dissatisfied.

2.3 This report provides Members with data on Stage One and Stage Two complaints and compliments received by service area, alongside a summary of the outcomes and the annual statistical summary from the LGSCO.

3. BACKGROUND & CONTEXT

3.1 The LGSCO's Complaint Handling Code sets out how organisations should embrace complaints, demonstrating how good complaint handling processes ensure that feedback from local residents and businesses can be used to deliver service improvements. The benefits of having an effective complaints process are set out as follows:

- Good complaint handling promotes a positive relationship between an organisation and service users.
- Complaints allow an issue to be resolved before it becomes worse. Those issues not resolved promptly can take significant resource and time to remedy.
- Involvement in complaint resolution develops staff ownership, decision-making and engagement.
- Complaints provide senior staff with essential insight into day-to-day operations, allowing them to assess effectiveness and drive a positive complaint handling culture.
- Data collected about complaints can be analysed and used to inform key business decisions to drive improvement in service provision.

Source: *LGSCO Complaints Handling Code*

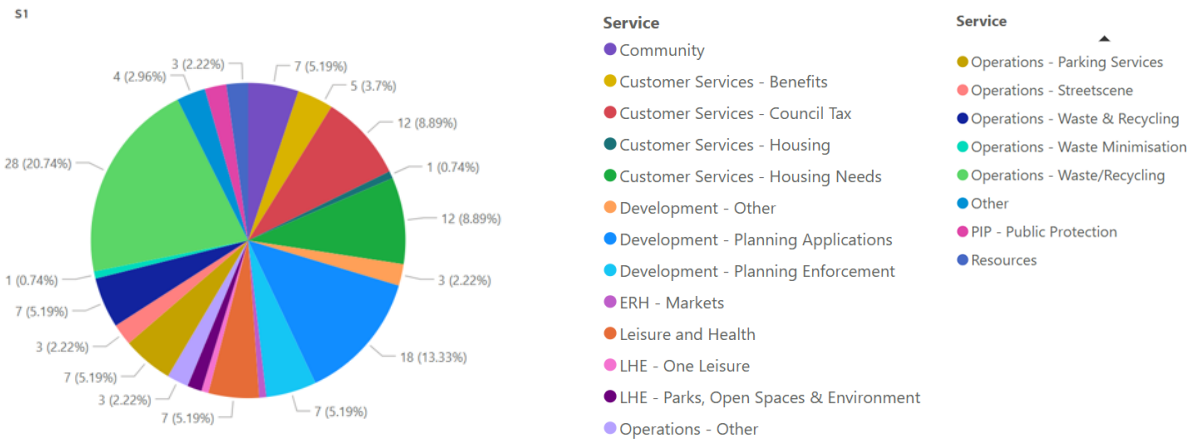
3.2 The Council delivers a wide range of services to residents and businesses across the district, involving a significant volume of customer contact and service transactions each year. Details regarding volumes are shown in the table in Appendix A. When considered in this context, the overall number of complaints received remain comparatively low.

Key findings:

- In 2025/26, the Council received 135 Stage One complaints, a reduction from 224 in 2024/25.
- In the same period, Stage Two complaints reduced to 34, compared with 42 in the previous year.
- The Council received 215 compliments, broadly similar compared with 217 in 2024/25.
- The highest number of complaints related to Operations, the vast majority in relation to missed bin collections, and Planning Services, primarily regarding dissatisfaction with decisions and delays. Overall complaint volumes remain low when considered alongside the high number of customer interactions and service transactions delivered by these areas.

COMPLAINTS AT STAGE ONE

3.2 The chart below shows Stage One complaints received by service area. Operations received the highest volume of Stage One complaints, although this should be considered in the context of the significant volume of service transactions delivered throughout the year.



COMPLAINTS AT STAGE TWO

3.3 Stage Two complaints reduced compared with the previous year. Planning, Infrastructure and Public Protection received the highest number of Stage Two complaints, primarily relating to planning applications.

3.4 The table in Appendix A summarises complaints by service area, including Stage One and Stage Two volumes, service context, key complaint themes and learning outcomes. For service areas with higher complaint volumes, transaction data has been included to allow consideration in proportion to overall service activity. Details of the proportion of complaints upheld/partially upheld are also provided.

Local Government and Social Care Ombudsman

3.5 The Ombudsman received 11 complaints relating to the Council and made 13 decisions during the year. Of these, 2 were not for the LGSCO or not ready for them to investigate. 8 complaints were assessed and closed, and 3 cases were formally investigated:

- One complaint relating to the handling of a complex Housing Benefit Claim was upheld. The findings and suggested remedy (a symbolic payment to recognise avoidable distress and uncertainty) were accepted, and improvements made to officer guidance.
- Two complaints were not upheld, relating to a missed bin collection and a Tree Preservation Order process. No service improvements were identified as a result of the investigation.

3.6 The LGSCO's report shows an upheld rate of 33% against an average of 74% upheld rate for similar Authorities. Further details can be found in Appendix B.

Performance Against Targets

3.7 Information published on the Council's website sets out the timescales for each stage of the complaints process. In 2025/26, the Council aimed to respond to all Stage One and Stage 2 complaints within 20 working days. These timescales are also reinforced in correspondence with customers, helping to manage expectations, build trust and reduce uncertainty while complaints are being considered.

3.8 The Council aims to respond to all complaints within target timescales, however despite best endeavours there are some occasions where delays are experienced. Subject matter complexity, further information is required from the complainant, the need to gather data from multiple teams or other organisations, and availability of key officers can all be factors which can impact on the timescale for response, although officers are encouraged to keep residents updated where response timescales are likely to be impacted.

3.9 During the period in question, the Council maintained strong performance at Stage One, with 92.3% of complaints responded to within target timescales, exceeding the 90% target. Of the 135 Stage One complaints received, 10 were responded to outside the target response period. The average delay was 2.5 days over the target, with the longest delay being eight working days.

3.10 Stage Two performance fell below target, with 73.5% of complaints responded to within target timescales against the 90% target. Of the 34 Stage Two complaints received, 9 were responded to outside the target response period. Most of these were delayed by just one or two days, with the longest delay being four working days.

Freedom of Information Requests

3.11 There are occasions where complaints and Freedom of Information (FOI) requests overlap. A customer complaint may include a request for information that falls within the scope of the Freedom of Information Act 2000 or UK General Data Protection Regulation (UK GDPR), or information disclosed through an FOI response may inform a subsequent complaint.

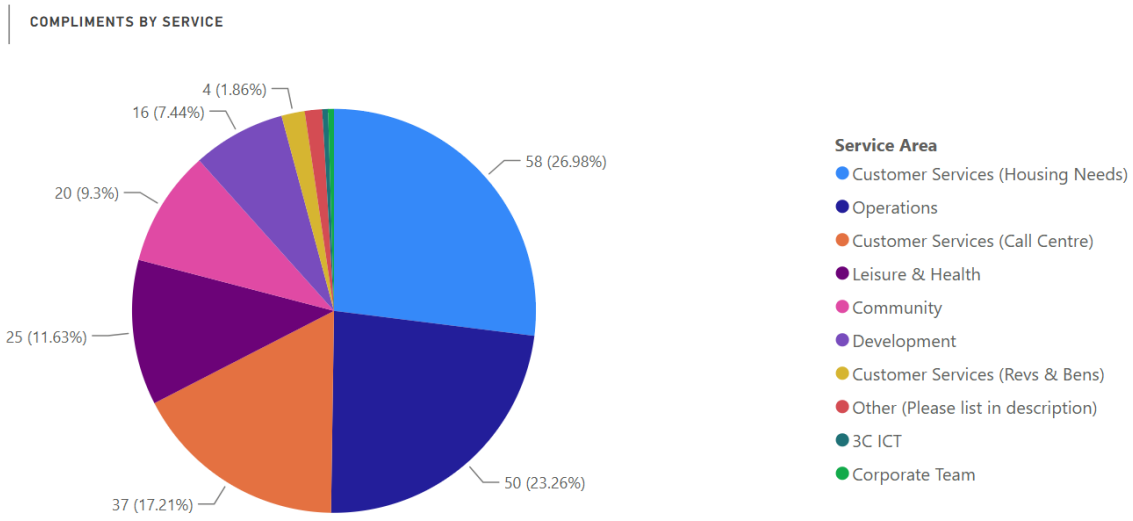
3.12 Although complaints and information requests are managed through separate statutory processes, crossover between the two can add complexity and, in some cases, affect the Council's ability to respond within target timescales.

Compliments Received

3.13 Feedback received through compliments provides an important balance to complaints data and helps to identify areas where services are working well. Positive feedback supports staff engagement, highlights good practice and provides further insight into the aspects of service delivery that customers value.

3.14 The number of compliments received in 2025/26 was 215, far exceeding the number of complaints received at 135.

3.15 The below chart shows the number of compliments received by service area. Housing, Operations and Call Centre received most compliments, but compliments also received for Planning, Community and Leisure. Further information can be found in Appendix E.



Changes to Complaints Handling 2026/27

3.15 A key area of work during 2025/26 has been preparing for compliance with the LGSCO Complaints Handling Code. Following a review of existing complaints processes and the Council's Customer Feedback Policy against the Code, a number of changes have been implemented, including:

- Reducing the Stage One response target from 20 to 10 working days.

- Introducing stricter requirements for complaint handling extensions, limited to no more than 10 working days.
- Improving arrangements for reasonable adjustments and accessibility by asking customers what support they may need.
- Strengthening third-party representation requirements through the introduction of a consent form.
- Updating website content, online forms, staff guidance, complaint templates and the Customer Feedback Policy.

3.16 The Council is required to maintain compliance with the Code and will complete an annual self-assessment to demonstrate this. The outcome will be included in the 2026/27 report.

4. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

N/A

5. COMMENTS FROM OVERVIEW & SCRUTINY

N/A

6. POST DECISION IMPLEMENTATION

N/A

7. IMPLICATIONS OF THE DECISION

Council Key Priorities and Performance

7.1 Complaints and customer feedback link with Priority 3 within the Corporate Plan - Doing our core work well. Outcome - Delivering good quality, high value-for-money services with good control and compliance with statutory obligations.

7.2 Whilst the number of complaints received represents a small proportion of overall customer interactions, the Council recognises the value of customer feedback and remains committed to learning from complaints to improve services and outcomes for residents, as demonstrated in section 3 and Appendix A.

8. BACKGROUND PAPERS

LGSCO Complaint Handling Guidance

LIST OF APPENDICES

Appendix A	Complaints by Service Area
Appendix B	LGSCO statistical information
Appendix C	LGSCO – neighbouring Authority Comparison
Appendix D	Complaint Volumes by Service – annual comparison
Appendix E	Compliments Recorded by Service

APPENDIX A – Complaints by Service Area 2025/26

Service area	Stage One	Stage Two	Total	% Upheld / Partially Upheld	Service volume / context	Key Complaint Themes	Key Learning Themes
Planning, Infrastructure and Public Protection	31	16	47	S1 - 35% S2 – 31.2%	2,782 planning decisions made; 308 enforcement cases registered.	• Delays in decision-making and responses • Dissatisfaction with planning and enforcement outcomes • Concerns about case handling and consultation processes	• Improved communication / expectation management • Strengthened processes and case management • Enhanced record-keeping • Reinforced staff awareness and training
Operations	40	4	44	S1 - 62% S2 - 50%	5,977,688 collections; 99.95% collection rate	• Missed collections • Garden waste subscriptions • Communal waste facilities • Grounds maintenance • Tree management • Officer conduct	• Improved communication / expectation management • Strengthened processes • Ensure customer-focused solutions • Increased collaboration with residents to improve local environmental outcomes.
Community and Operational Housing	20	3	23	S1 - 45% S2 – 0%	2,452 new or updated housing register applications submitted in 2025/26	• Housing delays • Disabled Facilities Grants allocation • Homelessness decisions • Temporary accommodation • ASB and environmental health case handling • Pest control and abandoned vehicle services.	• Improved communication / expectation management • Response timeliness • Decision-making • Improved internal processes • cross-service collaboration and policy/procedure review.

Service area	Stage One	Stage Two	Total	% Upheld / Partially Upheld	Service volume / context	Key Complaint Themes	Key Learning Themes
Customer Services, Revenues and Benefits	17	5	22	S1 - 53% S2 – 60%	Council Tax approx. 85,000 properties; Business Rates approx. 5,500 commercial properties. Around 8,300 benefit claims	• Benefits Assessment Delays • Entitlement decisions • Council Tax liability and discounts • Recovery and enforcement • Communication delays • Outcomes linked to the Valuation Office Agency.	• Improved communication • Staff training and awareness • Improved internal processes • Improved recording of customer needs and reasonable adjustments.
Economy, Regeneration and Housing Delivery	11	4	15	S1 - 36% S2 – 50%	n/a	• Parking enforcement • Permits and charging Parking equipment • Staff conduct • Trader permits • Pitch management Regeneration-related place-making changes.	• Improved internal processes • Improved information and guidance • Staff awareness and training • Improved partnership working to resolve issues and prevent recurrence.
Leisure and Health	11	2	13	S1 - 72% S2 – 100%	1,611,406 attendances	• Booking arrangements • Leisure facility condition and maintenance • Public space management • Accessibility • Event management • Resident/stakeholder communication.	• Improved communication • Improved internal processes and systems • Improvements to service quality standards and accessibility • Partnership working.

Service area	Stage One	Stage Two	Total	% Upheld / Partially Upheld	Service volume / context	Key Complaint Themes	Key Learning Themes
Finance and Corporate Services	4	0	4	100%	n/a	• Insurance response delays • Property damage claims • Estates response issues	• Review cases for improvement opportunities • Strengthen cross-service processes and collaboration • Reinforce timely communication and responsiveness.
Other	1	0	1	S1 - 0%	n/a	• Display of flags (The St George's flag)	• No wider learning theme identified from the information provided.
Total	**135**	**34**	**169**				

Appendix B LGSCO Local Authority Report – Huntingdonshire District Council

Complaints and Enquiries Received (by Category) 2025/2026

HDC	Benefits and Tax	Corporate and Other Services	Environment Services, Public Protection and Regulation	Planning and Development	Housing	Highways and Transport	Adult Care Services*	Total
2025/26	4	0	1	5	1	0		11
2024/25	2	1	8	8	1	1	0	21
2023/24	3	2	4	9	1	0	0	19

Complaints and Enquiries Decided (by Outcome) 2025/6

HDC	Upheld	Not upheld	Advice given	Closed after initial enquiry	Incomplete/ invalid	Referred back for local resolution	Total	Uphold rate (%)	Average uphold rate (%) of similar authorities*
2025/26	1	2	0	8	0	2	13	33%	74%
2024/25	1	0	0	10	2	4	17	6%	15%
2023/24	1	2	0	12	0	6	21	33%	63%

A number of cases will have been received and decided in different business years, this means the number of complaints and enquiries received will not always match the number of decisions made. *Uphold rate adjusted for Huntingdonshire District Council's population, this is 0.5 upheld decisions per 100,000 residents. The average for authorities of this type is 1 upheld decision per 100,000 residents. The LGO advice comparing individual council uphold rates against the average rate rather than against previous years.

Appendix C LGSCO Neighbouring Authority Statistics

Cambridgeshire Councils	Detailed investigations decided (by outcome) 2025/26		Uphold rate	Complaints and enquiries (Decided)
	Not upheld	Upheld		2025/26
Huntingdonshire (population 180,800)	**2**	**1**	**33%** (74%)	**13**
South Cambridgeshire (population 162,000)	0	1	100% (74%)	10
Fenland (population 102,500)	0	1	100% (74%)	12
East Cambridgeshire (population 87,700)	1	0	0% (74%)	2
Cambridge City (population 145,700)	0	2	100% (74%)	24
Cambridgeshire County Council	2	49	96% (89%)	141
Peterborough City Council (Population 215,700)	2	8	80% (85%)	60

* Cambridgeshire Insight – Population – Census 2021 – First Results

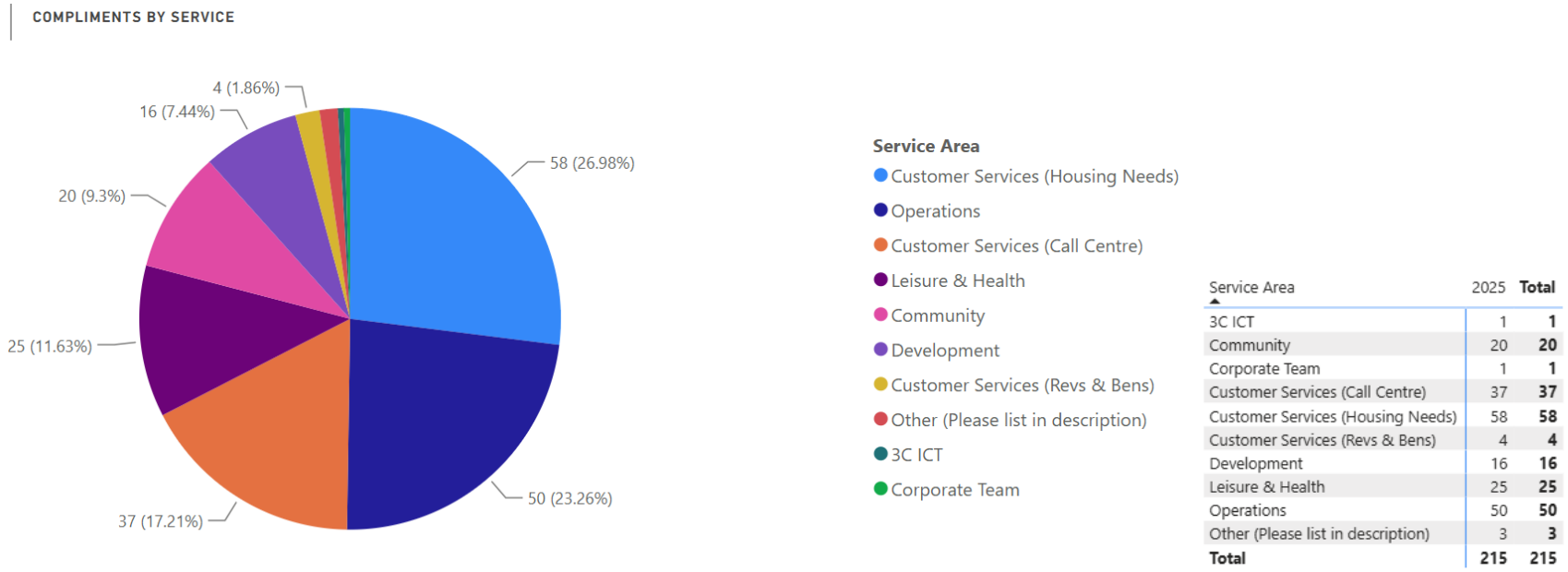
Appendix D - Complaint Volumes by Service – annual comparison

Service	Stage One			Stage Two			Total			LGO investigations		
	2023/24	2024/25	**2025/26**	2023/24	2024/25	**2025/26**	2023/24	2024/25	**2025/26**	2023/24	2024/25	**2024/25**
Community & Operational Housing	13	10	**20**	3	3	**3**	16	13	**23**			
Customer Services, Revenues & Benefits	28	30	**17**	3	5	**5**	31	35	**22**	1		**1**
Economy, Regeneration Housing Delivery	0	0	**11**	0	0	**4**	0	0	**15**			
Planning, Infrastructure & Public Protection	50	41	**31**	10	16	**16**	60	57	**47**	2		**1**
Operations	98	131	**40**	15	16	**4**	113	147	**44**			**1**
Finance & Resources	5	6	**4**	1	1	**0**	6	7	**4**		1	
Leisure and Health	10	4	**11**	1	1	**2**	11	5	**13**			
Shared Services 3CICT/building control/Legal	0	2	**0**	0	0	0	0	2	**0**			
Other (cross cutting)	2	0	**1**	0	0	0	2	0	**1**			
Total	206	224	**135**	33	42	**34**	239	266	**169**	3	1	**3**

Recent changes in Service structure:

Community & Operational Housing includes Housing, Resident Advice, Community Resilience.	**Customer Services, Revenues & Benefits** includes Council Tax, Benefits, and Customer Services/Call Centre, Fraud.	**Economy, Regeneration, Housing Delivery** includes Economic Development, Parking, Markets, Regeneration, Housing Delivery
Planning, Infrastructure & Public Protection includes Planning, Environmental Health, Licensing.	**Leisure & Health** includes One Leisure, Active Lifestyles, Parks, Open Spaces & Environment.	**Finance & Resources** includes Property & Facilities, Insurance, HR, Finance, Democratic Services, Audit.

Appendix E – Compliments received by Service – 2025/26



Service Area	2025	Total
3C ICT	1	**1**
Community	20	**20**
Corporate Team	1	**1**
Customer Services (Call Centre)	37	**37**
Customer Services (Housing Needs)	58	**58**
Customer Services (Revs & Bens)	4	**4**
Development	16	**16**
Leisure & Health	25	**25**
Operations	50	**50**
Other (Please list in description)	3	**3**
Total	**215**	**215**

Compliments Recived by year, vs Complaints

	2025/26	2024/25	2023/24	2022/23	2021/22
Compliments Received	215	217	206	233	276
Complaints Received	135	224	206	175	233

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Insert:
Corporate Governance Committee – 18th November 2026

Report by: Information Governance Manager & Data Protection Officer

Lead Cllr: N Hunt
Executive Councillor for Resident Services and Corporate Performance

Wards	Open / Exempt	Key Decision?
All Wards	Open	~~Yes /~~ No

2025/26 Compliance with Information Rights and Information Governance

Executive Summary:
The Information Governance Service for Huntingdonshire District Council (HDC) is currently provided by 3C ICT Shared Service hosted by Huntingdonshire District Council. This also serves South Cambridgeshire District Council and Cambridge City Council.
The Information Governance (IG) Team leads on:

- data protection compliance advice,
- information and records management advice, and
- information requests under the Freedom of Information Act 2000, (FOIA) the Environmental Information Regulations (EIR) the Data Protection Act 2018 and the UK GDPR.

This is an annual report on the Council's compliance with the Freedom of Information Act 2000 and Environmental Information Regulations 2004.

This report also includes the Councils performance regarding protecting personal data and covers the period April 2025 to March 2026.

The number of requests received by the Council in 2025-26 was 563; an increase on the previous year's total of 520 (an 8% increase).

Recommendations

Corporate Governance Committee is asked to note the contents of this report

	Key Corporate Plan Priorities
1	***Delivering good quality, high value-for-money services with good control and compliance with statutory obligations***
2	

	Place Strategy Priorities
1	
2	

Report Author(s)

Adam Brown, Information Governance Manager & Data Protection Officer (adam.brown@3csharedservices.org)

1. PURPOSE OF THE REPORT

1.1 The purpose of this report is to provide an update on Information Governance activity and performance during 2025-26; and highlight any issues encountered and actions to be undertaken to improve performance.

1.2 It provides:

- An overview of the current arrangements in place to monitor the Information Governance at the Council including Data Protection Compliance and Information Security / Cyber Security Compliance.

1.3 An update on performance relating to:

- Freedom of Information Act (FOIA) / Environmental Information Regulations (EIR) Requests
- Data Subject Rights Requests
- Personal Data Breaches

2. BACKGROUND & CONTEXT

2.1 Information is a vital asset and needs to be managed securely by the council. Appropriate policies, guidance, accountability, and structures must be in place to manage the council's information legally, securely, and effectively to minimise risk to the public and staff and to protect its finances and assets. This aligns with Priority 3 of the Corporate Plan, delivering good-quality, high value-for-money services with good control and compliance with statutory obligations.

2.2 Information Governance describes the holistic approach to managing information. This includes access to information, data quality, information management, information security and information sharing, data privacy and data protection and other relevant information law compliance, including but not limited to the Freedom of Information Act, the Data Protection Act/UK GDPR, the Environmental Information Regulations, Privacy in Electronic Communications Regulations

2.3 Organisational Arrangements

2.3.1 The Information Governance Service for Cambridge City Council, South Cambridgeshire District Council and Huntingdonshire District Council is currently provided by 3C ICT Shared service hosted by Huntingdonshire District Council. The Information Governance Team leads on Information Requests, Data Protection Compliance, Data Privacy and provide additional advice around Information Management; whilst the 3C ICT Cyber and Information Security Team provide support on Information Security.

2.3.2 The Information Governance Team consists of eight members:

- The Data Protection Officer (DPO)/Information Governance Manager, manages and oversees the service, and provides specialist advice on complex matters around data protection and information management for all three councils.
- The Deputy Data Protection Officer provides cover and supports the team in the absence of the DPO and is also responsible for the

information asset registers for the three councils and supports the Information Management Officers.

- The Requests Manager who leads the information requests and transparency functions for the team. The Requests Manager provides specialist advice and guidance to staff and Members on FOIA and EIR.
- Information Management Officers who support the Information Governance Officers with complex information requests and also provide advice and guidance to the councils' internal departments on matters relating to data sharing, data protection impact assessment and personal data incident investigations.
- Two part-time Information Governance Officers who manage incoming information requests and coordinate internal requests for support around personal data incidents/breaches, advice on data sharing and data protection impact assessments/contract reviews.

2.3.3 As this is a shared service, the Data Protection Officer (DPO) is the statutory DPO for all three authorities.

2.3.4 A Joint Information Governance and Security Board was established in April 2023. The Board is made up of representatives of HDC, SCDC and Cambridge City Councils to ensure that the three councils work together to ensure good information security and governance. The Joint Information Governance and Security Board monitors and is responsible for ensuring that the council meets the compliance obligations of relevant information law.

2.3.5 Terms of reference for the Joint Information and Security Board were reviewed and agreed in July 2026.

2.3.6 The Joint Information Governance and Security Board meets quarterly and last met in October 2026.

2.4 Data Protection Compliance

2.4.1 Compliance against the obligations of the Data Protection Act and UK GDPR are monitored in line with the ICO's Accountability Framework.

2.4.2 The ICO's Accountability Framework has been expanded, where appropriate, to consider the other information law regimes that come under the remit of the 3C ICT Information Governance service which are

- Freedom of Information Act(FOIA), and
- Environmental Information Regulations(EIR)

2.4.3 The Information Governance Team work against identified risks and issues in the Accountability Framework, against the main areas of

- Contracts and Data Sharing
- Individual's Rights

- Leadership and Oversight
- Policies and Procedures
- Risk and DPIA
- Lawful Basis and Records of Processing Activity (ROPA)
- Training and Awareness
- Transparency

2.4.4 Updates to monitor the status and progress of the plan are provided to the Joint Information Governance and Security Board on a quarterly basis.

2.4.5 Work has been ongoing to align policies to a standard framework which has resulted in 2 new policies and a significant number of policies in final draft at the end of the financial year

2.4.6 Policies reviewed in 2025-26

- Generative AI Policy
- Clear Desk Policy
- Patching Policy
- Incident Management Policy
- Database Administration Policy
- Data Protection Policy
- Access to Information Policy
- Retention Policy
- Appropriate Policy Document

2.5 Information Security Compliance

2.5.1 Cyber security remains vital for everyday operations and regular business processes. The council must keep systems that are secure and reliable, so that residents, public users, and partner agencies can trust them to connect systems and share information and data across various platforms.

2.5.2 The approach of the Cyber and Information Security Team is to follow the principles of the NCSC Cyber Assessment Framework (CAF) and 10 Steps to Cyber Security. The service reports into the Joint Information and Security Board on a quarterly basis, with a detailed report against high and medium cyber security risks.

2.5.3 The Joint Information and Security Board also receive a quarterly report on cyber security incidents. The number and cause of incidents are given in the table below.

Cause of incident	Number of incidents
Malware	1
Anti-virus disabled	1
Supply chain phishing	1

Table 1: Cyber security incidents 2025-26

2.5.4 In each case action was taken to contain the incident and additional monitoring was applied to affected accounts and devices to provide assurance that no malicious activity has occurred.

2.5.5 Simulated Phishing Campaigns.
Phishing is the practice of sending emails that appear to be from a reputable source but are sent by a malicious actor. It is estimated that around 80% of all security incidents start with email-based phishing, and due to the success of this strategy, the number and sophistication of these attacks is rapidly increasing

2.5.6 In order to gain visibility into the risk specific to the council, raise user awareness, and improve user capability to detect and appropriately handle Phishing emails, 3C ICT use “Simulated Phishing Campaigns” which involves sending realistic but safe Phishing emails to users on a regular basis. These campaigns have been running over the course of 2025-26, and the results reported to the Joint Information and Security Board.

2.5.7 Over the course of 2025-26 user awareness has improved, as evidenced by a decrease in the number of phishing e mails that have been opened, as well as an increase in the number reported. Remedial training is targeted at those staff who engage with these e mails.

2.5.8 Simulated phishing exercises are only one of several mitigations the Council has in place to reduce the risk posed by phishing, including e mail security, antivirus and firewalls

2.6 Data Protection – Request Performance

2.6.1 The Data Protection Act 2018 is the UK’s implementation of the General Data Protection Regulations (GDPR). Data protection is concerned with personal data about individuals rather than general information.

2.6.2 The Information Governance Team coordinate requests relating to individuals’ rights such as right to request access to the personal data the Council holds, right to erasure, right to rectification as well as third party requests for personal data such as from the Police or to prevent or detect fraud.

2.6.3 Individual rights requests must be responded to within a month. Individual requests made during the year were as follows:

Category	Received	Compliance with time frame (30 Days)
Data Rights Requests (including SAR, erasure and rectification requests)	23	74%
SAR Complaints	1	100%
Disclosure for Crime and taxation purposes	23	100%
Disclosure for Legal purposes	7	86%

Table 2: Data Protection requests 2025-26

2.6.4 The Data (Use and Access) Act 2025 introduced a statutory obligation to maintain an internal data protection complaints process. Prior to the implementation of the Act, it was considered best practice to provide a review stage to personal information rights requests, and the Council has included these in its Internal Review Policy since 2022. As with requests made under FOIA or EIR this allows the Council the opportunity to review its handling of the request and to consider any appeals that the requester has made in relation to their request. The Council had one complaint relating to Data Protection Rights this year.

2.6.5 Requesters also have a right to complaint to the ICO in their capacity as the regulator. The Council did not receive any complaints relating to Data Protection from the regulator this year.

2.7 PERSONAL DATA INCIDENTS AND BREACHES

2.7.1 The guidance on notification of data breaches under the Data Protection Act / GDPR is that if a breach or incident is likely to result in high risk to the rights and freedoms of individuals, the Council must inform the ICO within 72 hours of becoming aware of the issue. If it's likely to result in high risk to rights and freedoms of individuals, the Council has a lawful duty to inform the individuals without undue delay.

2.7.2 As result, the Information Governance team have established a framework to ensure that each reported incident is assessed for:

- The potential detriment and adverse effect to the data subject. This includes emotional distress and information about the private aspects of a person's life becoming known to others.
- The extent of detriment, which could depend on the volume of the data and its sensitivity.

The assessment is carried out by a member of the Information Governance team when an incident is reported by a Service Area.

2.7.3 All incidents relating to personal data are logged to identify any trends, with the view to establish if any mitigations need to be put into place to prevent likely recurrence. Mitigations could include requiring additional training, reviewing current processes, or issuing advice or briefing notes.
The Information Governance Team continues to encourage reporting of incidents to support learning and early identification of trends, and the increase of incidents is a result of increased awareness, ease of reporting and a continued effort to improve the culture of learning from incidents

	Incidents	Reported to ICO
2021-22	25	2
2022-23	27	0
2023-24	20	1
2024-25	30	1
2025-26	42	1

Table 3: Personal data incidents 2021-2026

2.7.4 42 incidents were reported in 2025-26, an increase in the number of incidents from last year. All reported incidents are reviewed and a breakdown of these follows:

Type of Incident (Category)	Number
Personal details inappropriately disclosed (e.g. via email or post)	28
Unauthorised access or disclosure	1
Near miss/Not a data breach	13

Table 4: Categories of personal data incidents 2025-26

2.7.5 In all instances, immediate steps were taken by officers to mitigate the incident, once known. Examples included contacting incorrect receiver of emails from the recipients of the email and those affected and removing documents from the Council's website.

2.7.6 One incident in 2025-26 was assessed to be of a severity to report to the Information Commissioner's Office (ICO). The Information Governance team worked with the affected service to review the circumstances of the incident, and to identify mitigating actions to be taken by the service to prevent a similar breach occurring in the future. The ICO has not contacted the Council about any further action to date.

2.7.7 A quarterly update on incidents is provided to the SIRO to ensure visibility and ensure any improvements needed are discussed and followed through as appropriate. Where relevant learning from breaches/incidents/near misses is also shared across the three councils to minimise the risk of further occurrence.

2.7.8 The Information Governance Team deliver training and provide additional support for services where repeat incidents occur or following a high-risk data breach. This training and support are provided to identify and eliminate root causes of these incidents.

2.8 FREEDOM OF INFORMATION / ENVIRONMENTAL INFORMATION REQUESTS

2.8.1 The public has the right of access to information held by the Council under the Freedom of Information Act. The Freedom of Information Act (FOIA) works alongside the Environmental Information Regulations (EIR).

2.8.2 Requests for information that are not dealt with as part of the day-to-day business of the Council should be considered as Freedom of Information requests.

2.8.3 3C ICT Information Governance oversees the request management system for handling information requests. Ownership of the response to these requests is placed on service areas by means of key responders and champions being designated and responsible for ensuring their service responds within the legal timeframe of 20 working days. An Information Governance Officer coordinates all formal requests and allocates specialist support from the Information Governance team where service areas require this.

2.8.4 In 2025-26 (Apr – Mar) the council received a total of 563 requests under FOIA and EIR. This represents an 8% increase in the number of requests received in the previous year.

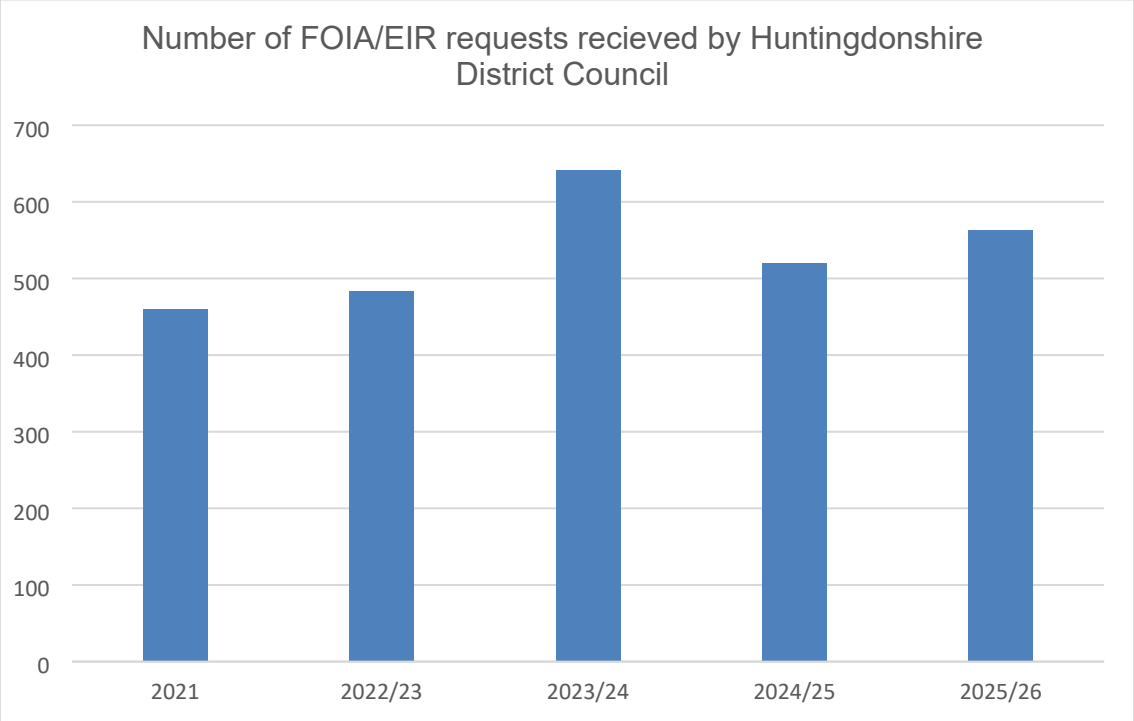


Chart 1: FOIA and EIR requests received by HDC 2021-26

2.8.5 The Council works to a target of 90% response compliance within 20 days as advised by the Information Commissioner. We achieved 86% in 2025-26 which is an improvement in the response rate from previous years, and the highest for six years.

2.8.6 Detail of the requests received across all Council services is provided below. The Place and Communities Directorates have received the most cases.

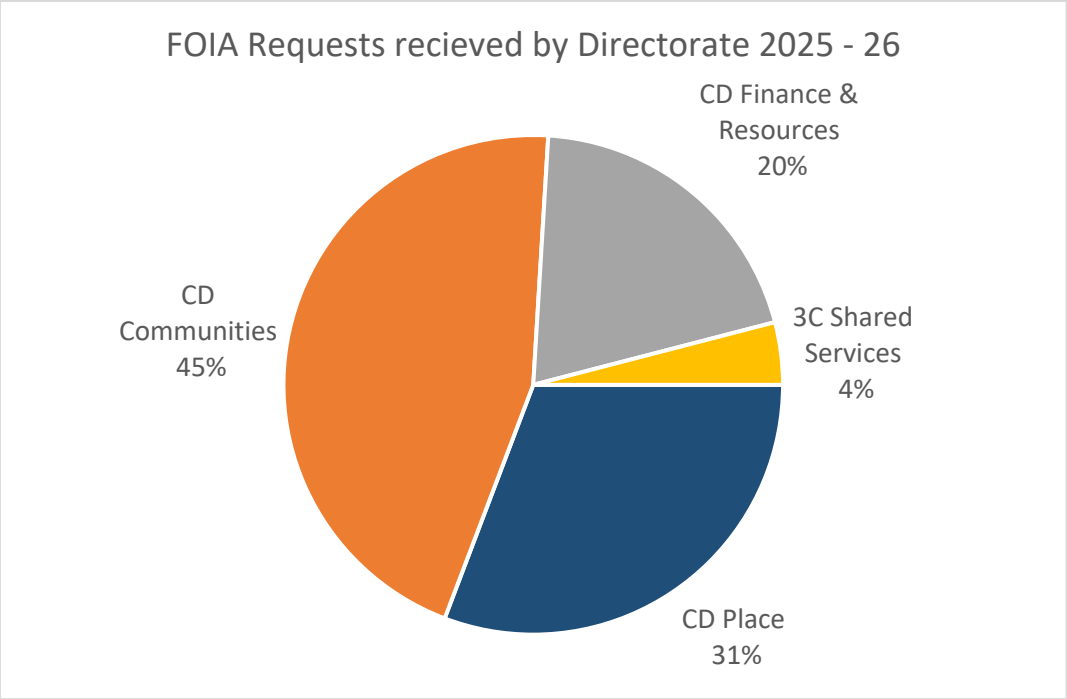


Chart 2: FOI requests by Directorate

2.8.7 Access to information acts such as FOIA and EIR provide a limited right of access. Some information may be withheld if an exemption to disclosure applies. All requested information was provided in most cases, with information being exempted in only 13% of cases. See breakdown of outcomes below.

Request Outcome	Count
All information provided	365
Some information provided; remainder exempt	40
Some information provided; remainder not held	3
Exemptions applied to all information	72
Exceeds reasonable limits	4
Not held	51
Withdrawn	28

Table 5: Outcomes to information requests 2025-26

2.8.8 The Information Governance team continue to provide reports on performance and compliance with the legislation, which are shared on the HDC intranet on a quarterly basis. These reports also enable services to understand trends, and to help focus on what should be uploaded onto their publication scheme.

2.8.9 Requestors have the right to a review of their case if they are not satisfied with the outcome or how the request was handled, before taking further action to the Information Commissioner's Office.

	Received	Response within 20 working days
Internal Reviews	15	93%
ICO Complaints	1	100%

Table 6: Information request reviews and complaints to regulator 2025-26

2.8.10 The ICO issued one decision notice relating to an information request received in January 2026. The request was responded to later than the statutory time frame, but before the decision notice was issued in June 2026.

2.9 LOOKING FORWARD

2.9.1 The team continue historical progress on service improvements, with a number of projects being run by the Information Governance team to continue to safeguard data and improve the compliance position of the council.

2.9.2 The Data Protection audit undertaken in January 2026 continues to provide headline direction for improvements to address gaps in compliance

3. ALTERNATIVE OPTIONS CONSIDERED & NOT RECOMMENDED

3.1 N/A

4. COMMENTS OF OVERVIEW & SCRUTINY

4.1 N/A

5. POST-DECISION IMPLEMENTATION

5.1 N/A

6. IMPLICATIONS OF THE DECISION

6.1 Council Key Priorities and Performance

6.2 Financial Implications

N/A

6.3 Policy Implications

N/A

6.4 Legal & Constitutional Implications

6.4.1 N/A

6.5 Community Impact

6.5.1 N/A

6.6 Environment & Climate Change Implications

6.6.1 N/A

6.7 Equality & Diversity Implications

6.7.1 N/A

6.8 Implications on Resources

6.8.1 N/A

6.9 Health & Wellbeing Implications

6.9.1 N/A

6.10 Local Government Reorganisation (LGR) Implications

6.10.1 N/A

7. RISK MANAGEMENT

7.1 N/A

8. BACKGROUND PAPERS– LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

8.1 N/A

Corporate Governance Committee – 18th November 2026
Council – 16th December 2026

Report by: Interim Monitoring Officer

Lead Cllr: Liam Dewey-Beckett, Executive Councillor for Governance & Democratic Services

Wards	Open / Exempt	Key Decision?
All	Open	No

Amendments to the Constitution – Council Procedure Rules, Call-In and Planning Procedure

Executive Summary: Effective governance of a local authority requires the regular review and update of its Constitution, its Articles and Schemes to ensure it remains accurate and relevant.

The Interim Monitoring Officer has undertaken an initial review of the Constitution since his appointment and has identified some suggested amendments that are intended to clarify issues where possible and streamline the operation of the Council's meetings, especially Council.

This report is presented to the Corporate Governance Committee for review and then proceeds following any required amendments to Council in December 2026.

Recommendations

1.1. To endorse the amendments to the Constitution as set out in Appendix 1 to the report now submitted;
1.2. To consider whether to endorse the inclusion of any additional amendments as set out in Appendix 2; and
1.3. To recommend to Council the approval of the amendments to the Constitution as set out in Appendix 1 to the report now submitted, together with any additional amendments from Appendix 2 endorsed by the Committee.

	Key Corporate Plan Priorities
1	*Do our core work well*

Report Author

Lee Gardner, Interim Monitoring Officer (lee.gardner@huntingdonshire.gov.uk)

1. PURPOSE OF THE REPORT

1.1 Effective governance of a local authority requires the regular review and update of its Constitution, its Articles and Schemes to ensure it remains accurate and relevant.

1.2 The Interim Monitoring Officer has undertaken an initial review of the Constitution since his appointment and has brought forward best practice and suggested improvements.

1.3 Some initial suggested amendments have been identified that are intended to clarify issues where possible and streamline the operation of the Council's meetings, especially Council. There are further suggested amendments that will be brought forward for review at future meetings.

1.4 This report is presented to the Corporate Governance Committee for review and then proceeds following any required amendments to Council in December 2026.

2. BACKGROUND & CONTEXT

2.1 The Council has operated a Constitution Review Working Group for many years which serves an important function in enabling healthy governance and effective decision-making processes to support elected members. The Working Group has met on 5th November 2026 to consider proposed amendments to the Council Procedure Rules, Call-In and Decision Making at the Development Management Committee. The proposed amendments are set out in Appendix 1 and the rationale outlined in more detail in the following paragraphs.

2.2 Some of the proposed amendments did not receive consensus from the Group. Where this occurred, the report identifies these and provides justification for the amendments for the Corporate Governance Committee to consider before recommending to Council for final approval as set out in Appendix 2.

Council Procedure Rules

2.3 The suggested amendments to the Council Procedure Rules are based on the premise that the role of the Chair of any Council meeting is to ensure the business of that meeting is conducted in an efficient and effective manner while ensuring that proper debate and consideration of the agenda items are undertaken before a vote is called.

2.4 The amendments have also been proposed in response to the increasing number of motions submitted to Council, to ensure that these can be dealt with effectively while allowing the Council to conclude its wider business and enabling officers to obtain the decisions they require.

Call-In Procedure

2.5 It is proposed to include a new Rule 15.2 of the Call-in Procedure to clarify that a valid call-in request must set out sufficient grounds for the call-in and identify the outcome being sought, with the Monitoring Officer authorised to refuse a request where these requirements are not met. The amendment is intended to provide

greater clarity and focus to the call-in process, ensuring that Members identify the particular issues they wish the decision-maker to reconsider. This reflects guidance from the Centre for Governance and Scrutiny, which emphasises the importance of clear criteria for determining the validity of call-ins and recognises call-in as a mechanism intended for exceptional circumstances.

Planning Procedure

2.6 It is proposed to amend the Committee Procedure Rules to clarify the point at which a Development Management Committee decision becomes final where Members resolve to approve or refuse an application contrary to the officer recommendation. The amendment makes clear that, where appropriate, the Chair may reopen the matter before the decision is finalised to enable Members to consider and agree adequate planning reasons supporting their decision. This is intended to ensure that decisions are properly reasoned, capable of being defended if challenged, and that the Committee is able to reconsider its position where satisfactory planning reasons cannot be established.

3. ALTERNATIVE OPTIONS CONSIDERED & NOT RECOMMENDED

3.1 The Working Group also considered a number of proposed amendments which, following discussion, were either declined or withdrawn and are therefore not being put forward for consideration by the Corporate Governance Committee. These comprised a proposed 30-minute limit on the debate of individual Member motions, together with the associated procedure for extending the debate by a further 20 minutes, and the requirement for amendments to motions to be submitted two working days before a meeting. Members considered that the debate limit could be unduly restrictive and that requiring amendments in advance could prevent legitimate amendments arising during the course of debate and reduce the Council's decision-making flexibility.

4. COMMENTS OF OVERVIEW & SCRUTINY

4.1 N/A

5. POST-DECISION IMPLEMENTATION

5.1 Subject to Council approving the proposed changes to the Constitution, the text contained in Appendix 1 will be incorporated into the Constitution.

6. IMPLICATIONS OF THE DECISION

6.1 Council Key Priorities and Performance

6.1.1 The proposed amendments support the Corporate Plan priority of Doing our core work well by strengthening the Council's governance arrangements and providing clearer, more effective procedures for Council and committee meetings. The amendments will help ensure that business is conducted efficiently, Members have an appropriate opportunity to participate in debate and decisions are taken within a clear, consistent and legally robust framework.

6.2 Financial Implications

6.2.1 There are no additional financial implications arising directly from the proposed amendments. The revised provisions can be implemented within existing Democratic Services and Monitoring Officer resources. Any limited costs associated with updating and publishing the Constitution, and providing guidance to Members and officers, will be met from existing approved budgets.

6.3 Policy Implications

6.3.1 The proposals amend the Council's constitutional framework and associated procedure rules. They do not change the Council's substantive policy position but are intended to support the consistent application of the Constitution and the principles set out in the Council's Code of Corporate Governance.

6.4 Legal & Constitutional Implications

6.4.1 Section 9P of the Local Government Act 2000 requires the Council to maintain a constitution and keep it up to date. The Corporate Governance Committee is responsible for considering proposed changes to the Constitution and making recommendations to Council, with approval of the proposed amendments reserved to Council. The changes in Appendix 1 relate to the Council Procedure Rules, the Call-in Procedure and the procedure governing decision-making by the Development Management Committee. The proposals are intended to provide clearer and more robust arrangements, reduce procedural uncertainty and support decisions that are properly reasoned and capable of being defended if challenged.

6.5 Community Impact

6.5.1 No direct community impacts have been identified. Clearer and more effective decision-making arrangements should support transparency, accountability and public confidence in the Council's governance processes.

6.6 Environment & Climate Change Implications

6.6.1 There are no direct environmental or climate change implications arising from the proposed amendments.

6.7 Equality & Diversity Implications

6.7.1 The Council must have due regard to the Public Sector Equality Duty under section 149 of the Equality Act 2010. The proposed amendments concern the operation of the Council's decision-making procedures and are not expected to affect people differently because of a protected characteristic. No adverse equality or diversity impacts have been identified.

6.8 Implications on Resources

6.8.1 The amendments can be implemented within resources. There may be a limited requirement to update published constitutional documents and provide guidance to Members and officers, but no additional staffing, procurement, property or ICT resources are anticipated.

6.9 Health & Wellbeing Implications

6.9.1 N/A

6.10 Local Government Reorganisation (LGR) Implications

6.10.1 The proposals have no direct impact on Local Government Reorganisation. However, maintaining clear, efficient and legally robust governance arrangements will support the Council during the transition period and assist with continuity of decision-making while reorganisation arrangements are developed.

7. RISK MANAGEMENT

7.1 If the Constitution is not updated, there is a risk that procedural ambiguity will continue, leading to inconsistent practice, avoidable delay, ineffective use of meeting time or decisions that are more difficult to defend. The proposed amendments mitigate these risks by clarifying the relevant rules and responsibilities. Implementation will be supported through publication of the revised Constitution and appropriate guidance to Members and officers. The residual risk is considered low.

8. BACKGROUND PAPERS– LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

8.1 The Council's Constitution, relevant guidance from the Centre for Governance and Scrutiny and the papers considered by the Constitution Review Working Group on 5th November 2026 have informed this report.

Document List	Custodian	File Location
Council's Constitution and Constitution Review Working Group papers, 5 November 2026	Interim Monitoring Officer / Democratic Services	Council website and Democratic Services records

Part 4

Rules of Procedure

COUNCIL PROCEDURE RULES
(STANDING ORDERS)

1. SCOPE

1.1 These rules apply to meetings of the Council

2. ANNUAL MEETING OF THE COUNCIL

Timing and Business

2.1 In a year when there is an ordinary election of Councillors, the annual meeting will take place within 21 days of the retirement of the outgoing Councillors. In any other year the Annual Council will take place in March April or May and normally will be held on the third Wednesday in May of each year commencing at 6.00 pm.

2.2 The annual meeting will:-

(i) elect a person to preside if the Chair of the Council is not present;

(ii) elect the Chair of the Council;

(iii) appoint the Vice-Chair of the Council;

(iv) elect a person to preside for the annual meeting if the Chair and Vice-Chair of the Council are not present;

(v) approve the minutes of the last meeting;

(vi) receive any announcements from the Chair and/or Head of Paid Service;

(vii) elect the Executive Leader;

(viii) receive any declarations of interests from Members

(ix) appoint members to Overview and Scrutiny Panels, the Licensing Committee and such other committees as the Council considers appropriate to deal with matters which are neither reserved to the Council nor are executive functions (as set out in Part 3 of this Constitution) and to alter their membership at any ordinary meeting;

(x) agree the scheme of delegation or such part of it as the Constitution determines it is for the Council to agree (as set out in Part 3 of this Constitution);

(xi) approve a programme of ordinary meetings of the Council for the Year; and

(xii) consider any business set out in the notice convening the meeting in the order in which it appears in the Council summons, but that order may be varied at the discretion of the Chair or by resolution of the Council.

Selection of Councillors on Committees and Panels

2.3 At the annual meeting, the Council will:-

(i) decide which committees and panels in addition to the Licensing Committee should be established for the ensuing municipal year;

(ii) decide the size and terms of reference for those committees/panels with the exception of the Licensing Committee;

(iii) decide the allocation of seats to political groups in accordance with the political balance rules;

(iv) receive nominations of Councillors to serve on each committee and panel; and

(v) appoint to those committees and panels annually.

(vi) To receive nominations and appoint Councillors to serve as representatives on outside bodies for non-executive functions; and

(vii) To appoint to those outside bodies except to the extent that the appointment has been delegated by the Council.

3. ORDINARY MEETINGS OF THE COUNCIL

3.1 Ordinary meetings of the Council will take place in accordance with the annual programme of meetings. With the exception of 3.2, the agenda and format of Ordinary meetings will be as follows subject to any variation proposed by the Chair:-

(i) elect a person to preside if the Chair or Vice-Chair are not present;

(ii) approve the minutes of the last meeting;

(iii) receive any declarations of interest from members;

(iv) receive any announcements from the Chair or Head of Paid Service;

(v) receive any petitions in accordance with the Council's petition scheme;

(vi) receive any questions from, and provide answers to the public;

(vii) receive any written questions from Councillors in accordance with 9.3

(viii) receive any oral questions from Councillors in accordance with 9.9

(viii) receive reports from the Executive Leader, Deputy Executive Leader or other member of the Cabinet and Chair of the Overview and Scrutiny Panels, committees and other panels, receive questions and answers on any of those reports and consider any recommendations contained therein.

(ix) consider any other business specified in the summons to the meeting in the order in which it appears in the Council summons; but that order may be varied at the discretion of the Council or by resolution of the Council including consideration of proposals from the Cabinet in relation to the Council's budget and policy framework and reports of the Overview and Scrutiny Panels for debate.

(x) consider individual Member motions.

3.2 The Budget Setting Council meeting shall be limited to business relating to the Council's budget. Therefore, agenda items 3 (iv), (v), (vi), (vii), (xiii), (ix) and (x) will not be included in the Agenda

4. EXTRAORDINARY MEETINGS

Calling Extraordinary Meetings

4.1 Those listed below may request the Head of Paid Service to call Council meetings in addition to ordinary meetings:-

(i) the Council by resolution;

(ii) the Chair of the Council;

(iii) the Monitoring Officer; and

(iv) any five members of the Council if they have signed a requisition presented to the Chair of the Council and he/she has refused to call a meeting or has failed to call a meeting within seven days of the presentation of the requisition.

Business

4.2 The summons to an extraordinary meeting of the Council shall set out the item of business to be considered thereat and no business other than that set out in the summons shall be considered at that meeting.

5. TIME AND PLACE OF MEETINGS

5.1 The time and place of meetings will be determined by the Head of Paid Service and notified in the summons. Meetings of the Council normally shall be convened for 7 pm. In special circumstances, the Head of Paid Service (after consultation with the Chair) may fix some other hour of commencement of any meeting of the Council.

6. NOTICE OF AND SUMMONS TO MEETING

6.1 The Head of Paid Service will give notice to the public of the time and place of any meeting in accordance with the Access to Information Rules. At least five clear days before a meeting, the Head of Paid Service will send a summons signed by him or her by post (or electronically if requested) to every member of the Council or leave it at their usual residence. The summons will give the date, time and place of each meeting and specify the business to be transacted and will be accompanied by such reports as are available. This rule does not apply to meetings that have already commenced and been adjourned to a later date, as the adjourned meeting is a continuation of the original meeting and no new summons is required.

7. CHAIR OF MEETING

7.1 The person presiding at the meeting may exercise any power or duty of the Chair. Whenever the Chair rises during debate a member then standing shall resume his seat and the Council shall be silent. Where these Rules apply to panel and committee meetings, references to the Chair also include the Chair of such panel and committee.

8. QUORUM

The quorum of a meeting will be one quarter of the whole number of members. During any meeting, if the Chair counts the number of members present and declares that there is not a quorum, the meeting will adjourn immediately. Remaining business will be considered at a time and date fixed by the Chair. If he/she does not fix a date, the remaining business will be considered as part of the agenda at the next ordinary meeting of the Council.

9. QUESTIONS BY MEMBERS

Oral Questions on items considered by the Cabinet, Committee or Panel

9.1 A member of the Council may ask the Executive Leader, a member of the Cabinet with portfolio responsibility, or the Chair of a Committee or Panel any question, without notice, upon any item listed in the report referred to in 3.1 (ix) detailing outcomes from the Cabinet, committees and panels

Oral Questions on Recommendations of the Cabinet, Committee or Panel or Other Reports to the Council

9.2 Before a recommendation of the Cabinet, Committee or Panel or a report that is otherwise included on the agenda is open for consideration by the Council, a Member of the Council may ask a question, without notice, on the recommendation or report to:-

(i) the Executive Leader, a member of the Cabinet with portfolio responsibility, or the Chair of a Committee or Panel, as appropriate; and/or

(ii) the author of the report in the case of a report that is otherwise included on the agenda for the meeting.

Written Questions

9.3 Subject to Rule 9.4 a member of the Council may ask the Executive Leader, a member of the Cabinet with executive responsibility or the Chair of any Committee or Panel a question, in writing, on any matter in relation to which the Council has powers or duties or which affects the District or its residents.

Notice of Questions

9.4 A member may only ask a question under Rule 9.3 if, either –

(a) They have submitted their question in writing to the office of the Monitoring Officer not later than 12 noon on the 8th clear working day before the date of the meeting; or

(b) Where a question relates to a matter of urgency, a member must have the agreement of the Chair of the Council and the member to whom the question is to be put that they are prepared to accept the question as a matter of urgency. The content of the question must be given in writing to the office of the Monitoring Officer at least one hour before the scheduled start of the meeting

(c) A matter of urgency will be an item that could not appear on the agenda and cannot reasonably be deferred until the next meeting of the Council.

Response to Questions

Written Questions

9.5 A response to a written question shall take the form of a written reply by the member concerned which shall be made available to members of the Council and to the public prior to the start of the meeting.

9.6 Where an urgent question has been submitted under Rule 9.4(b), a written response will be made available to members of Council and to the public as soon as practicable.

9.7 Members will seek to respond to questions as fully as possible but shall not be required to divulge confidential or exempt information.

Supplementary Questions

9.8 A member asking a question under Rule 9.1 and 9.3 may ask one supplementary question without notice of the member to whom the first question was addressed. The supplementary question must arise directly out of the original question or the reply and shall be limited to a maximum of one minute's duration. An oral response will be limited to two minutes.

9.9 A member asking a question under Rule 9.1 and 9.3 may ask one supplementary question without notice of the member to whom the first question was addressed. The supplementary question must arise directly out of the original question or the reply and shall be limited to a maximum of one minute's duration. An oral response will be limited to two minutes.

Oral Questions

9.10 At each ordinary meeting of the Council (excluding the annual meeting or any special meeting convened to consider a specific issue), there shall be a period for oral questions. A member of the Council may ask the Executive Leader or a member of the Cabinet with portfolio responsibility any question, without notice, on any matter relevant to the Council's powers and duties which relate to their individual portfolio responsibilities. The conduct of oral question time shall be regulated by the Chair of the Council.

All questions:

- must be relevant to matters for which the Council has powers or duties which relate to the Executive Leader's or Cabinet members individual portfolio responsibility
- must not relate to an item which is included elsewhere on the Council agenda since they can be raised at that point in the meeting;
- should be limited to obtaining information or pressing for action
- must not exceed two minutes in duration

Questions should not –

- be incapable of being adequately answered in two minutes;
- contain offensive expressions;
- divulge, or require to be divulged, confidential or exempt information.

a. Any facts on which a question is based should be identified briefly when the question is asked. A member who asks a question may be asked to verify the authenticity of any factual statement.

b. Where a member considers that the subject matter demands a comprehensive detailed answer, the question should be submitted to Monitoring Officer by noon at least 8 clear days in advance of the meeting.

Response

10. An answer to an oral question make take the form of:

(a) a direct oral answer of up to a maximum of two minutes duration;

(b) where the desired information is in a publication of the Council or other published work, a reference to that publication; or

(c) where the reply cannot conveniently be given orally, a written answer circulated later to the questioner and made available to all members of the Council and the public.

(d) Where an oral question cannot conveniently be answered at the meeting, the written answer will be provided to all Members and published within 10 working days.

11. QUESTIONS BY MEMBERS OF THE PUBLIC

11.1 Any person who lives, works or owns property in the District shall be able to ask a question at ordinary meetings of the Council using the same criteria as set out in Rules 9.3 but notice of the question MUST be submitted to the office of the Monitoring Officer five days prior to the meeting. Questions by members of the public will be dealt with in accordance with the guidelines published on the Council's website.

12. NOTICES OF MOTION

Notice

12.1 Except for motions which can be moved without notice under Rule 13, written notice of every motion, shall be given in writing, signed by the member giving the notice and delivered not later than noon on the 8th clear working day (ie excluding Saturdays, Sundays and Bank Holidays) before the meeting at which it is to be considered, to the office of the Monitoring Officer by whom it should be dated, numbered in the order in which it is received and entered

into a book which shall be open for inspection by every member of the Council. The submission of a written notice of motion via e-mail addressed to the Monitoring Officer will be acceptable.

Motions set out in agenda

12.2 The Head of Paid Service shall set out in the summons for every meeting of the Council all motions of which notice has been duly given, in the order in which they were received, unless the Member giving notice has stated in writing that they propose to move the motion at a later meeting or has subsequently withdrawn it in writing.

Scope

~~12.3 If Every Motion shall be relevant to matters for which the Council has a responsibility or which affects the District or its residents and shall only be submitted in circumstances when the subject matter is not referred to elsewhere at the meeting in a report from the Cabinet, Overview and Scrutiny Panel, Committee or Panel etc.~~

12.3 A motion submitted for inclusion on the agenda must not exceed 600 words, with any amended motion not exceeding 650 words and must relate to a matter within the functions, interests or sphere of influence of the Council. It must not be substantially similar to a motion debated by the Council within the previous six months and must not duplicate a matter to be considered elsewhere on the same agenda. In determining whether these requirements are met, the Monitoring Officer will provide written reasons for any decision that a motion is not admissible.

12.4 Any motion rejected by the Monitoring Officer may be referred to the Chair of the Council for a final decision.

Failure to Move

12.5 (Was 12.4) If a motion set out in the summons is not moved either by the member who gave notice thereof or by some other member on his behalf it shall, unless postponed by consent of the Council, be treated as withdrawn and shall not be moved without fresh notice.

12.6 (Was 12.5) Reference ~~to Cabinet~~ an Overview and Scrutiny Panel, Committee or Panel

(i) Subject to paragraph 12.5 (iii) post, if a motion is within the terms of reference of ~~the Cabinet~~ an Overview and Scrutiny Panel, a committee or panel, it shall, upon being moved and seconded, stand referred without discussion to ~~the Cabinet~~ , Overview and Scrutiny Panel, committee or panel as the Council may determine. Provided that such ~~Cabinet~~, Overview and Scrutiny Panel, committee or panel shall report on the matter with recommendations to an ensuing meeting of the Council..

(ii) This Rule shall have precedence over Rule 14.6.

(iii) The Chair may, if they consider it convenient and conducive to the despatch of business, allow the Motion to be dealt with at the meeting at which it is brought forward.

13. MOTIONS WITHOUT NOTICE

13.1 The following motions may be moved without notice:-

(a) to appoint a Chair of the meeting at which the motion is moved;

(b) in relation to the accuracy of the minutes;

(c) to change the order of business in the agenda;

(d) to refer something to an appropriate body or individual;

(e) to appoint a committee or panel or member arising from an item on the summons for the meeting;

(f) to receive, defer or refer back reports or adoption of recommendations of the Cabinet, Overview and Scrutiny Panels, committees, panels or officers and any subsequent motions and amendments arising therefrom;

(g) to grant leave to withdraw a motion;

(h) to amend a motion; where practicable, the text of a proposed amendment should be provided to the Head of Paid Service or, in their absence, the Monitoring Officer prior to the commencement of the meeting of the Council and a copy circulated to the meeting to ease understanding of the proposed text);

(i) to proceed to the next business;

(j) that the question be now put;

(k) to adjourn a debate;

(l) to adjourn a meeting;

(m) to suspend a particular Council procedure rule;

(n) to exclude the public and press in accordance with the Access to Information Rules;

(o) to not hear further a member named under Rule 23.3 or to exclude them from the meeting under Rule 23.4;

(p) to give the consent of the Council where its consent is required by this Constitution;

(q) to invite a member to remain;

(r) to record a vote in accordance with Rule 17.4 or 17.7;

(s) in connection with voting on appointments in accordance with Rule 17.9; and

(t) to extend the time limit for speeches.

14. RULES OF DEBATE

Standing to Speak

14.1 When a member speaks at full Council they must stand and address the meeting through the Chair. If more than one member stands, the Chair will ask one to speak and the other must sit. Other members must remain seated whilst another member is speaking unless they wish to make a point of order or a point of personal explanation.

Chair Standing

14.2 When the Chair stands during a debate any members speaking at the time must stop and sit down. The meeting must be silent.

Right to Require Motion in Writing

14.3 Unless notice of the motion has already been given, the Chair may require it to be written down and handed to him/her before it is discussed.

14.4 No speeches may be made after the mover has moved a proposal and explained the purpose of it until the motion has been seconded.

Seconder's Speech

14.5 When seconding a motion or amendment, a member may reserve their speech until later in the debate.

Content and Length of Speeches

14.6 Speeches must be directed to the question under discussion or to a personal explanation or point of order. No speech may exceed the time limits detailed below ~~5 minutes in length~~ without the consent of the Chair. If the Chair considers the subject matter to be of ~~given by reason of the~~ exceptional importance, ~~of the subject~~ it shall be within the discretion of the Chair to permit up to a further ~~5 minutes~~ period of time as detailed below. This rule shall not apply to the member of the Cabinet with executive responsibility in presenting the annual budget statement and statutory and non-statutory plans to the Council and the Chair has discretion to disapply this rule to the leaders of the opposition groups in their response to the annual budget statement and statutory and non-statutory plans.

Recommendations contained in reports received as detailed in 3.1 (ix)

- Three minutes for the mover and seconder of a motion or amendment.
- The mover of the original motion has up to a further three minutes to sum up before the vote is put.
- All other speakers have three minutes.

Individual Member Motions as detailed in 3.1 (x)

- Three minutes for the mover and seconder of a motion or amendment.
- The mover of the original motion has up to a further three minutes to sum up before the vote is put.
- All other speakers have three minutes.

14.7 If three speakers have spoken consecutively in support of, or in opposition to a motion, the Chair may call for a speaker to the contrary. If no such speaker is forthcoming and after the mover has had a right of reply, the motion must be put. Members speaking must, if called upon to do so by the Chair, announce whether they are speaking in support of, or against the motion of amendment being debated. Before the Chair exercises this rule, he/she must ask any ward councillors, whose ward is directly affected by the decision, and Group Leader who has not already spoken, if they wish to speak. A Group Leader may nominate another member of his/her group to exercise this right.

When a Member May Speak Again

14.8 (Was 14.7) A member who has spoken on a motion may not speak again whilst it is the subject of debate, except:-

(a) to speak once on an amendment moved by another member;

(b) to move a further amendment if the motion has been amended since he/she last spoke;

(c) if his/her first speech was on an amendment moved by another member, to speak on the main issue (whether or not the amendment on which he/she spoke was carried);

(d) in exercise of a right of reply;

(e) on a point of order; and

(f) by way of personal explanation.

14.9 (Was 14.8) **Amendments to Motions**

(a) An amendment to a motion must be relevant to a motion and will either be:-

(i) to refer a subject of debate to the Cabinet, Overview and

Scrutiny Panel, committee or panel for consideration or reconsideration;

(i) to leave out words;

(ii) to leave out words and insert or add others; or

(iv) to insert or add words.

as long as such omission, insertion or addition of words does not have the effect of negating the motion before the Council.

(b) Only one amendment may be moved and discussed at any one time. No further amendment may be moved until the amendment under discussion has been disposed of.

(c) If an amendment is not carried, other amendments to the original motion may be moved.

(d) If an amendment is carried, the motion as amended takes the place of the original motion. This becomes the substantive motion to which any further amendments are moved.

(e) If an amendment has been carried, the Chair will read out the amended motion before accepting any further amendments, or if there is none, put it to the vote except in the case of such an amendment as is referred to in 14.8(a)(i) when no further amendment may be moved.

14.10 (Was 14.9) **Alteration of Motion**

(a) A member may alter a motion of which he/she has given notice with the consent of the meeting. The meeting's consent will be signified without discussion.

(b) A member may alter a motion which he/she has moved without notice with the consent of both the meeting and the seconder. The meeting's consent will be signified without discussion.

(c) Only alterations which could be made as an amendment may be made.

14.11 (Was 14.10) **Withdrawal of Motion**

A member may withdraw a motion which he/she has moved with the consent of both the meeting and the seconder. The meeting's consent will be signified without discussion. No member may speak on the motion after the mover has asked permission to withdraw it unless permission is refused.

14.12 (Was 14.11) **Right of Reply**

(a) The mover of a motion has a right to reply at the end of the debate on the motion, immediately before it is put to the vote.

(b) If an amendment is moved, the mover of the original motion has the right of reply at the close of the debate on the amendment but may not otherwise speak on it.

(c) The mover of the amendment has no right ofreply to the debate on his or her amendment.

(d) A member exercising a right of reply shall not introduce new matters.

14.13 (Was 14.12) **Motions which may be moved during debate**

When a motion is under debate, no other motion may be moved except the following procedural motions:-

(a) to withdraw a motion;

(b) to amend a motion;

(c) to proceed to the next business;

(d) that the question be now put;

(e) to adjourn a debate;

(f) to adjourn a meeting;

(g) to exclude the public and press in accordance with the Access to Information Rules; and

(h) to not hear further a member named under Rule 22.3 or to exclude them from the meeting under Rule 22.4.

14.14 (Was 14.13) **Closure Motions**

(a) A member may move, without comment, the following motions at the end of a speech of another member:-

(i) to proceed to the next business;
(ii) that the question be now put;
(iii) to adjourn a debate; or
(iv) to adjourn a meeting.

(b) If a motion to proceed to next business is seconded and the Chair thinks the item has been sufficiently discussed, he or she will give the mover of the original motion a right of reply and then put the procedural motion to the vote.

(c) If a motion that the question be now put is seconded and the Chair thinks the item has been sufficiently discussed, the Chair will put the procedural motion to the vote. If it is passed the Chair will give the mover of the original motion the right of reply before putting his/her motion to the vote.

(d) If a motion to adjourn the debate or to adjourn the meeting is seconded and the Chair thinks the item has not been sufficiently discussed and cannot reasonably be so discussed on that occasion he/ she will put the procedural motion to the vote without giving the mover of the original motion the right ofreply.

(e) If a motion to adjourn the meeting is seconded and the Chair considers that the remaining business cannot be sufficiently discussed on that occasion, the Chair shall put the adjournment motion to the vote without giving a right of reply. If the motion is carried, the remaining business shall stand adjourned to a time and date fixed by the Chair when the meeting is adjourned. If no time and date are fixed, the remaining business will automatically be carried forward to the agenda for the next ordinary meeting of the Council.

14.15 (Was 14.14) Point of Order

A member may raise a point of order at any time. The Chair will hear them immediately. A point of order may only relate to an alleged breach of these Council Rules of Procedure or the law. The member must indicate the rule or law and the way in which he/she considers it has been broken. The ruling of the Chair on the matter will be final.

14.16 (Was 14.15) Personal Explanation

A member may make a personal explanation at any time. A personal explanation may only relate to some material part of an earlier speech by a member which may appear to have been misunderstood in the present debate. The ruling of the Chair on the admissibility of a personal explanation will be final.

15. ANNUAL STATE OF THE DISTRICT ADDRESS PROCEDURE

15.1 The Chair will invite the Executive Leader to address the Council at its summer meeting on the State of the District.

Response

15.2 The Chair will invite the Leader(s) of the Opposition to respond to the address.

Discussion

15.3 The ensuing discussion in which a Member may speak once and to which only paragraphs 13.5, 13.13 and 13.14 of the Rules of Debate will apply will be chaired by the Chair.

16. PREVIOUS DECISIONS AND MOTIONS

Motion to Rescind a Previous Decision

16.1 A motion or amendment to rescind a decision made at a meeting of the Council within the previous six months cannot be moved unless a

notice of motion is signed by at least 7 members of the Council.

Motion Similar to One Previously Rejected

16.2 A motion or amendment in similar terms to one that has been rejected at a meeting of Council in the previous 6 months cannot be moved within a further period of 6 months.

17. VOTING

Majority

17.1 All matters will be decided by a simple majority of those Members voting and present in the room for the whole debate before the ~~at the time~~ question was put.

Chair's Casting Vote

17.2 If there are equal numbers of votes for and against, the Chair will have a second or casting vote. There will be no restriction on how the Chair chooses to exercise a casting vote.

~~Show of Hands~~ Electronic Voting System

17.3 Unless a recorded vote by manually recording the vote of members is demanded by legislation or under Rule 17.4 the Chair will take the vote the electronic voting system or by a show of hands, or if there is no dissent by the affirmation of the meeting.

17.4 Members will have one minute to register their votes electronically. A Member who does not register a vote within that period will be recorded as abstaining unless they immediately report a technical problem to the Chair. Where the problem cannot be resolved promptly, the Chair may take that Member's vote by show of hands.

Recorded Vote

17.5 (Was 17.4) If at least five members present demand it and before a vote is taken, the names for and against the motion or amendment or abstaining from voting will be taken down and entered into the minutes. Unless a manually recorded vote is requested, the record of voting will be taken from the results shown by the electronic voting system.

Recorded Vote at Council Budget Decision Meetings

17.6 (Was 17.5) Recorded votes must be taken at the Budget meeting(s) each year, when voting on any motion or amendment which makes a calculation (whether originally or by way of substitution) in accordance with any of sections 31A, 31B, 34 to 36A, 42A, 42B, 45 to 49, 52ZF, 52ZJ of the Local Government Finance Act 1992 or; Issues a precept under Chapter 4 of Part 1 of that Act.

Right to Require Individual Vote to be Recorded

17.7 (Was 17.6) Where any Member requests it immediately after the vote is taken, their vote will be so recorded in the minutes to show whether they voted for or against the motion or abstained from voting.

Voting on Appointments

17.8 (Was 17.7) If there are more than two people nominated for any position to be filled and there is not a clear majority of votes in favour of one person, then the name of the person with the least number of votes will be taken off the list and a new vote taken. The process will continue until there is a majority of votes for one person.

18. PETITIONS

Definition

18.1 For the purposes of these procedural Standing Orders a petition shall be defined as a document embodying a formal written request for some form of action or the consideration of some matter by the Council. The submission of a petition is seen by many as lending weight to a particular viewpoint and demonstrating that the view is shared by others. Both written and electronic petitions will qualify under this scheme. Petitions made under any specific enactment such as that calling for a referendum on the form of executive of the Council, will not be dealt with under this procedure.

Scope

18.2 Every petition shall be relevant to some matter of major significance in relation to which the Council has powers or duties or which is of more general concern affecting the District, its Council Tax or NNDR payers or concerns a matter on the agenda for the Council meeting to which the petition is to be submitted.

Eligibility

18.3 The District Council will not accept petitions which are vexatious, abusive or otherwise inappropriate or which relate to a specific or identifiable person or otherwise are considered to be an abuse of its powers, responsibilities or obligations. Petitions shall not be admissible where petitioners are representing personal or prejudicial issues, matters associated with political parties or organisations, where the matter involves a right of appeal to the courts, a tribunal or to a Government Minister or which in the opinion of the Monitoring Officer is of a quasi- judicial nature. The interpretation of the above criteria by the Monitoring Officer is final. Additionally, the following matters will be excluded from the scheme:-

(a) any matter relating to a planning decision;

(b) any matter relating to a licensing decision; or

(c) any other matter relating to an individual or entity in respect of

which that individual or entity has a right of recourse to a review or right of appeal conferred by or under any enactment.

(d) A petition which seeks substantially to repeat a debate held by the Council within the previous six months will not normally be eligible for debate. The petition will nevertheless be reported to the Council, together with the Monitoring Officer's reasons for that determination. The petition organiser may ask the Chair of the Council to review the determination, and the Chair's decision will be final.

18.4 Petitions may be co-ordinated by individuals or by local organisations. If considered to be eligible, a petition will be referred to the first appropriate meeting after its submission.

Form

18.5 The petition shall clearly state the purpose for which it is submitted and shall be addressed to the District Council.

18.6 A written petition shall contain the name, address and signature of each person who signed it. The name and address shall be in legible format. An on-line petition shall contain the name and address of each person who is party to it and shall remain open for signature on the Council's website for a maximum period of 90 days. A petition shall indicate which one of the signatories is to present the petition. If the petition organiser, or his/her nominee, indicates that they are unable to present the petition at the relevant meeting, the petition will still be considered. The petition shall be sent to the office of the Monitoring Officer who will place it upon the agenda for the next Council meeting provided that the requirements are satisfied.

18.7 A maximum of three petitions will be presented at any meeting.

18.8 A petition shall not be presented to a meeting of the Council unless it is delivered to the office of the Monitoring Officer no later than noon on the tenth clear working day before the meeting at which it is to be considered. The petition shall be acknowledged in writing by or on behalf of the Monitoring Officer within ten clear working days of receipt of the petition. Online petitions will automatically be submitted to the Council for acknowledgement once the petition has been closed for signature.

18.9 No petition may be considered by the Council which effectively duplicates a previous petition submitted to the Council in the preceding six months.

Procedure

18.10 Any resident who lives, works or studies (including those under 18) or who owns or occupies commercial premises in the District may present a petition to a meeting of the Council provided that it bears at least 50 signatures of people who either live or whose place of

work or study is located in the District and satisfies the conditions of paragraphs 18.2 and 18.3 above.

18.11 Petitions which are considered at a meeting of the Council shall be presented at the conclusion of the receipt of any announcements by the Chair. A summary of the wording of the petition shall be incorporated on the Agenda for the meeting. If the petition relates to an item on the Agenda for a Full Council meeting, the presentation will be made at the beginning of that item.

18.12 On being called by the Chair, the person(s) presenting the petition may speak for a total of no more than five minutes in support of the petition. District Councillors may question the person(s) presenting the petition for a period of up to five minutes thereafter. The period for questions may be extended at the discretion of the Chair.

18.13 Other than to respond to questions asked by District Councillors, petitioners shall not participate in debate nor discussion of the item to which their petition relates.

18.14 Petitions shall be presented to Council in the order in which they have been received.

Petitions which are not the responsibility of the Council

18.15 Petitions concerning a matter that the Council does not have direct control over, which relates to the functions of another local authority or concerning a matter delivered in partnership with any of the Council's partner organisations will be submitted to the Monitoring Officer who shall determine what steps the Council should take. The Monitoring Officer's decision on the matter is final. The Petition Organiser will be notified of any actions that have been taken.

19. MINUTES

Signing the Minutes

19.1 The Chair will sign the minutes of the proceedings at the next meeting. The Chair will move that the minutes of the previous meeting be signed as a correct record. The only part of the minutes that can be discussed is their accuracy.

No Requirement to Sign Minutes of Previous Meeting at Extraordinary Meeting

19.2 Where in relation to any meeting, the next meeting for the purpose of signing the minutes is a meeting called under paragraph 3 of Schedule 12 to the Local Government Act 1972 (an extraordinary meeting), then the next following meeting (being a meeting called otherwise than under that paragraph) will be treated as a suitable meeting for the purpose of paragraphs 41 (1) and (2) of Schedule 12 relating to the signing of minutes.

Form of Minutes

19.3 Minutes will contain all motions and amendments in the exact form and order the Chair put them.

20. RECORD OF ATTENDANCE

All members present during the whole part of the meeting must sign their names on the attendance sheet before the conclusion of every meeting to assist with the record of attendance.

21. EXCLUSION OF THE PUBLIC

Members of the public and press may only be excluded either in accordance with the Access to Information Rules in Part 4 of this Constitution or Rule 23 (Disturbance by the Public).

22. PHOTOGRAPHY, BROADCASTING AND RECORDING OF MEETINGS

The Council supports the principles of openness and transparency in its decision making and permits filming, recording and the taking of photographs at its meetings that are open to the public. It also welcomes the use of social networking and microblogging websites (such as Twitter and Facebook) to communicate with people about what is happening at meetings. These arrangements will operate in accordance with 'Filming, Photography and Recording at Council Meetings' guidelines published on the Council's website.

23. DISORDERLY CONDUCT

General Disturbance

23.1 If there is a general disturbance making orderly business impossible, the Chair may adjourn the meeting for as long as he/she thinks necessary.

23.2 A member shall comply with the adopted Members' Code of Conduct reproduced in Part 5 of the Constitution. Further to the Code of Conduct, a Member must withdraw from a meeting room during the consideration of any item of business in which he/she has a disclosable pecuniary interest.

Member not to be heard further

23.3 If a member persistently disregards the ruling of the Chair by behaving improperly or offensively or deliberately obstructs business, the Chair may move that the member be not heard further. If seconded, the motion will be voted on without discussion.

Member to leave the Meeting

23.4 If the member continues to behave improperly after such a motion is carried, the Chair may move that either the member leaves the

meeting or that the meeting is adjourned for a specified period. If seconded, the motion will be voted on without discussion.

24. DISTURBANCE BY THE PUBLIC

If there is a general disturbance making orderly business impossible, the Chair may adjourn the meeting for as long as he/she thinks necessary.

Removal of Member of the Public

24.1 If a member of the public interrupt's proceedings, the Chair will warn the person concerned. If they continue to interrupt, the Chair will order their removal from the meeting room.

Clearance of Part of Meeting Room

24.2 If there is a general disturbance in any part of the meeting room open to the public, the Chair may call for that part to be cleared.

25. SUSPENSION AND AMENDMENT OF COUNCIL PROCEDURE RULES

Suspension

25.1 All of these Council Rules of Procedure except Rule 16.6 and 18.2 may be suspended by motion on notice or without notice if at least two thirds of the whole number of Members of the Council are present. Suspension can only be for the duration of the meeting.

Amendment

25.2 Any motion to add to, vary or revoke these Council Rules of Procedure will, when proposed and seconded, stand adjourned without discussion to the next ordinary meeting of the Council.

26. APPOINTMENT OF SUB-COMMITTEES, SUB-GROUPS AND ADVISORY GROUPS

(a) The Council, Cabinet and any committee or panel may appoint such sub-committees or sub-groups as they may consider necessary from time to time and shall specify the purpose and terms of reference of such sub-committee or sub-group;

(b) The Council, Cabinet and any committee or panel may appoint such advisory groups as they may consider necessary from time to time and shall specify the purpose, duration and terms of reference of such advisory group, except that such advisory group shall be of a deliberative nature only and shall report back with or without recommendations to the body that appointed them;

(c) The appointment of members to any sub-committee, sub-group or advisory group, shall be in accordance with legislative or

regulatory requirements for the representation of political groups and shall have regard in particular to (b) above.

27. DEVELOPMENT MANAGEMENT APPLICATIONS

(a) Public Speaking at Council

In those circumstances where a planning application is to be determined by full Council, the Council's Chief Planning Officer, Head of Development or Planning Service Manager (Development Management) or his representative and other relevant Officers shall be permitted to present reports to the Council and the public speaking process adopted by the Development Management Committee be applied;

(b) Consideration of Departures from the Development Plan

Planning applications for the following types of development should be referred to the Secretary of State if the Development Management Committee is minded to approve them under the Town and Country Planning (Consultation) (England) Direction 2009 unless the application in question is considered by the Chief Planning Officer, Head of Development and Monitoring Officer to be so 'significant' that it should remain the decision of the Council to refer the application to the Secretary of State. The Development Plan shall, on the recommendation of the Development Management Committee, be considered by the Council having regard to advice received from the Chief Planning Officer, Head of Development and Corporate Director (Delivery) and guidelines on the Council's website.

15 CALL-IN

15.1 When a decision is made by the Executive Leader, Cabinet, an individual Cabinet Member or a committee of the Cabinet or a key decision is made by an officer with delegated authority from the Cabinet or under joint arrangements, the decision shall be published, made available at the Council's main offices and sent to Members of the Overview and Scrutiny Panels within three working days of being made. The notice of decisions will bear the date on which it is published and will specify that the decision will come into force and be implemented on the expiry of five working days after publication, unless called in by a relevant Panel as shown in Appendix B.

15.2 If a decision is called in, the Monitoring Officer has the authority to refuse the call-in if the request does not state grounds to justify a call in and/or the outcome sought.

10.DEVELOPMENT MANAGEMENT APPLICATIONS

Public Speaking at Development Management Committee & Decision making

10.1 Where a planning application falls to be determined by the Development Management Committee and where appropriate notice has been given, an elected Member of the relevant town and parish council/meeting, the District Ward Member, the objector(s), the applicant(s) or their representatives shall be permitted to address the Committee on the application under the direction of the Chair having regard to the guidelines published on the Council's website.

10.2 A motion to approve or refuse a planning application will only be formally made when full reasons are given for the proposed decision. Members may seek and receive advice and assistance from planning and legal officers in formulating lawful planning reasons before the motion is put to the vote. If a vote is taken without clear reasons having been given, the debate will be reopened and a further vote taken once reasons have been provided. The further vote may confirm or overturn the result of the earlier vote.

APPENDIX 2

CONSTITUTION REVIEW WORKING GROUP – EXPLANATION AS TO THE PROPOSED AMENDMENTS

COUNCIL PROCEDURE RULES (STANDING ORDERS)

Rule 3

The suggested amendment has come from officer discussions that there is a wish to see a set format for Council meetings and that due to the legal requirement to set a budget, that this meeting should only deal that issue only.

The amendments have also kept in mind that a Chair of a meeting should have the power to manage their meeting and make amendments to the running order of the meeting.

The amendment of rule 3 seeks to say that the items listed will be taken in that order, thus the consideration of motions was put last, but allows for the Chair to exercise their discretion to vary the order of business. Rule 3.2 is there to limit budget council to ensuring the Budget is agreed.

This was supported by the Working Group

Rule 6.1

This amendment is suggested to clarify that a summons does not need to be served for an adjourned meeting as it is the same meeting that had already been summoned. This is following a query from Democratic Services following the adjournment of the last Council meeting.

This was supported by the Working Group

Rule 8 - Quorum

This came from a query from Democratic Services following the closure motion at full council and what happens to the outstanding business. This is to confirm if a time and date is not set for the meeting to continue the meeting is not adjourned so the outstanding business will be added to the next meetings agenda.

This was supported by the Working Group

Rule 10

This amendment is following Cllr McIlwain's Question at last full Council on where the written answers to questions would be published.

This was supported by the Working Group – however it was confirmed that the publication of the draft minutes would not be made public in 10 working days so the

proposed amendment clarifies this.

Rule 12

Rule 12.2 was suggested to seek to limit the length of motions to focus on the issues and the time spent on motions so that Council can get through the agenda items without having to adjourn to a later date.

This was not supported by the Working Group

Rule 12.3 was suggested to limit the wording of 650 words for a motion put before full Council. Members suggested a 600 word limit and a 650 word limit to amendments.

Also considering the general 6-month rule that previous decision are not reconsider within that time, the suggested amendment that allows the Monitoring Officer to reject similar motions to comply with this requirement.

Rule 12.4 is included following discussions with group leaders to give the Chair of the meeting the power to review a motion refusal by the Monitoring Officer.

This was supported by the Working Group

Rule 12.6 has been amended following the last Council meeting on an issue raised by Councillor Martin that if strictly applied this would deny members the chance to debate almost all issues as the majority of day-to-day decisions are the responsibility of Cabinet.

This was supported by the Working Group

Rule 13.1

The amendment to 13.1(h) *by noon two working days* has been put forward by Cllr Maheshwari so that movers of motions have sufficient time to consider any proposed amendments.

The reason for a new Rule 13.1(u) *To extend the time limit for debating an individual member motion for a further 20 minutes*, is explained above.

This was not supported by the Working Group

Rule 14.6

This has been proposed to seek to manage the time spent on Individual Member Motions.

This was supported by the Working Group

Rule 14.7 is included in the Committee procedure rules but not the Council procedure

rules for some reason. It has been included to allow the Chair to control the meeting where members are not raising new issues and ensure the efficient conduct of the meeting.

This did not receive full support and was amended to make sure each Group Leader (or nominated member) and ward councillors would be allowed to speak.

Rule 17

Rule 17.1 was suggested

There is no general statutory requirement that a local authority councillor must be present throughout the entirety of a debate to be entitled to vote. However, a local authority may lawfully impose such a requirement through its standing orders, provided the restriction is rational and for a proper purpose. The Supreme Court confirmed in 2025 that standing orders prohibiting committee members from voting unless they were present throughout the whole of the committee's consideration of a matter are lawful.

Whether such a requirement applies in any particular case therefore depends on the specific standing orders adopted by the relevant local authority

Paragraph 42 of Schedule 12 to the Local Government Act 1972 provides that, subject to the provisions of the Act, a local authority may make standing orders for the regulation of their proceedings and business and may vary or revoke any such orders.

The wording of paragraph 42 is general, confirming that a local authority may make standing orders for the regulation of their proceedings and business. As a matter of ordinary language, the power for a local authority to make standing orders to regulate their proceedings includes the power to regulate the circumstances in which a member would be treated as qualified and entitled to vote

The Supreme Court addressed this issue directly in *R (Spitalfields Historic Building Trust) v Tower Hamlets LBC* [2025] UKSC 11. The case concerned standing orders adopted by Tower Hamlets London Borough Council which provided that in order to be able to vote upon an item, a councillor must be present throughout the whole of the committee's consideration including the officer introduction to the matter.

The standing orders further provided that where an application was deferred and its consideration recommenced at a subsequent meeting, only members who were present at the previous meeting would be able to vote.

The Supreme Court unanimously dismissed an appeal against the Court of Appeal's decision holding that these standing orders were lawful. The Court rejected the argument that legislation conferred an entitlement on members to vote which could only be restricted by statute rather than by standing orders.

The Supreme Court accepted that the standing orders in the Spitalfields case were rational and served a proper purpose. The standing orders operated to protect the integrity of the decision-making process, to uphold the importance of listening to

representations and to promote public confidence in the procedure. This was a planning case but the same principles of protecting the decision-making process applies.

The reason for this proposed amendment is that all decisions to avoid legal challenge must meet what is known as the Wednesbury reasonable test. This in summary this involves considering several key aspects:

- whether the decision-maker properly directed themselves in law,
- took into account all relevant considerations and
- disregarded irrelevant ones,
- based the decision on adequate evidence, and
- reached a conclusion that is not so unreasonable that no reasonable authority could ever have come to it

The problem is the middle 3. If a member has not been present for the whole debate and heard all the arguments for and against, how can it be said for certain that they have took all relevant considerations into account, disregarded irrelevant one and based the decision on adequate evidence.

What if they missed part of the debate that may have changed their mind.

The Council could legitimately take the view that although an absent member might be able to read the notes of an earlier meeting or listen to a recording of it, that would not be a sufficient substitute for being present to listen in person to the representations made at the meeting.

To have this rule protects the Council from Judicial Review, but also, it protects members. If a member just turned up to the vote without hearing the debate, then they lay themselves open to a Code of Conduct Complaint for predetermination.

If you have not heard the debate and the arguments for and against then you must have already made up your mind before walking into the chamber and how much of the debate can you miss before being allowed to vote results in uncertainty and inconsistency. This change therefore also protects Councillors as well.

This did not receive full support of the Constitution Working Group.

Changes to Rules 17.3, 17.4 & 17.5 are to incorporate the use of the electronic voting system.

This was supported by the Working Group

<u>Rule 18.3(d)</u>

This has been suggested as the Monitoring Officer has received petitions on issues that have already been debated. It re-enforces the rule of not revisiting a decision from the last 6 months.

This was supported by the Working Group in principle subject to clear drafting

as now shown in Appendix 1

OVERVIEW AND SCRUTINY PROCEDURE RULES

15 CALL-IN

The inclusion of new Rule 15.2 of the Call-In Procedure is proposed by the Monitoring Officer. The proposed amendment states:-

15.2 If a decision is called in, the Monitoring Officer has the authority to refuse the call-in if the request does not state [*sufficient*] grounds to justify a call in and/or the outcome sought.

This was supported by the Working Group provided the word sufficient grounds were removed.

For the reasons below the Monitoring Officer recommends that the word *sufficient* is included in the amendment.

The phrase "call-in" is not used in legislation, but it is there that the central powers can be found.

There is a two-step legal process for the establishment of call-in at law.

1. s9F(2) of the Local Government Act 2000, as amended. This provides the general power for overview and scrutiny committees to review or scrutinise executive decisions;

2. s9F(4) of the same Act, which provides a specific power to review or scrutinise a decision made, but not implemented.

The Centre for Governance and Scrutiny guidance on Call-in explains that :-

"Call-in is a safety valve to delay and interrogate important executive decisions. It provides a way for councillors who do not sit on Cabinet to ask that particular decisions are reconsidered by the person or people who originally made them."

It further recommends that:-

"…the presence of clear rules around call-in's operation is important. Critically this is likely to include the use of criteria to determine whether a call-in is "valid". The use of criteria will make call-in more focused and reduce the risk that it will be used for exclusively party-political reasons – criteria also frame the nature of a debate in committee in a way that makes it more likely that a reasoned, informed outcome will be reached."

The guidance also highlights that:- "That request should be seen as notable because it is a function that should only be used in exceptional circumstances.."

Therefore, by stating that reasons should be given and the outcome sought gives the members an indication of the issues that members wish the executive to reconsider and ensure it is not just used for party political purposes.

COMMITTEE PROCEDURE RULES

10. DEVELOPMENT MANAGEMENT APPLICATIONS

Public Speaking at Development Management Committee

Due to a recent issue at DMC a decision was refused then reopened for debate and granted. In legal terms this is correct as Planning decision require reasons which were lacking in this case.

The amendment is to clarify that a formal decision has not been made until members have approved the reasons for either approval or refusal and that it is correct that the Chair can reopen debate to ensure that members give proper reasons for their decision which could include a reversal of the original vote.

This was supported by the Working Group

Agenda Item 8

Corporate Governance Committee – 18 November 2026

Report by: Lydia Morrison – Corporate Director – Finance and Resources

Lead Cllr: Cllr Liam Dewey-Beckett
Executive Councillor for Governance & Democratic Services

Wards	Open / Exempt	Key Decision?
All	Open	No

Local Government Reorganisation Risk Register

Executive Summary: This report is retained from the version presented to the Committee in September, as there have been no further substantive updates other than the extension to Vesting Day. The report includes the most recent risk summary and heatmaps. It provides the Committee with the opportunity to comment on and offer challenge as part of the active management of LGR risks.

Recommendations

1.1. That the Committee comment on the progress the Council is making in regard to its management of risk related to Local Government Reorganisation, including the summary and heatmap reports in the appendices, and identifies any matters requiring further consideration.

	Key Corporate Plan Priorities/Place Strategy Priorities
1	*Effective risk management is critical to ensuring the Council is efficient and effective at providing sustainable service delivery.*

Report Author(s)

Lydia Morrison – Corporate Director – Finance & Resources
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1. PURPOSE OF THE REPORT

1.1 This report updates and informs the Committee on the approach being taken to identify, access and manage risks associated with Local Government Reorganisation (LGR).

1.2 Heatmaps and a summary LGR risk register are included as appendices to support the Committee's oversight of the current LGR risk profile.

1.3 The two LGR Corporate Risks were discussed fully in the 'Corporate Risk Register Report – September 2026', with the further narrative update for Corporate Risk 19 provided as usual.

2. BACKGROUND & CONTEXT

2.1 Local Government Reorganisation presents a significant and evolving risk environment for the Council, with potential implications for service delivery, governance, finance, staffing, partnerships, community outcomes, and readiness for transition.

2.1.1 At regional level, nine workstreams currently support delivery of LGR. These are led by the seven Chief Executives, with support from relevant senior officers. Each workstream is responsible for managing the risks associated with its service areas, and the delivery of key actions to meet the required timelines.

These regional workstreams are complemented by the internal HDC workstreams, structured around three themes: Corporate Services; Place and Regulatory Services; and People and Communities. Several supporting sub-workstreams sit below these. The risk registers maintained within the internal workstreams will be aligned with the corresponding regional registers to support a consistent and coordinated approach, and to ensure all potential risks are monitored effectively.

2.1.2 The HDC LGR Programme Board will be established in October to provide internal oversight of the workstreams and supporting sub-workstreams. Reporting to the Board will include identified risks within the wider programme, milestones, actions, progress, and achievements. Risks, issues, or escalating concerns requiring further attention or intervention will be escalated on an exception-based approach. The Programme Board will be overseen by senior officers.

2.1.3 A regional core Programme Management Office (PMO) is in place for coordination and oversight of administration and project management of the nine regional workstreams. The PMO is overseen by Sarah Reed, the regional LGR Implementation Director, and comprises project managers and business analysts supporting delivery of the LGR programme.

The core PMO is developing a programme-wide risk management strategy intended to establish a consistent approach to the monitoring and management of risks across the regional programme.

2.2 Narratives for LGR Risk Register

As this is the first LGR risk report presented to CGC a narrative has been provided for each risk.

2.2.1 **01 LGR programme demands exceed available organisational capacity disrupting BAU services and delivery of Council priorities –** This risk will be monitored through the overall LGR programme board. Three actions have been identified, with aimed

completion by October 2026. These include formalising the LGR workstream arrangements and progressing the associated resource and project planning. Actions and target dates will remain under review as the programme develops.

2.2.2 02 Failure to meet statutory requirements leaves the Council exposed to legal challenges, impacting the successful delivery of the LGR transition – This risk will be monitored through the Corporate Services workstream. There are five open actions, including reviewing the capacity of the Council's legal function and ensuring that appropriate plans are in place to manage legal compliance. These actions will also be incorporated into the wider LGR programme plan.

2.2.3 03 Uncertainty over contracts and procurement delays LGR readiness, resulting in increased cost and service disruption – This risk will be monitored through the Corporate Services workstream. Three actions have been identified, relating to project planning for the potential novation of contracts and commissioning and review our contract register. Completion of actions is expected by November 2026.

2.2.4 04 LGR planning decisions fail to reflect local needs, and aspirations for growth, resulting in adverse outcomes for communities and businesses – Monitored through the Place workstream. Five actions are currently in-progress, focused on increasing engagement with the Cambridgeshire and Peterborough Combined Authority, establishing a clear communication strategy, and ensuring growth considerations are factored into project planning. Completion of actions is expected by November 2026.

2.2.5 05 Inadequate planning and coordination of ICT systems for LGR results in integration failures, incompatibility, service disruption and significant cost – This risk will be monitored through the IT workstream. There are currently seven actions associated with forward planning for IT provision and capacity/resourcing needs. Completion of actions is expected by October 2026.

2.2.6 06 External interference or influence alters the direction or delivery of LGR, delaying progress and adversely affecting Council and community outcomes – This risk will be monitored through the Communications workstream and at overall programme level. Three actions have been identified, including ongoing scenario planning. Some actions relate to later stages of LGR once the final determination from HM Government is known. The risk and its associated actions will continue to be assessed as the external environment develops.

2.2.7 07 Ineffective engagement throughout LGR leads to confusion amongst residents, reputational damage and poorly designed services. – This risk will be monitored through the Communications workstream. Two ongoing actions have been identified, relating to the continuous review of the LGR communications plan as and the development of appropriate, and effective communication for each potential LGR outcome. The actions are scheduled for review and expected to be complete by the end of October 2026.

2.2.8 08 Failure to carry out effective engagement with staff throughout LGR leads to industrial action, reputational damage, and damaged recruitment/retention – This risk will be monitored through the Workforce and Human Resources (HR) workstream. There are currently six actions associated with HR capacity, workforce engagement planning, and data collection and comparison of the workforce. It is expected that these actions will be completed by end of October 2026, once HM Government has provided a final determination; or the actions will remain ongoing throughout the programme given their nature.

2.2.9 09 Failure to carry out effective financial planning will impact the sustainability of new authorities, resulting in budget gaps that impact services – This risk will be monitored through the Finance workstream. There are two ongoing actions, covering

assessment and planning for financial impacts and budgets, and continued scenario planning. These actions are expected to be reviewed in October/November 2026 once a final determination is provided.

2.2.10 10 Service/structure redesign does not align with partners or meet outcomes for future geographies resulting in missed opportunities for Value For Money/streamlining – This risk will be monitored at overall LGR programme level. There are currently seven open actions. Progress on these actions is dependent upon HM Government's final determination. Actions are expected to remain ongoing throughout the programme for continuous review.

2.2.11 11 Failure to manage partnership relations effectively results in reputational damage, missed opportunities for alignment and delay in the LGR programme – This risk will be monitored through the Policy workstream and at overall LGR programme level. Four open actions are expected to be complete by end of November 2026. Timing and scope of these actions will be reviewed once HM Government's final determination is known.

2.2.12 12 Failure to provide members with sufficient information may result in ineffective decision-making leading to sub-optimal outcomes and missed Value For Money – This risk will be monitored through the Governance workstream. Five actions have been identified, with three scheduled for completion for the end of November 2026, and two scheduled for January 2027 to reflect the different stages of the LGR programme.

2.2.13 13 LGR changes priorities and resources, preventing delivery of Corporate Plan commitments – This risk has been recently identified and is being assessed to determine appropriate controls, dependencies and resource implications. Associated actions, responsibilities and target dates are being developed and will be submitted to the register once confirmed. This risk will be monitored at overall LGR programme level.

2.2.14 14 Changes to boundaries and service arrangements weaken established community connections, reducing cohesion, participation, and local resilience – This risk has been recently identified and is being assessed to determine appropriate controls, dependencies and resource implications. Associated actions, responsibilities and target dates are being developed and will be submitted to the register once confirmed. This risk will be monitored through the Communities workstream.

2.2.15 15 Boundary changes weaken identification with Huntingdonshire and local places, reducing trust, representation and support for the new authority – This risk has been recently identified and is being assessed to determine appropriate controls, dependencies and resource implications. Associated actions, responsibilities and target dates are being developed and will be submitted to the register once confirmed. This risk will be monitored at overall LGR programme level and through the Communications workstream.

3. COMMENTS OF OVERVIEW & SCRUTINY

N/A

(The comments of the relevant Overview and Scrutiny Panel will be included in this section prior to its consideration by the Cabinet.)

4. IMPLICATIONS OF THE DECISION

N/A

5. LIST OF APPENDICIES

Appendix 1 – LGR Risk Register Summary
Appendix 2 – Risk Heat Maps

LGR Risk Register - Summary

Risk Register						
Prefix	**Risk Title**	**Risk Description**	**Risk Owner**	**Inherent Priority**	**Residual Priority**	**Target Priority**
LGR0001	LGR programme demands exceed available organisational capacity disrupting BAU services and delivery of Council priorities	Fail to effectively manage the LGR change process alongside delivering services now (Business as Usual)	Chief Executive	Very High (3:5=15)	Medium (3:2=6)	Medium (3:2=6)
LGR0002	Failure to meet statutory requirements leaves the Council exposed to legal challenges, impacting the successful delivery of the LGR transition.	LGR requires the Council to comply with statutory, regulatory, governance, and contractual requirements relating to areas including decision-making, consultation, procurement, data, assets, and the transfer of services and liabilities. Failure to identify, understand and address these requirements promptly, could result in the Council facing legal challenge, financial liabilities, regulatory intervention and delays to the successful delivery of the LGR transition.	Corporate Director (Communities)	Very High (4:4=16)	High (4:3=12)	High (4:3=12)
LGR0003	Uncertainty over contracts and procurement delays LGR readiness, resulting in increased cost and service disruption.	The Council needs a clear understanding of its contracts, procurement activity, supplier dependencies and associated liabilities in preparation for LGR. Incomplete or inaccurate information, unclear ownership, unresolved procurement activity or uncertainty over contract transfer, variation, extension and termination arrangements could delay transition decisions, disrupt services, and result in additional costs, contractual disputes or unmanaged liabilities.	Interim Corporate Director - Finance & Resources	Very High (4:4=16)	High (4:3=12)	High (4:3=12)
LGR0004	LGR planning decisions fail to reflect local needs, and aspirations for growth, resulting in adverse outcomes for communities and businesses.	Planning and growth arrangements developed through LGR may not adequately reflect the needs and ambitions of Huntingdonshire's communities, population and businesses. If local evidence, priorities, and interests are not effectively represented or influence over key decisions is limited, future policies, investment and infrastructure may not support sustainable growth or deliver appropriate outcomes for the district. Failure to maintain delivery of growth can have longer-term impacts on aspiration, increased demand on public sector services, and negative affect on tax-base (council-tax, business rates).	Corporate Director (Place)	High (4:3=12)	High (4:2=8)	High (4:2=8)
LGR0005	Inadequate planning and coordination of ICT systems for LGR results in integration failures, incompatibility, service disruption and significant costs	LGR requires the timely identification, coordination and integration of ICT systems and infrastructure. Delayed planning, unresolved dependencies, incompatible systems or insufficient testing could lead to integration/migration failures resulting in the disruption of critical services, and incurring significant additional costs, and delaying the wider LGR transition.	Corporate Director (Communities)	Very High (4:4=16)	High (4:3=12)	High (4:3=12)
LGR0006	External interference or influence alters the direction or delivery of LGR, delaying progress and adversely affecting Council and community outcomes	This risk concerns external actions, decisions or influence that may affect the direction, scope or delivery of Local Government Reorganisation. It covers the Council's ability to monitor developments, represent its interests, engage with key stakeholders and respond to matters outside its direct control.	Chief Executive	Very High (5:5=25)	Very High (5:4=20)	Very High (5:4=20)
LGR0007	Ineffective engagement throughout LGR leads to confusion amongst residents, reputational damage and poorly designed services	Failure to engage effectively with our communities – the public, businesses, other stakeholders – about LGR results in reputational damage, lack of trust and poorly designed services if service users aren't engaged effectively. There is also the potential for legal implications and damaged partner relationships which could affect the delivery of the wider LGR programme.	Corporate Director (Communities)	Very High (4:4=16)	High (4:3=12)	High (4:3=12)
LGR0008	Failure to carry out effective engagement with staff throughout LGR leads to industrial action, reputational damage, and damaged recruitment/retention	Fail to secure staff support, engagement and understanding to effectively progress LGR. This will lead to increased staff uncertainty leading to more risk of industrial action, negative impacts on recruitment and retention and disruption to service delivery.	Chief Executive	Very High (4:4=16)	High (4:2=8)	High (4:2=8)
LGR0009	Failure to carry out effective financial planning will impact the sustainability of new authorities, resulting in budget gaps that impact	Fail to plan through LGR to be financially resilient and sustainable – for funding services, meeting obligations and assuring a medium-term future. This may result in reputational damage and an ability to meet the strategic and savings objectives of LGR.	Interim Corporate Director - Finance & Resources	Very High (4:5=20)	High (4:2=8)	High (4:2=8)
LGR0010	Service/structure redesign does not align with partners or meet outcomes for future geographies resulting in missed opportunities for VFM/streamlining	We design structures / services / policies in readiness for LGR/post-LGR that do not align with those of our partners or do not match anticipated future (i.e. post LGR) outcomes. This will lead to missed opportunities for streamlining and producing the best outcomes for residents that meet the needs of future geographies. This may also have a reputational impact amongst stakeholders and partners.	Corporate Director (Communities)	High (3:4=12)	High (3:3=9)	High (3:3=9)

Prefix	Risk Title	Risk Description	Risk Owner	Inherent Priority	Residual Priority	Target Priority
LGR0011	Failure to manage partnership relations effectively results in reputational damage, missed opportunities for alignment and delay in the LGR	Fail to manage effective partnership relations in one or more interfaces with the Council which could have a significant impact on the delivery of the LGR programme due to reputational damage and missed opportunity through lack of partnership working. This could result in delays and may also have an impact on the future culture and coherence of new organisations.	Corporate Director (Place)	Very High (4:4=16)	High (4:3=12)	High (4:3=12)
LGR0012	Failure to provide members with sufficient information may result in ineffective decision-making leading to sub-optimal outcomes and missed VFM.	Ineffective and timely decision-making by Members caused by lack of sufficient information may result in negative outcomes for residents, reputational damage and missed opportunities for improving value for money. It could also have a financial impact to the LGR programme and result in delay if decision-making isn't timely.	Chief Executive	Very High (4:5=20)	High (4:2=8)	High (4:2=8)
LGR0013	LGR changes priorities and resources, preventing delivery of Corporate Plan commitments.	Disruption of transformation elements.	Corporate Director (Communities)			
LGR0014	Changes to boundaries and service arrangements weaken established community connections, reducing cohesion, participation, and local resilience.	Loss of Community: Because LGR may divide existing communities, alter established service relationships and disrupt connections between residents, voluntary organisations, businesses and public bodies, community networks may weaken, resulting in reduced social cohesion, lower participation in local activity and diminished capacity for communities to respond collectively to local needs.	Corporate Director (Communities)			
LGR0015	Boundary changes weaken identification with Huntingdonshire and local places, reducing trust, representation and support for the new authority.	Loss of identity: Because LGR may replace existing governance arrangements, change administrative boundaries and reduce the visibility of Huntingdonshire within a larger successor authority, residents and communities may feel that their local identity, heritage and distinct priorities have been diminished, resulting in reduced trust, weaker democratic connection and lower support for the new organisation.	Corporate Director (Communities)			

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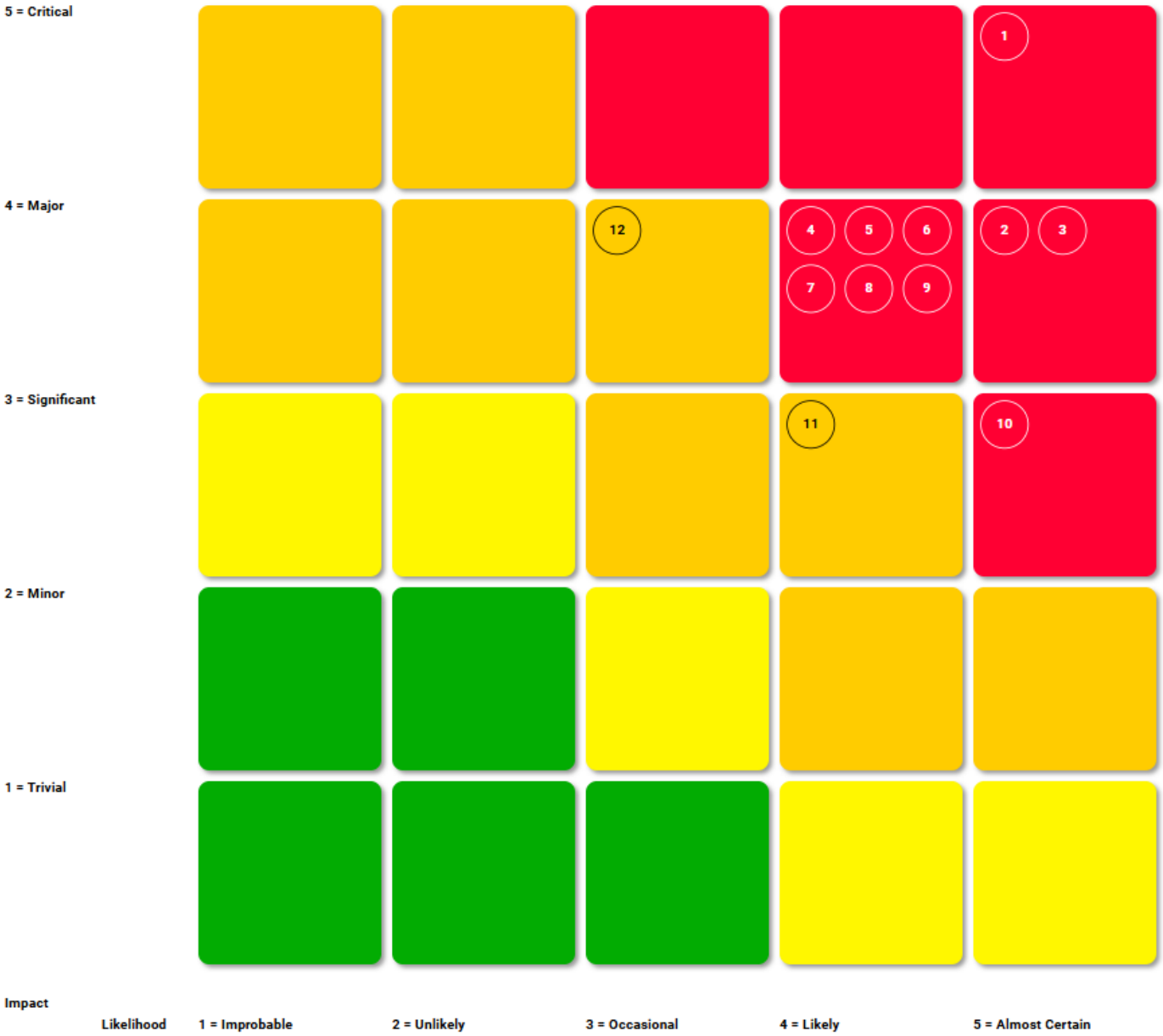
Key for Risk Heat Maps.

Please note, Matrix ID and Risk Reference Number do not match.

Matrix Id	Reference	Risk Title	Inherent	Residual	Target	
1	LGR0006	External interference or influence alters the direction or delivery of LGR, delaying progress and adversely affecting Council and community outcomes	Very High	Very High	Very High	
2	LGR0009	Failure to carry out effective financial planning will impact the sustainability of new authorities, resulting in budget gaps that impact services	Very High	High	High	
3	LGR0012	Failure to provide members with sufficient information may result in ineffective decision-making leading to sub-optimal outcomes and missed VFM.	Very High	High	High	
4	LGR0011	Failure to manage partnership relations effectively results in reputational damage, missed opportunities for alignment and delay in the LGR programme.	Very High	High	High	
5	LGR0007	Ineffective engagement throughout LGR leads to confusion amongst residents, reputational damage and poorly designed services	Very High	High	High	
6	LGR0002	Failure to meet statutory requirements leaves the Council exposed to legal challenges, impacting the successful delivery of the LGR transition.	Very High	High	High	
7	LGR0003	Uncertainty over contracts and procurement delays LGR readiness, resulting in increased cost and service disruption.	Very High	High	High	
8	LGR0005	Inadequate planning and coordination of ICT systems for LGR results in integration failures, incompatibility, service disruption and significant costs	Very High	High	High	
9	LGR0008	Failure to carry out effective engagement with staff throughout LGR leads to industrial action, reputational damage, and damaged recruitment/retention	Very High	High	High	
10	LGR0001	LGR programme demands exceed available organisational capacity disrupting BAU services and delivery of Council priorties	Very High	Medium	Medium	
11	LGR0010	Service/structure redesign does not align with partners or meet outcomes for future geographies resulting in missed opportunities for VFM/streamlining	High	High	High	
12	LGR0004	LGR planning decisions fail to reflect local needs, and aspirations for growth, resulting in adverse outcomes for communities and businesses.	High	High	High	

Corporate Risk Heat Map:

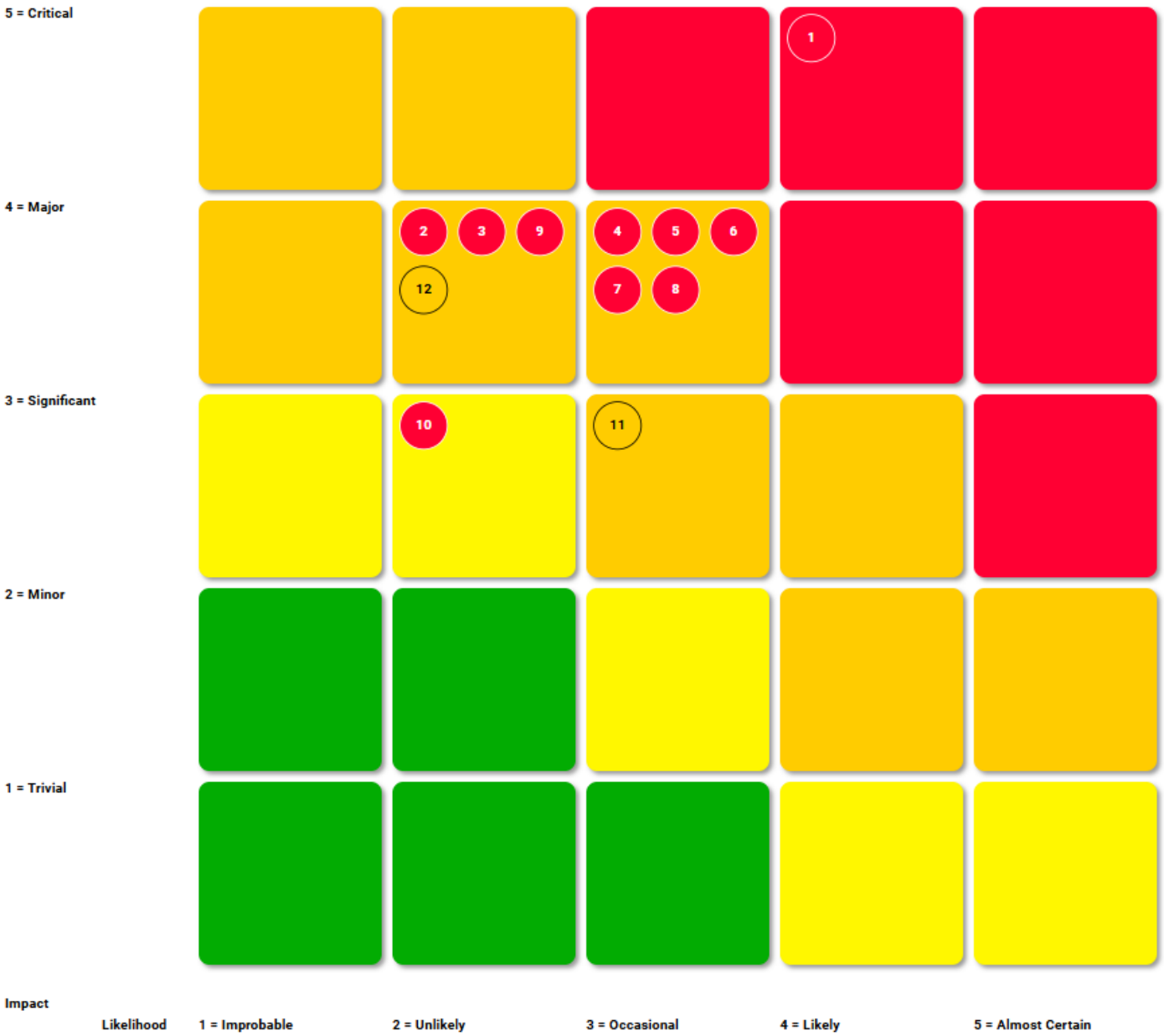
Inherent Risk Ratings



Appendix 2 – LGR Risk Heat Maps

Corporate Risk Heat Map:

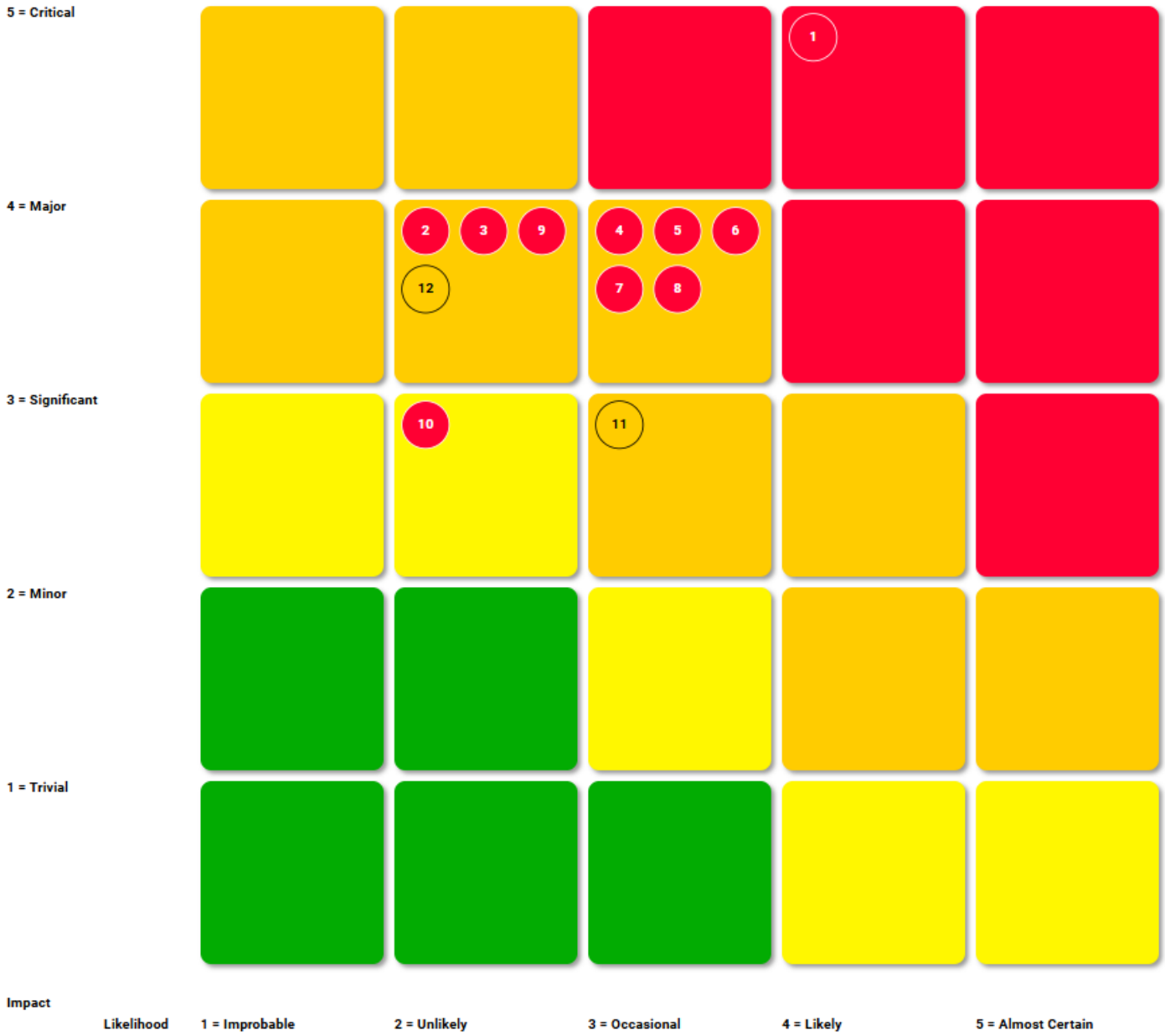
Residual Risk Ratings



Appendix 2 – LGR Risk Heat Maps

Corporate Risk Heat Map:

Target Risk Ratings



Agenda Item 9

Corporate Governance Committee – 18 November 2026

Report by: Dan Harris (RSM) – Internal Audit Manager
Lydia Morrison – Corporate Director – Finance and Resources (On behalf of Corporate Leadership Team

Lead Cllr: Cllr Liam Dewey-Beckett
Executive Councillor for Governance and Democratic Services

Wards	Open / Exempt	Key Decision?
All	Open	No

Internal Audit Progress Report

Executive Summary: This report sets out a summary of the work undertaken by the Internal Audit Service since the Committee last met in September 2026.

Recommendations

1.1. To comment on and note the update on work undertaken by Internal Audit to date.

Report Author(s)

Lydia Morrison – Corporate Director – Finance & Resources
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1. PURPOSE OF THE REPORT

1.1 The purpose of this report is to provide an update of the work of the Internal Audit Service since the last meeting and progress against the Internal Audit Plan 2026/27 that was approved by the Committee on 18th March 2026.

2. BACKGROUND & CONTEXT

2.1 The activities of the Internal Audit Team are pivotal to the organisation's governance and control processes. The findings of audit reviews demonstrate compliance with controls and processes or identify where improvements need to be made. This is an inherent element of Priority 3 of the Corporate Plan (2023-2028) which is about 'doing our core work well' through 'delivering good quality, high value-for-money services with good control and compliance with statutory obligations'.

2.2 RSM will, in the capacity of the Internal Audit Service, be present at the meeting to present the report.

3. IMPLICATIONS OF THE DECISION

3.1 Legal & Constitutional Implications

3.1.1 None.

3.2 Implications on Resources

3.2.1 No additional resource requirements arise from this report.

LIST OF APPENDICES INCLUDED

Appendix 1 – Internal Audit Progress Report from RSM LLP

PRIVATE AND CONFIDENTIAL

Huntingdonshire District Council

Internal audit progress report

Corporate Governance Committee – 18 November 2026



This report is solely for the use of the persons to whom it is addressed.

To the fullest extent permitted by law, we will accept no responsibility or liability in respect of this report to any other party.

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Key messages

The internal audit plan for 2026/27 was approved by the Corporate Governance Committee at the March 2026 meeting. This report provides an update on progress against the plan and summarises the results of our work to date.

We have completed four assignments and issued three final reports from the 2026/27 internal audit plan since the last CGC meeting in September 2026:

- Business Continuity Planning – **Partial Assurance**
- Debt Management – **Partial Assurance**
- Capital Programme Follow Up – **Reasonable Progress**
- Disabled Facilitiies Grant (DFG) Verification – **Completed (Sign off of claim provided)**

Details of the progress made against the internal audit plan are included at Appendix A.

We have also issued two further reports in draft and fieldwork is in progress for four reviews (one of these has been paused). **[To note]**

Client briefings

Since the last CGC meeting, we have issued the following briefings:

- **Client Briefing November 2026 – RSM's External Quality Assessment**
- **When AI goes wrong rogue – September 2026**

Further details can be found below.



Reports issued since the previous Corporate Governance Committee meeting

Review Name	Assurance Opinion / Advisory	Management actions			
		Advisory	Low	Medium	High
Business Continuity Planning	Partial	0	2	9	0
Debt Management	Partial	0	6	7	0
Capital Programme – Follow Up	Reasonable	0	1	1	0
Disabled Faciliites Grant – (Sign off provided, no formal report)	Complete	0	0	0	0
TOTAL		**0**	**9**	**17**	**0**



Summary of reports

Summary of report: Business Continuity Planning

PRIORITY FINDINGS:	High	0	Medium	9	Low	2	Advisory	0

Objective of the review	Assignment approach	Strategic objective or Strategic risks relevant to the scope of the review	Risk source
A review of plans, policies and procedures to respond to a major incident or critical event that could impact Council operations.	Risk Based	Resilience	Corporate risk register

Internal audit opinion



Taking account of the issues identified, the board can take partial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective.

Action is needed to strengthen the control framework to manage the identified risk(s).

Conclusion

Overall, the review identified 11 findings, resulting in nine medium and two low priority management actions. While the Council has developed a more structured Business Continuity Framework since the previous review, some supporting processes are not yet fully established or sufficiently mature, and existing requirements are not consistently applied across all service areas.

Processes require further development for maintaining BCPs between annual reviews, assessing key supplier resilience, following up and escalating overdue plans, and consolidating service ICT dependencies to inform recovery priorities. Service-level testing requirements were not clearly defined, while dedicated corporate Business Continuity exercises have not been undertaken periodically. Although lessons and improvement actions were identified following incidents, action owners, target dates and completion status were not consistently recorded or monitored.

Completeness issues were identified in all six service BCPs sampled, and five did not clearly explain how services would continue during disruption. Not all current Officers with Business Continuity responsibilities had completed the training appropriate to their roles. Governance documentation also required updating to clarify approval, ownership and review arrangements, and to reflect the current operation of the BCSG.

Despite these findings, the review confirmed that the principal foundations of a structured Business Continuity Framework are now in place. The BCSG ia providing oversight, Corporate Priority 1 activities have been agreed and supported by action cards, and arrangements have been introduced for incident reporting and identifying lessons learned. The Council is therefore in a significantly stronger position than at the time of the 2023/24 review, although further work is required to mature the supporting processes and embed Business Continuity arrangements consistently across services.

No High Priority Management Actions agreed.

Summary of report: Debt Management

PRIORITY FINDINGS:	High	0	Medium	7	Low	6	Advisory	0

Objective of the review	Assignment approach	Strategic objective or Strategic risks relevant to the scope of the review	Risk source
To ensure effective debt management that enables the Council to optimise cash flow and maximise income collection.	Risk Based	Doing Our Core Work Well	Corporate Plan 2023-2028

Internal audit opinion



Taking account of the issues identified, the board can take partial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective.

Action is needed to strengthen the control framework to manage the identified risk(s).

Conclusion

The audit identified a number of control design weaknesses and instances of non-compliance within the Council's debt management arrangements. As a result, **seven medium-priority** and **six low-priority** management actions have been agreed.

Key control design weaknesses identified relate to governance and control framework arrangements. These include inconsistencies between the Sundry Debt Policy and the Council's Financial Regulations regarding debt write-off authorisation, the absence of formal approval, version control and complete governance arrangements for key debt management documents, and a lack of clearly defined roles and responsibilities between the Debt Management Team and individual service areas for debt recovery activities. The current decentralised approach to debtor account creation also presents a risk of duplicate, inaccurate, or incomplete debtor records. In addition, opportunities were identified to strengthen the management of aged debtor credit balances and improve oversight of Accounts Receivable reconciliations through documented independent review.

Areas of non-compliance were also noted. Testing identified invoices that were not raised within the timescales set out in the Sundry Debt Policy, delays in debt recovery actions and reminder letter issuance, and instances where services continued to be provided despite outstanding debts. Inconsistencies were also found in the completion of write-off documentation, and credit note approvals were not always supported by an up-to-date delegated authority framework. The review also confirmed that Accounts Receivable reconciliations continue to contain unexplained month-end differences of approximately £30,000 to £35,000 arising from a known system interface issue between

the Accounts Receivable module and the General Ledger. Whilst this issue is already subject to an existing audit recommendation, it continues to impact the accuracy and completeness of reconciliation processes.

Despite these findings, a number of key controls were found to be operating effectively. Debt recovery activity is subject to regular monitoring and testing confirmed that sampled credit notes and debt write-offs had received management approval. The overall reduction in overdue debt during the period reviewed also indicates continued focus on debt recovery activities.

Overall, while the Council has established debt management processes in place, enhancements are required to strengthen governance, accountability, document management, and compliance with established procedures. Timely implementation of the agreed actions will help improve the effectiveness and consistency of debt recovery arrangements, support the accuracy of debtor records and management information, and reduce the risk of outstanding and irrecoverable debt.

No High Priority Management Actions agreed.

Summary of report: Capital Programme Follow Up

PRIORITY FINDINGS:	High	0	Medium	1	Low	1	Advisory	0

Objective of the review	Assignment approach
To ensure that the management of capital projects is robust and that the capital programme is monitored effectively.	Follow Up

Internal audit opinion



Taking account of the issues identified in the remainder of the report and in line with our definitions, in our opinion Huntingdonshire District Council has demonstrated Reasonable Progress in implementing the agreed management actions arising from the Capital Programme audit.

Conclusion

The Council has made positive progress in strengthening controls around the review of the annual Capital Programme, the management of user access within Technology-One and the establishment of a central repository for pre-project outline business cases. However, further work is required to strengthen the governance, approval and documentation of in-year additions to the Capital Programme and to ensure that complete evidence of approvals is consistently retained within the business case repository.

Nine actions were agreed as part of the original audit, six had been marked as closed and were followed up as part of this review. Of these:

- Two Medium and one Low-priority actions have been assessed as Fully Implemented.
- One Medium priority action was assessed as Not Implemented
- One Medium priority action was assessed as Implementation Ongoing (downgraded to Low, reflecting the progress made and reduced level of risk).
- The final Low-priority action was assessed as 'No Longer Applicable', as the intended control objective was already being achieved through existing system functionality.

This represents an implementation rate of 67% across the six actions tested.

- The three remaining actions are not due for implementation until 28 February 2027 and were therefore outside the scope of detailed follow-up testing. Management confirmed that two of these actions are ready to be closed, while work on the remaining action is in progress. At the time of reporting, all three actions remained recorded as open on the action-tracking system and have therefore not been assessed as part of this review.



Internal audit actions



Appendices

Appendix A: Progress against the internal audit plan 2026/27

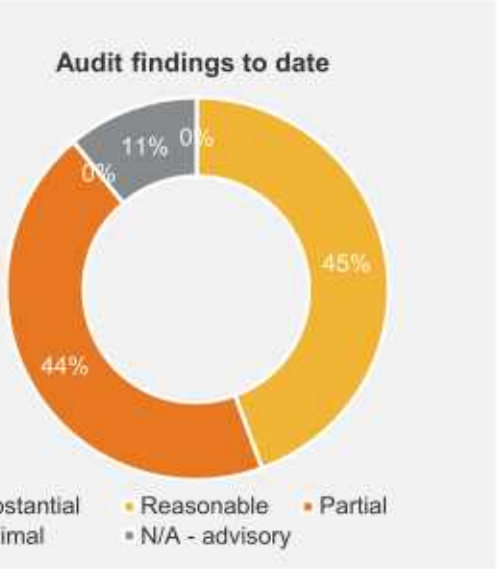
Assignment and Executive Lead	Status / opinion issued	Actions agreed				Target Committee meeting (as per IA plan / change controls*)	Actual Committee meeting
		A	L	M	H		
Recruitment and Retention	Final Report – Reasonable Assurance	0	2	2	1	July 2026	July 2026
Licensing and Environmental Health	Final Report – Reasonable Assurance	0	1	1	0	**July 2026**	**September 2026**
Data Quality – Human Resources	Final Report – Partial Assurance	0	2	1	1	**July 2026**	**September 2026**
Health and Safety	Final Report – Partial Assurance	0	2	6	1	**September 2026**	**September 2026**
Business Continuity	**Final Report – Partial Assurance**	**0**	**2**	**9**	**0**	**November 2026 (was Sept 2026)**	**November 2026**
Debt Management	**Final Report – Partial Assurance**	**0**	**6**	**7**	**0**	**November 2026 (was Sept 2026)**	**November 2026**
Community Health and Wealth Fund *	Review paused – to be rescheduled for January 2027	-	-	-	-	March 2027 (was November 2026)	
Capital Expenditure Follow Up	**Final Report – Reasonable Progress**	**0**	**1**	**1**	**0**	**November 2026**	**November 2026**
Creditor Payments Follow Up	Draft Report - 21/10/2026					January 2027 (was November 2026)	
Disabled Facility Grant Verification	**Complete – Advisory**	**0**	**0**	**0**	**0**	**November 2026**	**November 2026**
Insurance	Draft Report - 6/11/2026					January 2027	
Mandatory Training	Fieldwork in progress					January 2027	
Transformation Follow Up	Fieldwork in progress					March 2027	
Safeguarding	Fieldwork in progress					March 2027	

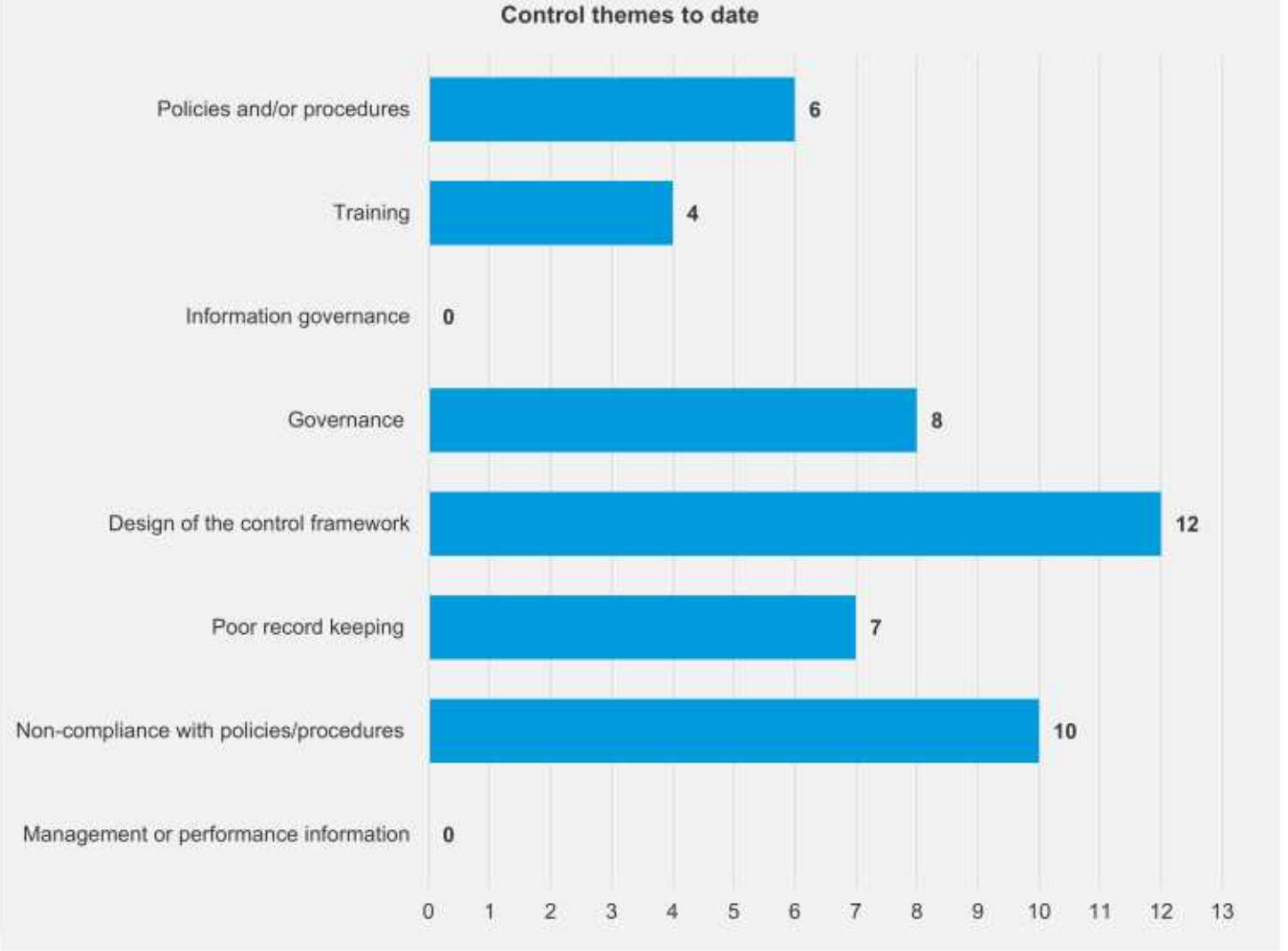
Assignment and Executive Lead	Status / opinion issued	Actions agreed				Target Committee meeting (as per IA plan / change controls*)	Actual Committee meeting
		A	L	M	H		
Risk Management	December 2026					March 2027	
General Ledger Follow Up	January 2027						
ICT Budget Management Follow Up	January 2027					March 2027	
Preparedness for LGR	February 2027					June 2027	
IT Disaster Recovery	February 2027					June 2027	
Full Follow Up	February 2027					June 2027	

*This review was paused by management due to leave of a key member of staff.

Appendix B: Audit findings and themes for 2026/27







Appendix C: Other matters

Detailed below are the changes to the audit plan since the last meeting:

Note	Auditable area	Reason for change
1	CHAWS	This review has been paused by management due to leave of a key staff member. It has provisionally been rescheduled for fieldwork in January 2027.
Previous changes to the audit plan reported to the Committee		
2	Various audits – 2026/27	For the 2026/27 plan, we have agreed some minor changes to the scheduling of internal audits, following discussions with management. The LGR audit has been moved to February 2027 at the request at the CEO, the General Ledger Follow Up has been scheduled for January 2027 (to take account of deadlines for actions), and the CHAWS audit has been brought forward (fieldwork in progress).
3	Various audits - 2026/27	For the 2026/27 plan, we have agreed some minor changes to the scheduling of internal audits, following discussions with management. This includes the BCP internal audit being brought forward to July 2026, the Mandatory Training audit moving back to October 2026, the Transformation Follow Up moving to September 2026 and the General Ledger Follow Up moving forward to August 2026.
4	Various audits - 2026/27	For the 2026/27 plan, we are in the process of scoping audits and agreeing timeframes with management. At the March 2026 meeting we submitted a draft and oversubscribed internal audit plan. We can confirm that the following audits have been removed from 2026/27 programme of work following discussions with management as these were not deemed slightly lower priority areas for 2026/27. These areas will be reconsidered as part of the 2027/28 internal audit planning process and kept under review during the next few months (Car Parking Enforcement, Sickness Absence Management, Planning).

Quality assurance and continual improvement

To ensure that RSM remains compliant with the Global Internal Audit Standards in the UK Public Sector we have a dedicated internal Quality Assurance Team who undertake a programme of reviews to ensure the quality of our audit assignments. This is applicable to all Heads of Internal Audit, where a sample of their clients will be reviewed. Any findings from these reviews are used to inform the training needs of our audit teams.

As part of the Quality Assessment and Improvement Programme, none of your files were selected for Internal Quality Monitoring programme during 2026/27. From the results of the reviews undertaken across our client base, there are no areas which we believe warrant flagging to your attention as impacting on the quality of the service we provide to you.

In addition to this, any feedback we receive from our post assignment surveys, client feedback, appraisal processes and training needs assessments is also taken into consideration to continually improve the service we provide and inform any training requirements.

Post assignment surveys

We are committed to delivering an excellent client experience every time we work with you. Your feedback helps us to improve the quality of the service we deliver to you.

Currently, following the completion of each product we deliver we attached a brief survey for the client lead to complete.

We would like to give you the opportunity to consider how frequently you receive these feedback requests; and whether the current format works. Options available are:

- After each review (current option).
- Monthly / quarterly / annual feedback request.
- Executive lead only, or executive lead and key team members.

RSM's External Quality Assessment

RSM commissioned the Chartered Institute of Internal Auditors to undertake an independent EQA of our internal audit services. In line with the Global Internal Audit Standards, an EQA is required at least once every five years. The review provided independent assurance that our approach aligns with the requirements of the International Professional Practices Framework (IPPF), the Global Internal Audit Standards in the UK Public Sector, and the Internal Audit Code of Practice.

Please see client briefing for more details.

Head of Internal Audit opinion 2026/27

We have issued four negative opinions to date from our final reports (Data Quality – Human Resources / Health and Safety – Open Spaces and Countryside) / Business Continuity Planning / Debt Management). We will continue to update the CEO, S151 Officer, other CLT members, and the CGC as and when reports are issued and if there is any potential impact to the year-end opinion. We will also provide updates at future CGC meetings.

Key Performance indicators

Delivery				Quality			
	Target	Actual	Notes*		Target	Actual	Notes*
Audits commenced in line with original timescales*	Yes	Yes		Conformance with the Global Internal Audit Standards in the UK Public Sector	Yes	Yes	
Draft reports issued within 10 days of debrief meeting	10 days	8 / 9 (89%)	Exception was H&S	Liaison with external audit to allow, where appropriate and required, the external auditor to place reliance on the work of internal audit	Yes	Yes	
Management responses received within 10 days of draft report	10 days	5 / 9 (56%)	Exceptions: • H&S • BCP • Debt Management • Creditor Payments • Follow Up	Response time for all general enquiries for assistance	2 working days	2 days	
Final report issued within 3 days of management response	3 days	8 / 8 (100%)		Response for emergencies and potential fraud	1 working day	1 day	

* The timing of these audits were changed to accommodate staff availabilities (we have not noted any issues with these timing changes).

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RSM

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of Huntingdonshire District Council and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM UK Consulting for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM UK Consulting will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

This report is released to you on the basis that it shall not be copied, referred to or disclosed, in whole or in part (save as otherwise permitted by agreed written terms), without our prior written consent.

We have no responsibility to update this report for events and circumstances occurring after the date of this report.

RSM UK Consulting

RSM UK Consulting is a trading name. If the subject matter of this report relates to an engagement with RSM UK Consulting LLP (registered number OC397475), RSM UK Corporate Finance LLP (registered number OC325347), RSM UK Risk Assurance Services LLP (registered number OC389499) or RSM UK Tax and Accounting Limited (registered number 06677561) this report is sent on behalf of that entity. In all other cases, this report is sent on behalf of RSM UK Tax and Consulting LLP (registered number OC325348). These limited liability entities are registered in England and Wales with their registered office at 6th Floor 25 Farringdon Street, London, EC4A 4AB.

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Agenda Item 10

Corporate Governance Committee – 18 November 2026

Report by: Lydia Morrison – Corporate Director – Finance and Resources (On behalf of Corporate Leadership Team)

Lead Cllr: Cllr Liam Dewey-Beckett
Executive Councillor for Governance and Democratic Services

Wards	Open / Exempt	Key Decision?
All	Open	No

Internal Audit Actions – Update Report

Executive Summary: This report summarises the progress in implementing management actions arising from final internal audit reports. Implementation of the actions are the responsibility of the relevant managers with oversight from Corporate Leadership Team. Further information relating to the Internal Audits carried out will be reported in a separate paper.

Recommendations

1.1. To comment on and note the current position regarding actions arising from internal audit reports

	Key Corporate Plan / Strategic Priorities
1	Corporate Priority 3 – Doing our core work well.

Report Author(s)

Lydia Morrison – Corporate Director – Finance & Resources
Lydia.Morrison@huntingdonshire.gov.uk

1. PURPOSE OF THE REPORT

1.1 This report sets out the current position with respect to implementation of actions arising from Internal Audit reports.

2. BACKGROUND & CONTEXT

2.1 This report summarises the position regarding audit actions arising from final Internal Audit reports. Progress on the completion of audit actions remains under regular review. While the additional pressures arising from Local Government Reorganisation have created some capacity challenges, Officers remain confident in their ability to deliver the required actions within acceptable timeframes. Officers will continue to monitor workloads closely and, where any capacity issues do arise in relation to audit actions, will ensure the Committee is appraised.

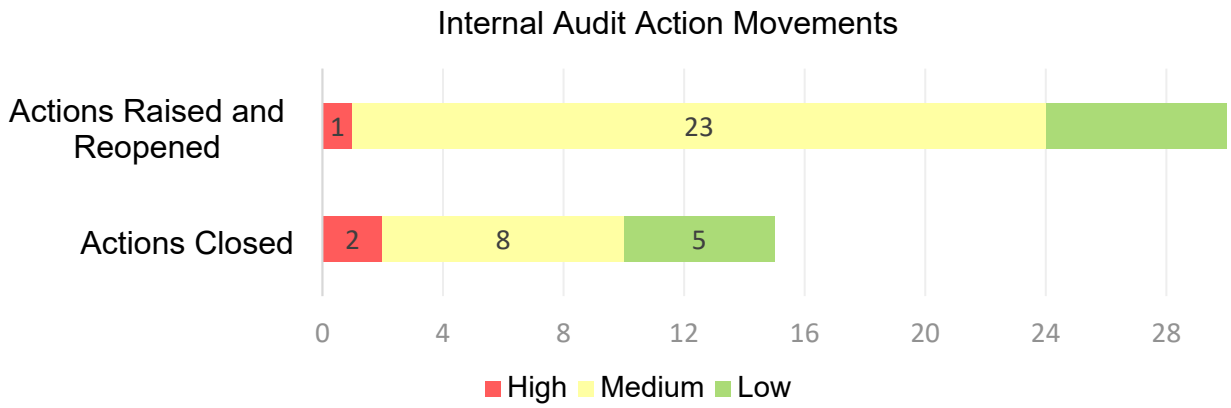
3. OVERALL PROGRESS SINCE THE LAST COMMITTEE MEETING

3.1 At the last Committee meeting there were 49 open actions.

Since then, 33 new actions have been raised from completed audits. A further 2 previously closed actions were reopened following the Capital Programme follow-up audit. During the same period, 15 actions were closed.

As a result, there are currently 69 open actions, representing a net increase of 20 since the previous report.

The bar chart below provides a visual summary of internal audit actions raised, reopened and closed since the last Committee meeting, split by priority.



4. CURRENT OPEN ACTIONS POSITION

4.1 There are currently 69 open internal audit actions, comprising of 9 High, 40 Medium and 20 Low priority actions.

4.2 Of these, 17 actions are overdue, comprising 8 High, 7 Medium and 2 Low priority actions.

4.3 Appendices 1 and 2 sets out all the actions that remain open from final internal audit reports. It includes the agreed management actions, original and revised target dates, and the latest updates provided by action assignees.

5. ACTIONS CLOSED SINCE LAST COMMITTEE MEETING

5.1 Since the last Committee meeting, 15 internal audit actions have been closed, comprising of 2 High, 8 Medium and 5 Low priority actions.

5.2 Of the 15 closed actions, 11 were closed on or before their agreed target dates, and 4 were closed after their expected completion dates.

5.3 Full details of actions closed since the last Committee meeting, including closure dates and closure comments, are provided in Appendix 3.

6. ACTIONS WITH REVISED TARGET DATES

6.1 This section highlights internal audit actions where target dates have been revised. There are currently 25 open actions operating to revised target dates, of which 8 actions have had their target date revised since the last Committee meeting.

6.2 The table below sets out the open actions that have had their target dates revised since the last Committee meeting, including the new due date and the reason for the change.

Details of all currently open actions, including historic target date revisions, are provided in Appendices 1 and 2.

Action Ref	Priority	Original Date	Revised Date	Action Summary	Update
Health and Safety – Open Spaces and Countryside					
5717	Medium	30 Nov 2026	31 Jan 2027	Review and enhancement of inspection and risk assessment tracking arrangements at	Target date revised to align with the completion dates of the other actions arising from the audit.

				Hinchingbrooke Country Park and Paxton Pits.	
5718	Medium	31 Dec 2026	31 Jan 2027	Improvement of risk assessment arrangements to ensure risk ratings and mitigation actions are consistently documented, monitored and implemented.	Target date revised to align with the completion dates of the other actions arising from the audit.
Risk Management					
5284	Medium	31 Aug 2026	19 Jan 2027	Review, approval and adoption of the Risk Management Strategy 2026-2028 through the Council's agreed governance process.	Target date revised due to delays in confirming the appropriate governance route for approval and adoption. The route has now been agreed and the Strategy is scheduled for Cabinet in January.
5286	Medium	31 Aug 2026	31 Mar 2027	Implementation of the revised risk management approach across all service areas, including updates to service risk registers.	Target date revised to allow completion of risk workshops and updates to all service risk registers.
5288	Medium	31 Aug 2026	19 Jan 2027	Establishment of governance arrangements for the reporting and oversight of service-level risk registers.	Additional time required to align service-level risk reporting arrangements with the Council's developing governance structure.
5289	Medium	31 Aug 2026	30 Nov 2026	Ongoing monitoring and review of the risk management gap	Target date extended to allow the gap analysis to be reviewed and

				analysis to track progress and support continuous improvement.	updated to reflect progress made through recent risk management improvements.
5285	Low	31 Aug 2026	30 Nov 2026	Formalisation and delivery of the risk management training programme, including ongoing training schedules, refresher sessions and defined responsibilities.	Target date extended to allow the formal training schedule and refresher programme to be finalised and embedded across the organisation.
5287	Low	31 Aug 2026	19 Jan 2027	Implementation of quarterly communications and monitoring arrangements to support the timely review of service-level risk registers.	Additional time required to formalise quarterly communications and enhanced monitoring arrangements across all service areas.

7. IMPLICATIONS OF THE DECISION

7.1 Implications on Resources

7.1.1 There are no additional resource requirements arising from this paper.

8. RISK MANAGEMENT

8.1 Corporate Leadership Team continues to have oversight of completed audits and the actions raised through the Council's internal audit reporting arrangements.

8.2 Internal Audit continues to monitor progress against agreed actions, seeking updates and supporting evidence from responsible officers where required. Any significant capacity pressures or delays impacting delivery will continue to be reported to the Committee as appropriate.

9. LIST OF APPENDICES INCLUDED

Appendix 1 - Open Internal Audit Actions
Appendix 2 - Open Internal Audit Actions (Restricted)
Appendix 3 - Closed Internal Audit Actions

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Appendix 1 - Open Internal Audit Actions

Generated Date	Nov-26

Business Continuity Planning

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
5725	Medium	Management will review all submitted 2026/27 Business Continuity Plans against the requirements of the Business Continuity Plan Writing Policy and return incomplete plans to service areas for amendment	30 Nov 2026	30 Nov 2026	Description: Management will review all submitted 2026/27 Business Continuity Plans against the requirements of the Business Continuity Plan Writing Policy and return incomplete plans to service areas for amendment.Update - In progress - All BCPs have been reviewed and details of required updates included in attached Spreadsheet. This has been sent to Directorate to promote and complete.Next review 15 Oct 26Further Information: Update Date: 08 Oct 2026
5726	Medium	Management will update the BCP template and supporting guidance to clarify the information required about how services will continue during disruption. The guidance should include a completed example showing the level and type of information expected. As part of the annual BCP review process, plans that do not provide sufficiently clear and practical continuity arrangements will be returned to service areas for amendment.	31 Jan 2027	31 Jan 2027	Description: Newly agreed action following the recent Business Continuity audit. Progress updates will be provided as implementation advances and evidence becomes available Further Information: Update Date: 29 Oct 2026
5728	Medium	Management will establish a documented process for assessing the resilience of key suppliers and outsourced time-critical functions. The process will define: • how supplier resilience should be assessed • what assurance evidence should be obtained and retained • how contingency arrangements should be identified and documented • how frequently supplier resilience should be reviewed The BCP template and supporting guidance will be updated to reflect the process and include a completed example of the information expected	01 Apr 2027	01 Apr 2027	Description: Newly agreed action following the recent Business Continuity audit. Progress updates will be provided as implementation advances and evidence becomes available Further Information: Update Date: 29 Oct 2026
5730	Medium	Management will update the Business Continuity Plan Writing Policy, BCP template and supporting guidance to clearly define the ICT systems and recovery information that services are required to record. The recorded information will be consolidated and reviewed with ICT to identify shared dependencies and ensure disaster recovery arrangements and system restoration priorities reflect business requirements	01 Apr 2027	01 Apr 2027	Description: Newly agreed action following the recent Business Continuity audit. Progress updates will be provided as implementation advances and evidence becomes available Further Information: Update Date: 29 Oct 2026
5731	Medium	Management will establish and maintain an up-to-date list of all officers with Business Continuity responsibilities, including BCP owners, coordinators, deputies and staff involved in service recovery. Heads of Service will be responsible for confirming role holders and notifying changes. Training needs will be assessed and the appropriate level of training or awareness provided. Completion will be monitored and reported to the Business Continuity Steering Group, with outstanding training followed up.	30 Sep 2026	30 Sep 2026	Description: The process of maintaining BC Plans has been improved and a tracking mechanism is in place to identify Officers named as key staff within these plans. These Officers receive relevant training.The action is not yet complete. Over 120 Officers have been identified within the plans - but there are some gaps. The Steering Group actioned the Corporate Director (Communities) to escalate this with relevant HoS, and this happened in Oct26 Further Information: Update Date: 23 Oct 2026
5733	Medium	Management will complete the planned whole-Council BCP exercise and report its outcomes and lessons to the Business Continuity Steering Group. Additionally, management will introduce a consistent process for recording and monitoring actions arising from exercises and incidents, including an action owner, target date, status and evidence of completion, with progress reviewed by the Steering Group until all actions are closed.	31 Mar 2027	31 Mar 2027	Description: Newly agreed action following the recent Business Continuity audit. Progress updates will be provided as implementation advances and evidence becomes available Further Information: Update Date: 29 Oct 2026

5723	Low	Management will update the Corporate Business Continuity Strategy by end of September 2026 by: • completing the approval, sign-off and document-control information • clearly identifying the document owner and documenting review arrangements • updating governance references to reflect current arrangements Management will update the Business Continuity Plan Writing Policy by end of November 2026 by: • completing the approval, sign-off and document-control information • clearly identifying the document owner and documenting review arrangements to ensure the Policy remains current	30 Nov 2026	30 Nov 2026	Description: • completing the approval, sign-off and document-control informationUpdate - Complete - added to Strategy Doc (Ver 1.2) • clearly identifying the document owner and documenting review arrangementsUpdate - Complete - stated in the BCP Strategy Doc.• updating governance references to reflect current arrangementsUpdate - In progress - Updated the strategy & TOR for Steering Gp to be signed off Management will update the Business Continuity Plan Writing Policy by end of November 2026 by:• completing the approval, sign-off and document-control informationUpdate - In Progress - Added to the BCP Writing policy - Signatures to complete• clearly identifying the document owner and documenting review arrangements to ensure the Policy remains currentUpdate - In progress - everything in place awaiting signature Further Information: Update Date: 08 Oct 2026

Data Quality - Human Resources

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
5688	Medium	Management will undertake a comprehensive review of all employee records to ensure that start dates recorded in iTrent are accurate and align with the corresponding contractual documentation, in preparation for Local Government Reorganisation.	30 Apr 2027	30 Apr 2027	Description: This piece of work has been commenced and progress is being made Further Information: Update Date: 09 Oct 2026 Description: This piece of work will be started once the job descriptions have been reviewed Further Information: Update Date: 15 Aug 2026

Health and Safety – Open Spaces and Countryside

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
5719	High	We will ensure all mandatory health and safety training is identified and all staff still required to complete the training are reminded. Compliance will be regularly monitored, and persistent non-compliance will be reported to line managers and the appropriate governance forum. Appropriate action will be taken against persistent non-compliance with relevant employees.	31 Jan 2027	31 Jan 2027	Description: Part of new Staff Induction process with training matrix and individual personnel folders in QMS. All staff training to be a standard item in 1:1 meetings to ensure compliance or appropriate action taken. Rangers to be completed by end November 26. Further Information: Update Date: 19 Oct 2026
5713	Medium	We will ensure the relevant governance groups responsible for scrutinising health and safety performance receive anagement information reports on a quarterly basis, which include key information such as near misses.	31 Jan 2027	31 Jan 2027	
5716	Medium	We will ensure that the Parks and Open Spaces risk assessments are reviewed on an annual basis.	31 Jan 2027	31 Jan 2027	Description: All risk assessments are being reviewed following the RSM Audit and subsequent Right Directions audit for Hinchingbrooke Country Park. Paxton Pits Nature Reserve is due a Right Directions audit in the autumn. All assessments will be updated prior to the end of the year (31-Dec) Further Information: Update Date: 19 Oct 2026
5717	Medium	We will review the inspection and risk assessment trackers for Hinchingbrooke Country Park and Paxton Pits to ensure sufficient detail is documented. This will include, but will not be limited to, the following: • Mandatory inspections and risk assessments; • Responsible individual; • Date of recent inspection / assessment; and • Date of required re-inspection / assessment.	30 Nov 2026	31 Jan 2027	Description: Amended due date to bring in line with other actions as per request Robbie Bratchell 16/10/26 Further Information: Update Date: 19 Oct 2026
5718	Medium	We will ensure risk assessments are fully completed with documented risk ratings, and that immediate or long-term actions are documented for medium and high risks. We will also document actions within the tracker to ensure they are logged, monitored and followed up to implementation.	31 Dec 2026	31 Jan 2027	Description: Amended due date to bring in line with other actions as per request Robbie Bratchell 16/10/26 Further Information: Update Date: 19 Oct 2026
5720	Medium	We will ensure that all site-based staff are identified and that the level of training required is fully clarified in the relevant policies, that the required training is scheduled for timely completion. Renewal dates will be documented and monitored to ensure site-based staff have adequate training.	31 Jan 2027	31 Jan 2027	Description: All Staff and volunteers to be added to the site training matrix to ensure all qualifications and training are completed to the correct level before a task is commenced and signed off as completed by the Lead Ranger / Ranger as required. Further Information: Update Date: 19 Oct 2026
5721	Medium	We will review the number of staff required to complete mandatory training on the following Asbestos Awareness, COSHH and Legionella Awareness and consider if this should be made mandatory for a wider cohort of staff.	31 Jan 2027	31 Jan 2027	Description: This action is new to me, some background would be helpful please as I have limited input with H&S as this is Pete Corley's area. Further Information: Update Date: 19 Oct 2026
5714	Low	We will review and update the Health and Safety Policy to ensure the groups responsible for governing health and safety, including the Employment Committee, are documented within the policy's reporting and governance structure.	31 Jul 2027	31 Jul 2027	
5715	Low	We will ensure that the health and safety procedures include documented version control and sign-off from the approver. Additionally, the policy will reference the relevant procedures, with reciprocal links maintained to ensure full alignment.	31 Jan 2027	31 Jan 2027	Description: This work is being done as part of the revision of all Health and Sfatey within Parks and Open Spaces follwoing the RSM and Right Diretions Audits. It is in hand to be completed on time. Further Information: Update Date: 19 Oct 2026

Debt Management					
Reference	**Priority Level**	**Action Detail**	**Original Target**	**Revised Target**	**Update Details**
5746	Medium	Management Will implement a formal document governance framework for Accounts Receivable procedures by establishing a central repository of approved documents, removing superseded versions, introducing document control standards (including version control, ownership, review dates and approval records), reviewing procedures to ensure they remain current and compliant, and implementing periodic reviews to maintain ongoing accuracy and effectiveness.	31 Dec 2026	31 Dec 2026	Description: Procedures are currently being updated, it is expected that this action will be completed by the target date of 31.12.26 Further Information: Update Date: 28 Oct 2026
5747	Medium	Management will update the Sundry Debt policy to clearly define the responsibilities of individual service areas and the Credit Control Team for debt recovery activities, including reminder letters, escalationarrangements and response expectations	31 Dec 2026	31 Dec 2026	
5748	Medium	A process will be introduced to monitor and follow up outstanding responses to debtor reports to support timely and effective debt recovery where appropriate	31 Dec 2026	31 Dec 2026	Description: Internal audit have included a comment in their review about the impact of years of ack of resource across the team. With the new posts now being approved, recruitment will begin soon and the team will be able to chase services for responses in a timely manner. Further Information: Update Date: 28 Oct 2026
5752	Medium	Management will implement and evidence a formal independent review of monthly Accounts Receivable reconciliations. The review should be performed by an appropriate line manager and documented through electronic or manual sign-off, confirming that: - The reconciliation has been completed accurately and on a timely basis; - All reconciling items have been appropriately investigated and explained; - Outstanding differences are tracked and resolved where possible; and - Any significant or recurring issues are escalated	31 Dec 2026	31 Dec 2026	Description: This action is currently being reviewed and will be completed by the target date. Further Information: Update Date: 28 Oct 2026
5754	Medium	We will review arrangements for non-standard services (inc uding Commercial Rent, Licensing, One Leisure and Trade Waste) to ensure reminder letters are generated and issued in line with the CounciCs debt recovery requirements (where this is within the debt management team responsibility)	31 Dec 2026	31 Dec 2026	Description: Reminders are issued on a weekly basis, unless there is a reason not to, ie, lack of resource, leave and sickness in the team. Trade waste, and Licensing reminder letters are run on a more adhoc basis with input from the service area, however, a review of this will take place prior to the target date. Commercial rent reminders are run on a monthly basis by the Commercial Rents Officer Further Information: Update Date: 28 Oct 2026
5755	Medium	Management will liaise with service areas that do not currently place customers on stop when invoices remain unpaid to review existing processes and implement arrangements to identify and suspend services, where appropriate, for customers with outstanding debts. The Sundry Debt Policy will also be updated to clarify circumstances where exceptions to service suspension have been agreed	31 Dec 2026	31 Dec 2026	Description: Services have frequently been reminded of the debt policy guideline around putting customers on stop. The main area of concern are OL and Operations. The process may require some input from senior management. Further Information: Update Date: 28 Oct 2026
5744	Low	Management Will investigate the inconsistency between the write Off delegated authorities (> E5,OOO) set out within the Sundry Debt Policy and the Financial Regulat'ons and determine which document reflects the intended governance arrangements. Following this review, either the Sundry Debt Policy or the Financial Regulations will be amended as appropriate to ensure compliance with the Council's governance framework.	31 Dec 2026	31 Dec 2026	
5745	Low	Management will update the Sundry Debt policy to ensure it incorporates approval requirements for credit notes and includes appropriate version control arrangements. Any amendments will be subject to the relevant review and approval processes. This will include documented approval from the InterimCorporate Director - Finance & Resources	31 Dec 2026	31 Dec 2026	
5750	Low	Management Will consider the requirement within the Sundry Debt policy for invoices to be raised within seven days of the provision of goods, services, or facilities to ensure it remains appropriate and achievable. Management will also investigate whether payment terms can be reduced or removed (upfront payment required) for selected services to support more timely debt recovery.	31 Dec 2026	31 Dec 2026	

5751	Low	Management will assess the feasibility of regularly updating the Authorisation List for Credits and Write-Offs to ensure all authorised officers are included, and their delegated approval limits are accurately reflected. Alternatively, management may choose to simplify the approval framework by aligning It WIth the line manager approval requirement already communicated by the Exchequer Officer and ensuring this requirement is formally documented within the Sundry Debt policy	31 Jan 2027	31 Jan 2027	Description: Current list up to date, this will be reviewed by the revised target date and updated accordingly Further Information: Update Date: 28 Oct 2026
5753	Low	We will establish a process to ensure weekly reminder runs are completed irrespective Of staff absence or leave	31 Dec 2026	31 Dec 2026	Description: Once the team is at full capacity, and successful recruitment and training given, this will be achievable. Currently, very few reminder runs are missed, and when it does happen, the debt is picked up on the next weeks reminder run, it does not mean that the debt is not chased, just that the reminder letter is issued 7 days later. Further Information: Update Date: 28 Oct 2026
5756	Low	Management will strengthen controls over the write-off process by ensuring that all write-off authorisations are completed fully and consistently. This will include either requiring approvers to print their name, provide a legible signature, and date the authorisation in the designated approval section of the Application for Write-Off of an Irrecoverable Sundry Debt form, or evidencing approval and the rationale for the write-off via email	31 Dec 2026	31 Dec 2026	Description: Write off procedures are currently rigorous and no write off is done without the relevant service level authorisation. A write off is deemed necessary where all other efforts to collect the debt have failed. Currently, where there may not be a signature, the form has been attached to an email from the relevant authoriser. This action will be completed by the target date and authorisers will be required to sign the write off form rather than express agreement via email Further Information: Update Date: 28 Oct 2026

Capacity Planning

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
4834	Low	Develop guidance or a checklist to support services in considering Local Government Reorganisation(LGR) as part of the 2027/28 Service Planning cycle. It should: • Highlight key areas for services to consider, such as statutory duties, future operating models, resource implications and dependencies. • Provide prompts to help managers assess these impacts in a consistent and proportionate way. • Include a straightforward way for services to record assumptions, risks and uncertainties	31 Dec 2026	31 Dec 2026	Description: On hold pending Central Government's review of the LGR programme. In relation to HDC we are still waiting to hear when LGR will proceed and selected option. The deadline of Dec 2026 will be extended when the position is clear. Further Information: Update Date: 13 Oct 2026 Description: In progress and on target for Dec 26 - The baseline information regarding 'Day 1 requirements' has now been collated in the 'Taxonomy datasheets' across all services and 7 Authorities. Now waiting for Regional PMO to provide initial analysis across all authorities. The Regional workstreams and sub-workstreams are working on 'Workstream Initiation Documents' (WIDs). These will detail the roadmaps for safe and legal for Day 1. Once submitted, will be analysed and shared across authorities. Further Information: Update Date: 20 Aug 2026 Description: In progress and on target for Dec 26 - The baseline information regarding 'Day 1 requirements' has been collated as initial draft in the 'Taxonomy datasheets' across all services. The next step is to analyse this information and develop into a programme of work based on day 1 priorities. Further Information: Update Date: 30 Jun 2026 Description: Regarding capacity and service planning for 2027/28 and impact of LGR - All HoS have been asked in April 26 to put forward any capacity issues regarding key staff releasing time for LGR. The additional resource requests are being considered by Leadership. All HoS have also been shared 'Minimum requirements for Day1' for new unitary organisation. This is the baseline that will help identify priorities for service planning for 2027/28. Further Information: Update Date: 19 May 2026 Description: Regarding capacity planning and impact of LGR - The baseline data set per a service has been created to highlight current demand due to transformation projects, business as usual including statutory projects, corporate compliance requirements, external LGR working groups and internal data quality working groups. This baseline information is being used to bring challenge regarding project priority. The new HoS for Transformation will also be meeting all HoS in March to discuss being prepared for LGR and capacity implications. Further Information: Update Date: 04 Mar 2026

Capital Programme					
Reference	**Priority Level**	**Action Detail**	**Original Target**	**Revised Target**	**Update Details**
3729	Medium	To ensure robust governance and compliance with the capital budgeting process, management will implement controls to ensure a capital bid form is completed for all capital items. In cases where the expenditure relates to a recurring asset replacement programme, management will ensure that the anticipated annual replacement is either: • Approved via a completed Capital bid form • Clearly documented as part of an appropriately approved rolling capital programme • Covered under a pre-approved budget or contract framework	31 Jul 2025	28 Feb 2027	Description: Description: A new governance process has been introduced as part of the 2027/28 budget setting process. Full details of the process including supporting documentation has been shared with Laura Petkeviciute on 5th August 2026. this action needs to be marked as completed: Update Date: 04 Sept 2026Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. This will ensure that all new capital bids are submitted via a capital bid form and approved via an appropriate forum. The approving forum will be dependent on the size of the bid and the funding source. New bids will only be added to the rolling capital programme after a bid has been formally approved, and a source of funding has been identified. The new bid form will require services to complete a range of information, including a section to document its review and endorsement. Further Information: Update Date: 03 Jun 2026 Description: Reopened: Action Re-Opened following a Follow Up Part One Audit - We were advised by the Head of Finance and Deputy S151 that a new governance process will be approved, as part of the February 2026 budget report, which will ensure that all new capital bids are submitted via a capital bid form and approved via an appropriate forum. The approving forum will be dependent on the size of the bid and the funding source. New bids will only be added to the rolling capital programme after a bid has been formally approved, and a source of funding has been identified. The new bid form will require services to complete a range of information, including a section to document its review and endorsement. However, we were advised by the Head of Finance and Deputy S151 that this new process had not been developed or documented yet, with the intention it will be finalised in January 2026.The action has not been implemented. Further Information: Update Date: 19 Feb 2026 Description: Action update Further Information: Email sent to service detailing requirement to complete bid form for rolling programme of replacement Update Date: 28 Jul 2025

3730	Medium	Action addition from a Follow Up Part One Audit Report 19 Feb 2026 - The Council will continue to develop and document the new capital bid process to be approved as part of the February 2026 budget report. Original Action -Management will ensure capital bids are reviewed and approved by an appropriate forum. The capital bid form will be updated to include a section for documenting the forum's review and endorsement decision.	30 Jun 2025	28 Feb 2027	Description: Description: A new governance process has been introduced as part of the 2027/28 budget setting process. Full details of the process including supporting documentation has been shared with Laura Petkeviciute on 5th August 2026. this action needs to be marked as completed: Update Date: 04 Sept 2026Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. This will ensure that all new capital bids are submitted via a capital bid form and approved via an appropriate forum. The approving forum will be dependent on the size of the bid and the funding source. Further Information: Update Date: 03 Jun 2026 Description: Reopened: Action Re-opened following a Follow Up Part One Audit. We were advised by the Head of Finance and Deputy S151 that a new governance process will be approved, as part of the February 2026 budget report, which will ensure that all new capital bids are submitted via a capital bid form and approved via an appropriate forum. The approving forum will be dependent on the size of the bid and the funding source. However, a paper has not yet been drafted to summarise the revised process and we have not been provided with evidence to confirm this new process has been implemented yet.The action has not been implemented. Further Information: Update Date: 19 Feb 2026
3732	Medium	Management will define a formal process for in-year capital programme additions, including: • A requirement for documented approval for all in-year additions, clearly specifying the authorising officer/body. • A defined communication protocol to ensure the Financial and Treasury Accountant is notified promptly of any approved additions. • Maintenance of a central register of in-year capital additions, including supporting documentation and approval evidence.	31 Oct 2025	28 Feb 2027	Description: In line with the other finance process and governance work that will be approved in February 2027 as part of the budget setting process, please change the completion date for this task to Feb 2027. Further Information: Update Date: 19 Oct 2026 Description: Reopened: Action re-opened. Notes from a Follow Up audit on Capital Programme - Management confirmed that, whilst arrangements exist for the annual Capital Programme and budget-setting process, a formal process for managing in-year additions to the Capital Programme has not yet been implemented. The review also confirmed that there is currently no documented process or central register for recording and monitoring in-year additions.Management advised that they are currently reviewing and strengthening the governance arrangements for both the budget-setting process and Capital Programme management. This work includes the development of revised processes for the approval, recording and monitoring of in-year Capital Programme additions as part of the 2027/28 budget process Further Information: Update Date: 19 Oct 2026 Description: Update Further Information: Not started, no update Update Date: 03 Sep 2025

3734	Medium	We will review and formalise the capital programme governance framework by: • Updating The Financial Procedures (included within the Constitution) and Budget Process: A Guide for Budget Managers to reflect current practices, including the role of the Informal Cabinet in capital bid review. • Ensuring both documents are subject to formal approval and made readily accessible (e.g. via the Council intranet). • Developing comprehensive procedures that clearly outline the end-to-end capital programme process, including capital bid approvals, in-year amendments and monitoring procedures, record keeping and roles and responsibilities	31 Dec 2025	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. This will ensure that all new capital bids are submitted via a capital bid form and approved via an appropriate forum. The approving forum will be dependent on the size of the bid and the funding source. Further Information: Update Date: 03 Jun 2026 Description: As per the comments, action has been moved to 28/02/2027 as per Head of Finance request Further Information: Update Date: 09 Mar 2026 Description: This action is part of the wider plan to implement a new bid and approval process for the capital programme which the HoF will work on during 26/27 and have fully implemented in time for the 27/28 budget bid process. Further Information: Update Date: 09 Mar 2026 Description: Sandra Beard will be updating the document as the new head of service Further Information: Update Date: 30 Dec 2025
3735	Low	Updated action from a Follow Up - Capital Programme review: Management will ensure that approval sections within pre-project outline business cases are fully completed, including recording the approver and approval date and clearly marking any stages not required as not applicable Original Action: Management will establish a centralised repository for pre-project outline business cases and their respective approvals	01 Dec 2025	30 Nov 2026	Description: Reopened: Action reopened following follow-up review. Progress has been made however, the agreed action has only been partially implemented and further work is required before it can be assessed as fully implemented. Further Information: Update Date: 19 Oct 2026 Description: The PMO have now completed the collation of business cases or PIDs for all current major projects including capital funded projects. The documents are stored in a central repository. This audit action is now complete (attached list of cases as evidence.) There is now a clear process in place for ensuring a business cases or PID is completed for all new capital funded projects. The current budget approval for 2026/27 is due to be finalised in Feb 2026, and the PMO already have the draft list of new projects subject to approval, and have been working with services regarding these. Further Information: Update Date: 09 Dec 2025 Description: The PMO service is redesigning its processes, documentation and procedures to align to other internal audit and maturity review actions. This includes the completion of business cases for capital projects plus all major projects and programmes. This work has commenced, but the overall additional work activity may push back the completion date from 1 Dec 25 to 1 Mar 26. Further Information: Update Date: 14 Nov 2025 Description: This aligns to the Transformation PMO audit action with the delivery of all projects requiring a business case to be completed that strategically aligns to Transformation vision and goals. The majority of capital bids projects will be included as part of this audit action. There are a few remaining that are BAU projects, generally in relation to annual funding provision processes, and these will be covered separately. Further Information: Update Date: 10 Sep 2025 Description: Test update Further Information: test test Update Date: 31 Jul 2025

Creditor Payments

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
4171	Medium	Management will: •Develop and maintain a formally documented scheme of delegation and financial approval register, setting out the authorised approval limits for each role. •Ensure the document is approved by senior management, reviewed periodically, and updated where changes occur, with all amendments documented and approved. •Share the approved register with Heads of Service so they can confirm staff limits are appropriate for their teams.	31 Dec 2025	31 Aug 2026	Description: On hold until T1 upgrade completed on the 27th November 2026 Further Information: Update Date: 27 Oct 2026 Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: Hello, We are currently in the process of developing the process for this via Power Automate and Sharepoint which will create a register for all users in technology one including their delegation limits. The process will work via an automated report delivered to the outlook inbox of the requesting user from Technology One. The user will then run the first power automate flow which reformats the data for the next step in the flow. The next flow will then compare the latest details run against the 'User Audit History' and highlight any records which shows a change in the delegation/profile which will also leave a flag on the record the account needs to be reviewed. The final flow that needs to be run will then segregate each of the records via department in seperate spreadsheets uploaded onto Sharepoint. The requested user would then need to allocate each of the spreadsheets to the corresponding HOS's to be reviewed. When they update the spreadsheet it would then feed into a master spreadsheet which allows us to monitor whether these changes have been reviewed as well as action any changes required where the limit is incorrect. I've attached a sample of the first report draft (It will contain data which does not need to be on the spreadsheet so the final outcome will look different). I have also included a sample of two spreadsheets that are created from the UserAuditMaster Report. As stated earlier, a vast amount of the data currently in the tables will be excluded from the final report and we are still at the stage of testing the concept. I'd anticipate a more finalised version in at least 4 - 6 weeks time. Thanks, Tashan Further Information: Update Date: 03 Sep 2026 Description: As per below comments and request from Head of Finance, the action target date has been moved to end of August Further Information: Update Date: 03 Jun 2026 Description: There has been significant difficulty in filling the internal Systems Accountant role and therefore no capacity to complete this. We have a new starter on 01/07/26 and this task will be part of their role. Further Information: Update Date: 03 Jun 2026

4173	Medium	The Head of Finance will introduce regular monitoring reports in TechOne comparing invoice date to PO approval date and review the results. Exceptions will be escalated to the Corporate Director (Finance and Resources), who will present them to CLT for review. CLT will be responsible for challenging services and reinforcing compliance with the No PO No Pay policy. In the meantime, communications will be issued to services advising staff that retrospective ordering is not permitted under the No PO No Pay policy and that this will be monitored and reported to CLT.	31 Mar 2026	31 Aug 2026	Description: Please see the latest attachment. We will run this report every 6 months. The second tab contains a pivot table of the users and the amount of instances where PO's are being authorised post the invoice date. These users will be offered training. We will then re-run the report in 6 months time and will monitor the results to check if there is a reduction from repeat offenders. Further Information: Update Date: 20 Oct 2026 Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: Hello, I've attached a report we are able to generate from T1 with the inclusion of a few lookups. This report shows the invoices loaded into T1 against the PO numbers they have been attached to including the date they were approved. Column H contains a formula which checks if the approval date for the PO is after the invoice date and if this is true it returns 'YES'. The report can then be filtered on all transactions that return 'YES' and can be separated out if required by department and sent to the respective HOS/Director. This list would contain some invoices where it may not be feasible to raise a PO beforehand (I.e. Energy Bills) so we can restrict this further. Let me know your thoughts. Kind regards, Tashan Edwards Further Information: Update Date: 02 Sep 2026 Description: As per below comments and request from Head of Finance, the action target date has been moved to end of August Further Information: Update Date: 03 Jun 2026 Description: There has been significant difficulty in filling the internal Systems Accountant role and therefore no capacity to complete this. We have a new starter on 01/07/26 and this task will be part of their role. Further Information: Update Date: 03 Jun 2026

General Ledger

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
4630	Medium	Management will undertake a formal review and update of its Financial Procedure Rules within the Constitution to ensure they remain current, fit for purpose, and aligned with relevant legislation and best practice. The council will implement a formal review cycle for its Financial Procedure Rules, ensuring they are reviewed at least every two years, or sooner if there are significant changes in legislation, financial systems, or governance arrangements.	30 Jun 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. This will ensure that all new capital bids are submitted via a capital bid form and approved via an appropriate forum. The approving forum will be dependent on the size of the bid and the funding source. Further Information: Update Date: 03 Jun 2026 Description: As per below comments and request from HoF, the due date has been moved to Feb 2027 Further Information: Update Date: 09 Mar 2026 Description: the new HoS will be implementing a new approval and governance process for both capital and revenue during 26/27, to be fully implemented in time for the 27/28 budget setting process. Deadline to be extended to 27/02/27 to match the deadline for the same capital action. Further Information: Update Date: 09 Mar 2026 Description: To be undertaken in the New Year so as to ensure completion by the due date. Further Information: Update Date: 22 Dec 2025

4632	Medium	Management will develop and implement a formal journal processing policy that: • Defines segregation of duties and journal approval requirements. • Specifies permitted exceptions and their rationale. • Requires supporting documentation to be attached to all journals to ensure a complete and accessible audit trail is maintained. • Is approved by the Head of Finance and communicated to relevant staff.	31 Mar 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. Further Information: Update Date: 03 Jun 2026 Description: As per below comments and request from HoF, the action due date has been moved to end of Feb Further Information: Update Date: 09 Mar 2026 Description: The new HoS will be implementing a new governance and approval process during 26/27 which will be in place in time for the 27/28 budget setting process. Deadline to be extended to 27/02/27 to match the other actions for this issue. Further Information: Update Date: 09 Mar 2026 Description: I have inherited this from my predecessor. I will speak to the relevant staff members to understand the ask and ensure that it is implemented by the due date. Further Information: Update Date: 22 Dec 2025
4633	Medium	We will introduce review and sample checking of high value journals.	31 Mar 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. Further Information: Update Date: 03 Jun 2026 Description: As per below request from Head of Finance, action has been moved to end of Feb 2027 Further Information: Update Date: 09 Mar 2026 Description: This will form part of the new governance and approval process that will be implemented by the HoS during 26/27 and which will be in place in time for the 27/285 budget setting process. Deadline to be extended to 27/02/27 to match the other actions within the overall requirement. Further Information: Update Date: 09 Mar 2026 Description: I have implemented this from my predecessor. I will speak to the relevant staff members to understand the ask and ensure that it is implemented by the due date. Further Information: Update Date: 22 Dec 2025
4634	Medium	Management will review the current process and consider splitting the responsibilities for daily cash postings and bank reconciliations between different personnel to strengthen segregation of duties.	31 Mar 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: As per below request from Head of Finance, action has been moved to end of Feb 2027 Further Information: Update Date: 09 Mar 2026 Description: This will be a part of the wider governance and approval process that will be introduced by the HoS during 26/27 and in place in time for the 27/28 budget setting process. Deadline to be extended to 27/02/27 to match the other items within the wider requirement. Further Information: Update Date: 09 Mar 2026 Description: I have inherited this from my predecessor. I will speak to the relevant staff members to understand the ask and ensure that it is implemented by the due date. Further Information: Update Date: 22 Dec 2025

4631	Low	Management will implement a formal document control process to ensure all procedures are updated to include version history, review dates, responsible individuals, and defined review frequency. Management will ensure procedures are subject to regular review.	31 Jan 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: A new governance process will be approved, as part of the 2027/28 budget setting process. Further Information: Update Date: 03 Jun 2026 Description: As per below comments and request from HoF, action due date has bene moved to end of Feb 2027 Further Information: Update Date: 09 Mar 2026 Description: the new HoS will be implementing a new governance and approval process during 26/27 to be in place in time for the 27/28 budget setting process. Deadline to be extended to 27/02/27 to match the other actions on this. Further Information: Update Date: 09 Mar 2026 Description: Head of Finance has requested completion date be moved forward to 31 March 26 Further Information: Update Date: 03 Mar 2026
4636	Low	Management will: - Implement a formal review process for payroll reconciliations. - Include payroll reconciliation as a mandatory item in the Finance month-end checklist. - Record the date of completion and review on all reconciliations to evidence timeliness.	31 Jan 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: As per below comments and request from Head of Finance, action due date has been changed to to end of Feb 2027. The action has also been re-assigned to Head of Finance. Further Information: Update Date: 09 Mar 2026 Description: This will be incorporated into the wider review of the approval and governance process that will be implemented by the HoS during 26/27 and in place in time for the 27/28 budget setting process. Deadline to be extended to 27/02/27, to match the date of the other actions within the wider requirement. Further Information: Update Date: 09 Mar 2026 Description: 1. The team is currently testing the methodology, we are on track for timely implementation.2. Will be included from following month-end. On track.3. This is done automatically by T1 (our financial system). Further Information: Update Date: 15 Jan 2026
4641	Low	Management will implement a formalised approval process for the creation and amendment of GL codes. This process will include: - Defined roles and responsibilities for initiating, reviewing, and authorising changes. - Documented approval records retained for audit purposes. - Integration of the approval step into existing financial controls, such as the month-end checklist.	31 Mar 2026	28 Feb 2027	Description: Description: A new governance process will be approved, as part of the 2027/28 budget setting process. An additional resource has been brought in to undertake this work and it is currently underway: Update Date: 04 Sept 2026 Further Information: Update Date: 04 Sep 2026 Description: As per below comments and request from Head of Finance, the action due date has been moved to end of Feb 2027. Further Information: Update Date: 09 Mar 2026 Description: this will be included within the wider review of the governance and approval process which will be implemented during 26/27 by the HoS and in place in time for the 27/28 budget setting process. Deadline to be extended to 27/02/27 to match the other actions within the overall requirement. Further Information: Update Date: 09 Mar 2026 Description: I have inherited this from my predecessor. I will speak to the relevant staff members to understand the ask and ensure the it is implemented by the due date. Further Information: Update Date: 22 Dec 2025

ICT Budget Management and Efficiency Savings					
Reference	**Priority Level**	**Action Detail**	**Original Target**	**Revised Target**	**Update Details**
5409	High	Management will implement strengthened forecasting requirements to ensure compliance with the CDIO's documented direction. Budget Holders will be required to provide specific, evidence-based monthly re-forecasts, including clear rationale, underlying assumptions, and supporting detail. The ICT Finance and Contracts Manager will introduce a standardised narrative template and review mechanism to ensure that all forecasts adhere consistently to the defined expectations.	31 Jul 2026	31 Jul 2026	Description: A monthly forecasting process is now in operation. Budget Holders review budgets and, update forecast positions, and provide supporting commentary to the ICT Finance and Contracts Manager. Work is continuing to standardise forecasting narratives and strengthen the consistency of supporting information provided with forecast submissions. Further Information: Update Date: 19 Oct 2026 Description: Action is now an Objective for relevant Officers, and is being monitored Further Information: Update Date: 01 Jul 2026
5411	High	The CDIO will work with L&D colleagues to determine the best approach to undertaking a training needs analysis and to develop a comprehensive training programme for Budget Holders	31 Jul 2026	31 Jul 2026	Description: L&D are working with the Finance team to identify suitable internal training for Budget Holders and any areas where additional training may be required. All Budget Holders will also complete the HDC procurement training. The outcome of this work will inform the wider Budget Holder training programme. Further Information: Update Date: 29 Oct 2026 Description: Discussions are still ongoing with L&D to arrange a suitable training package for budget holders Further Information: Update Date: 19 Oct 2026 Description: Some initial discussion undertaken, no 'exact' fit courses available. Further Information: Update Date: 01 Jul 2026
5412	High	We will agree a clear methodology for identifying, approving and monitoring achievement of efficiency targets for a three year period. These proposals will be subject to review and approval by CLT, with periodic reporting on progress. To achieve this, a governance mechanism will be established, by the ICT Finance and Contracts Manager and Portfolio Delivery Manager, to quality assurance savings proposals to achieve these are realistic, achievable and can be measured.	30 Sep 2026	30 Sep 2026	Description: Development of the efficiency savings methodology is in progress. Work is underway to define the process for identifying, validating, approving and monitoring savings opportunities across a three year period. The ICT Finance and Contracts Manager and Portfolio Delivery Manager are establishing governance and quality assurance arrangements to ensure savings proposals are realistic, achievable and measurable prior to submission for CLT approval. Reporting and monitoring arrangements will be implemented as part of the final methodology. Further Information: Update Date: 19 Oct 2026
5413	High	The ICT Finance and Contracts Manager will develop a robust mechanism for recording and measuring efficiency savings within the TechOne financial ledger.	30 Sep 2026	30 Sep 2026	Description: Development of the mechanism is underway. The ICT Finance and Contracts Manager is defining the methodology for measuring efficiency savings, including how baselines will be established, how savings will be calculated and validated, and how recurring savings will be measured and reported. The output of this work will inform the design of a consistent and auditable approach to recording efficiency savings within TechOne. Further Information: Update Date: 19 Oct 2026
5414	High	A verification process will be established to validate that actual savings have been achieved by the Portfolio Delivery Manager. If specific savings are planned, these will be measured and checked in Finance. A process of reporting and tracking savings will be followed each month	30 Sep 2026	30 Sep 2026	Description: Work has commenced on the development of a formal verification process for efficiency savings. The Portfolio Delivery Manager and ICT Finance and Contracts Manager are defining the approach for validating savings against agreed baselines and supporting evidence, with Finance providing independent verification of reported savings values. Requirements for monthly tracking and reporting are also being developed to ensure savings can be monitored consistently and reported through established governance arrangements. Further Information: Update Date: 19 Oct 2026
5416	High	The ICT Leadership team, led by the CDIO, will develop, approve and communicate a formal overtime policy that clearly sets out managerial and staff responsibilities to ensure consistent application of good practice in record keeping, checking and approval.	30 Sep 2026	30 Sep 2026	Description: A draft ICT Overtime Policy has been developed and is currently under review by the ICT Leadership Team. The draft sets out the responsibilities of managers and employees in relation to the authorisation, recording, checking and approval of overtime, with the aim of ensuring a consistent and auditable approach across the service. Subject to completion of the review process and approval by the ICT Leadership Team, the policy will be communicated to all relevant staff and managers. Further Information: Update Date: 19 Oct 2026

5422	High	A mechanism will be developed, by the Portfolio Delivery Manager, to monitor utilisation of the 3C ICT establishment specifically for change delivery projects, with outputs available for improved oversight and reporting.	30 Jun 2026	30 Jun 2026	Description: Action is being progressed. Dedicated ICT leadership and portfolio management capacity has been established to strengthen oversight of change delivery resources. Procurement of Verto is underway and is expected to provide the primary mechanism for monitoring resource utilisation across change projects. Reporting requirements and associated governance arrangements are being developed as part of the implementation process. Further Information: Update Date: 19 Oct 2026 Description: Action is being progressed. A new ICT Leadership post and PMO Manager post created, this alongside the adoption of a new delivery tool (verto) will resolve this issue longer-term. Further Information: Update Date: 29 Jun 2026
5417	Medium	Specific guidance on the correct treatment of overtime relating to capital projects, including requirements for accurate project coding and appropriate allocation between revenue and capital activities will be produced by the Portfolio Delivery Manager. The guidance will be communicated to staff and reviewed in accordance with established review cycles.	30 Sep 2026	30 Sep 2026	Description: Draft guidance on the treatment of overtime associated with capital projects is being developed by the Portfolio Delivery Manager. The guidance will provide clarity on project coding requirements and the correct allocation of overtime costs between revenue and capital activities. Following review and approval, it will be communicated to staff and subject to periodic review in line with established governance arrangements. Further Information: Update Date: 19 Oct 2026
5418	Medium	The CDIO will review the current overtime recording arrangements and determine the most appropriate method to be used going forward, which will then be implemented by the ICT Portfolio Delivery Manager.	30 Sep 2026	30 Sep 2026	Description: As part of the development of the draft ICT Overtime Policy, ICT Leadership has reviewed the current overtime recording arrangements and is considering the most appropriate method to support consistent recording, approval and monitoring of overtime. The agreed approach will be implemented by the Senior ICT Manager for Change Delivery following approval of the policy and associated guidance. Further Information: Update Date: 19 Oct 2026
5424	Medium	The Portfolio Delivery Manager will revise the project proposal guidance to require assessment of overtime for all projects where work is likely to occur outside standard working hours.	30 Jun 2026	30 Jun 2026	Description: The requirement to assess anticipated overtime and out of hours working has been incorporated into the draft ICT Overtime Policy. The next step is to reflect this requirement within the project proposal/PMO guidance so that anticipated overtime, resource requirements, costs and funding are considered as part of project planning and approval. Responsibility has transferred from the former Portfolio Delivery Manager role to the PMO Manager and ICT Senior Manager Change Delivery & Finance. Further Information: Update Date: 29 Oct 2026
5425	Low	The Portfolio Delivery Manager will ensure that line managers evidence-check the purpose and business need of each overtime claim prior to approval, confirming whether the work relates to revenue activity or a capital project	30 Jun 2026	30 Jun 2026	Description: A formal ICT Overtime Policy has been drafted which introduces a clear requirement for line managers to evidence check the purpose and business need for overtime before approving the overtime. This includes confirming the requirement for each task to be undertaken outside normal working hours and whether the activity relates to BAU/revenue activity or an approved project, with the appropriate financial coding applied.The draft policy is also being checked against the existing HDC overtime policy and associated arrangements to ensure the ICT requirements complement, and do not conflict with, the corporate policy. Following this review, the policy will be taken through the appropriate ICT approval and communication process. Further Information: Update Date: 29 Oct 2026
5426	Low	The Portfolio Delivery Manager will ensure that overtime claims are reviewed in a timely manner to confirm whether the work relates to capital project activity.	30 Jun 2026	30 Jun 2026	Description: A formal ICT Overtime Policy has been drafted which introduces a clear process for the timely review of overtime claims. The policy requires line managers to check the purpose and business need of the work and confirm whether the activity relates to BAU/revenue activity or an approved project, with the appropriate financial coding applied.The draft policy is being checked against the existing HDC overtime policy to ensure the ICT requirements complement, and do not conflict with, existing corporate arrangements. Following this review, the policy will be taken through the appropriate ICT approval and communication process. Further Information: Update Date: 29 Oct 2026

Market Towns Programme					
Reference	**Priority Level**	**Action Detail**	**Original Target**	**Revised Target**	**Update Details**
5293	Low	Management will define and document variance thresholds and escalation routes for future programmes to ensure material variances from approved budgets are identified, reported, and escalated consistently.	30 Sep 2026	30 Nov 2026	Description: In progress. Any changes regarding programme governance are still pending internal approval. Further Information: Update Date: 13 Oct 2026 Description: As per below update from Business Performance and Transformation Manager, target date has been extended to end of November 2026 Further Information: Update Date: 21 Sep 2026 Description: In progress and target to be extended to Nov 26 from Sept 26. Governance arrangements are being reviewed following recent LGR communications. The previous Programme Board has been paused pending implementation of the revised governance structure, expected from October 2026. The target date has been extended to November 2026 to allow revised governance, reporting processes and Market Towns programme reporting arrangements to be implemented Further Information: Update Date: 11 Sep 2026 Description: In progress and on target for Sept 26 - The 6Ds project lifecycle has been implemented across the Council, with clear expectations regarding approvals and gating for new projects and change requests. The Project Governance for the Council has been approved, and due to commence with the Corporate Delivery Programme Board in July 2026; including Market Towns. The threshold for reporting material cost variance is still to be agreed and approved. Further Information: Update Date: 30 Jun 2026 Description: In progress and on target for Sept 26 - The project methodology has been agreed regarding process, decision and gating. The threshold for reporting material cost variance is still to be agreed and approved. Further Information: Update Date: 19 May 2026

Risk Management					
Reference	**Priority Level**	**Action Detail**	**Original Target**	**Revised Target**	**Update Details**
5284	Medium	Management will ensure that the updated Risk Management Strategy 2026–2028 is reviewed and approved through the appropriate governance forums at the earliest available meeting. The draft strategy will be circulated in advance, along with a summary of key changes, to support an informed decision-making process. Following approval by the relevant governance forum(s), the strategy will be progressed through the formal reporting route for adoption in line with established governance procedures.	31 Aug 2026	19 Jan 2027	Description: The Strategy (and policy) has been reviewed twice by CLT and shared with SLT for feedback, as well as the appropriate portfolio owner. There was a delay with agreement about the appropriate governance route for adoption, this has now been confirmed by the monitoring officer and the strategy is on the agenda for January's Cabinet. Further Information: Update Date: 28 Oct 2026 Description: Risk Management Strategy has been reviewed and updated by new Risk Manager. Has now been through CLT and received comments. Updates completed and now being progressed to next step - to be shared with Portfolio Owner first. Further Information: Update Date: 14 Aug 2026 Description: New Risk Manager in post and progressing with action. Further Information: Update Date: 29 May 2026
5286	Medium	Management will ensure that the revised risk management approach, which has already been applied to the Corporate risk register, is fully embedded across the organisation by completing updates to all remaining service-level risk registers. Management will also ensure that routine reviews incorporate quality-assurance checks to confirm ongoing alignment with the updated strategy.	31 Aug 2026	31 Mar 2027	Description: Risk Workshops are now being carried out following the successful delivery of risk management training. Senior leadership were requested to inform Risk team of their priority areas but there was little feedback. Now workshops have begun an uptake in positive engagement has been seen and is ensuring the risk lifecycle and wider risk approach is being consistently approached. To reach all service areas an extended target date is needed. Further Information: Update Date: 28 Oct 2026 Description: This action relies on the general Risk Management Training being delivered to ensure a consistent, understood approach across the organisation. Most service-level registers are now present on the system, but for the majority this revolves around Fraud risk. There is further input needed on what level of risk needs to be inputted, as some service registers are now too bloated and unmanageable. Workshops will be held with services/functions after the training sessions. Further Information: Update Date: 14 Aug 2026 Description: New Risk Manager in post and progressing with action. Further Information: Update Date: 29 May 2026
5288	Medium	The Council will establish a reporting route and mechanism for service level risk registers to be considered within the governance structure. This could include a schedule of review by SLT, with the forum considering service level risk registers to an agreed schedule or timetable.	31 Aug 2026	19 Jan 2027	Description: After the previous update the Risk Manager has not had continuous updates on this structure. Work is still continuing on the update of governance structures at the Council and it is vital risk is included as a priority for reporting on service-level risks. Will update action following further information from interim corporate governance lead. Further Information: Update Date: 28 Oct 2026 Description: Risk Manager is working with Interim Corporate Governance lead to look at the structure of reporting and escalation, and introducing a suitable governance board where service-risks can be reported. This is a priority action. Further Information: Update Date: 14 Aug 2026 Description: New Risk Manager in post and progressing with action. Further Information: Update Date: 29 May 2026
5289	Medium	We will continue to complete and actively monitor the gap analysis, updating and recording progress against all areas currently recorded as 'Needs Reviewing'.	31 Aug 2026	30 Nov 2026	Description: Focus has been on ensuring good practise is in place, training and workshops are delivered. A full review of the gap analysis to update to its current position is planned for November - ahead of the next audit of risk management. Further Information: Update Date: 28 Oct 2026 Description: Work to achieve this action continues to progress. The review of the Risk Management Strategy has aligned closer with the best practise guidance of HMT Orange Book. Alongside Risk Management Training, Workshops and other pieces of work we continue to address the gaps identified. Further Information: Update Date: 14 Aug 2026 Description: New Risk Manager in post and progressing with action. Further Information: Update Date: 29 May 2026

5285	Low	Management will finalise this training schedule, ensure the approach is formally documented, and embed it across all relevant service areas, including establishing consistent review periods and responsibilities for maintaining the schedule.	31 Aug 2026	30 Nov 2026	Description: Risk Management Training has been delivered to one hundred plus staff as of 28.10.28. A formal schedule to carry on regular monthly training and refresher sessions is being organised with Learning Development. Further Information: Update Date: 28 Oct 2026 Description: Risk Management Training is now being provided via group sessions to all risk owners and assignees, alongside any other SME's from teams that may be involved in the risk management process or workshops. This training is being recorded by Learning and Development. A final schedule will need to be finalised for follow-ups and other sessions such as specific Risk Software training; this will be done once the general introductory sessions are complete and feedback received. Further Information: Update Date: 14 Aug 2026 Description: New Risk Manager in post and progressing with action. Further Information: Update Date: 29 May 2026
5287	Low	Quarterly communications will be issued by the risk manager to prompt the review and update of service-level risk registers.	31 Aug 2026	19 Jan 2027	Description: Quarterly communications are being released, however at this point, some areas are not receiving the emails; with workshops and review meetings manually being arranged it would be unnecessary duplication. Risk and Insurance Administrator is now in post, and where risks are inputted into the system they will soon be ensuring quarterly communications are regular, as well as providing more regular checks of the register for outstanding reviews. Further Information: Update Date: 28 Oct 2026 Description: Continuing with action. Further Information: Update Date: 14 Aug 2026 Description: New Risk Manager in post and progressing with action. Further Information: Update Date: 29 May 2026

Code of Procurement Audit 24.25

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
3373	Medium	Updated action following a Follow Up Part Two audit - Management will ensure the process for review and approval of £100k payments, and the supporting due diligence checks are evidenced and documented. Original Action - Ensure alignment between the contracts, payments made, and purchase orders raised. Consider introduction of a no PO no pay policy by 1st April 2025. Procurement team and/or finance team appointed staff to conduct a quarterly review of a sample of significant payments including both payments through POs as well as without POs or contracts (over £100K values) to confirm that the POs comply with their respective contracts and had the appropriate level approvals and identify if there are any significant payments without POs and contracts which should be investigated. Any compliance issues should be highlighted and reported to SLT. (High- Red).	28 Apr 2025	30 Jun 2026	Description: Description: Reopened: Follow Up Audit Part Two concluded that the action is partially implemented. The No PO No Pay policy has been introduced and management advised that payments exceeding £100k are subject to review and approval by the Head of Finance. However, the due diligence checks undertaken as part of the approval process are not currently evidenced or documented. The action has therefore been reopened and revised to reflect the remaining work required. The Head of Finance is now ensuring that written evidence is obtained when payments above £100k are approved. Priority Level has been changed to Medium Further Information: Update Date: 04 Sept 2026Further Information: Update Date: 04 Sep 2026 Description: Reopened: Follow Up Audit Part Two concluded that the action is partially implemented. The No PO No Pay policy has been introduced and management advised that payments exceeding £100k are subject to review and approval by the Head of Finance. However, the due diligence checks undertaken as part of the approval process are not currently evidenced or documented. The action has therefore been reopened and revised to reflect the remaining work required. Priority Level has been changed to Medium Further Information: Update Date: 15 Jun 2026

Key Financial Controls 24.25

Reference	Priority Level	Action Detail	Original Target	Revised Target	Update Details
3381	High	The finance team should engage with Tech 1 to agree on a clear resolution plan, including a timeline for when and how the issue will be resolved. If Tech 1 fails to offer a satisfactory outcome within the agreed timeframe, senior management involvement may be necessary to escalate the matter and ensure a prompt resolution.	31 Mar 2025	31 May 2026	Description: the permanent replacement is undertaking training to become more confident on Tech1 and is currently working with Tech1 to identify a solution to this issue. Please extend the due date to the end of October. Further Information: Update Date: 04 Sep 2026 Description: A permanent placement has been made in the role of the Systems Accountant with a start date of 1st July 2026. The successful applicant is currently undertaking on Technology 1 and when more confident in the role will be in a position to pick up this task. Further Information: Update Date: 07 Jul 2026 Description: There has been significant difficulty in filling the internal Systems Accountant role and therefore no capacity to complete this. We have a new starter on 01/07/26 and this task will be part of their role. Further Information: Update Date: 03 Jun 2026 Description: As per below comments and request from Head of Finance, action due date is being moved to 31/05/2026 Further Information: Update Date: 09 Mar 2026 Description: New interim Systems and Transactional Accountant in place who will pick this item up going forward. They will need time to bed in and familiarise themselves with the issue and so I propose extending the deadline. Further Information: Update Date: 09 Mar 2026

By virtue of paragraph(s) 3 of Part 1 of Schedule 12A
of the Local Government Act 1972.

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Appendix 3 - Closed Internal Audit Actions

Generated Date	Nov-26

Business Continuity Planning

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
5727	Medium	Management will establish and document a process for maintaining BCPs between annual reviews. The process will define when updates must be made following organisational, staffing, supplier, system or structural changes, how changes will be recorded, and when the Emergency Planning Advisor must be notified. The process will also require services to consider whether changes affect Corporate Priority 1 activities or action cards and ensure any required updates are completed. A central record of interim BCP updates will be maintained to support monitoring and oversight.	30 Nov 2026	30 Nov 2026	15 Oct 2026	Closure Details: Closed: Info in Updates Further Information:
5729	Medium	Management will establish a clear process and timetable for the annual BCP review. This will define responsibility for monitoring completion, the frequency of follow-up, submission deadlines and the stages for escalating overdue plans. The completion tracker will be updated to record follow-up action, action owners, revised deadlines and escalation	30 Sep 2026	30 Sep 2026	23 Oct 2026	Closure Details: Closed: The BCP strategy is in place. it sets out the responsibilities for creating plans. It also documents who is accountable, when plans should be updated, what triggers a review and how non-compliance is escalted to the Steering Grp. An excel sheet is stored in the BCP SharePoint site to hold and track this data and the BCP steering group reviews it as per the ToR. Further Information:
5732	Medium	Management will review and issue guidance for service level BCP testing which will: • define what is an acceptable test and how this differs from the annual BCP review • provide examples of proportionate testing methods • specify when testing is required • set out how outcomes, lessons learned, actions and resulting BCP amendments should be recorded. Service leads should then be required to complete and document testing in line with the guidance, with completion monitored through the Business Continuity Steering Group.	30 Sep 2026	30 Sep 2026	08 Oct 2026	Closure Details: Closed: All requirements covered in updated strategy document and circulated to BCP Steering group Further Information:
5724	Low	Management will review and update the Business Continuity Steering Group Terms of Reference to ensure it reflects current governance arrangements and includes appropriate document control information, including document owner, review date and version control.	30 Sep 2026	30 Sep 2026	23 Oct 2026	Closure Details: Closed: The ToR have been reviewed at the BCP Steering Grp and have been signed off by the Corporate Director (Communities) in it Sept26 meeting Further Information:

Data Quality - Human Resources

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
5689	High	Management will undertake a comprehensive review of all job descriptions to ensure that they are up-to-date and aligned to the role structure and records held within iTrent in preparation for Local Government Reorganisation. For those employees for which there is no valid job description, these will be developed in a timely manner and communicated to staff.	31 Dec 2026	31 Dec 2026	28 Sep 2026	Closure Details: Closed: This has been completed and all staff have a job description on their personnel file Further Information:
5687	Low	Clear guidance will be implemented to define roles and responsibilities for maintaining employee data accuracy and completeness within the HR system, including responsibilities for employees, managers, and HR. All HR system guidance will include version control and defined review dates to ensure it remains current and accurate	31 Oct 2026	31 Oct 2026	26 Oct 2026	Closure Details: Closed: Key system guidance for changes and data accuracy now in place. These are checklists and guidance built into the system, with back up copies saved on payrolls shared drive. User guides are available on the intranet for employees and managers. Further Information:

Recruitment and Retention

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
5684	Medium	We will review and update the Recruitment Policy to reflect current practice in relation to references, ensuring that the minimum requirement is clearly defined.	30 Sep 2026	30 Sep 2026	06 Oct 2026	Closure Details: Closed: Employment committee endorsed on 23/09/2026 Further Information:
5685	Medium	We will ensure that, where references are not obtained, approval from hiring manager to proceed is formally documented and retained prior to the employee's start date, in line with other pre-employment checks.	31 Aug 2026	31 Aug 2026	06 Oct 2026	Closure Details: Closed: Employment committee endorsed on 23/09/2026 Further Information:
5683	Low	We will obtain formal approval for the Recruitment and Selection Policy from the appropriate individual or governance forum and update the policy to accurately reflect this.	31 Aug 2026	31 Aug 2026	06 Oct 2026	Closure Details: Closed: Employment committee endorsed on 23/09/2026 Further Information:
5686	Low	We will consider how exit questionnaire data can be periodically reviewed and summarised to identify any emerging themes, and whether this insight can be shared with senior management to support retention activities.	31 Dec 2026	31 Dec 2026	05 Nov 2026	Closure Details: Closed: As per below comments from HR Manager, the action has been closed. - A process has been agreed and exit data for Q1 and Q2 is being shared with CLT and employment committee in October 2026. This will continue now as BAU so this is action is now closed. Further Information:

Debt Management

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
5749	Medium	Management will review existing debtor credit balances to investigate and resolve outstanding credits, and implement a regular review process to identify, investigate and clear future credit balances promptly, ensuring the debtor ledger accurately reflects recoverable debt and supports accurate financial reporting	30 Nov 2026	30 Nov 2026	28 Oct 2026	Closure Details: Closed: Procedure notes reviewed, no change, version 2 attached Further Information:

Capacity Planning

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
4831	High	Consider the development of a proportionate, corporate approach for assessing capacity and resource availability across all service areas. This should support services to: • Set out their BAU activity, planned change work and expected future pressures • Understand the time and effort involved in BAU tasks, including typical volumes and peaks• Record the resources they have available, such as people, time and skills • Compare workload with available capacity so they can identify gaps, pressures or risks of overcommitting. • Provide clear capacity information to support decision making, rather than relying solely on professional judgement. Capacity assessments should be reported and monitored through an agreed route so that risks are visible and the Council can see where support or prioritisation is needed.	30 Sep 2026	30 Sep 2026	29 Sep 2026	Closure Details: Closed: Completed within target. A Business Analyst review has been undertaken and recommendations developed to support a proportionate approach to assessing capacity and resource availability. The recommended solution applies service prioritisation and resource calculations using agreed archetypes. Given the pending LGR decision, the approach will be introduced through a soft launch, with voluntary adoption by services and promotion through the 6Ds Project Lifecycle where appropriate. The audit action is therefore considered complete. Further Information:

Data Protection

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
5295	Low	An established public-sector data ethics framework will be adopted, with the Council subscribing to or implementing a recognised model of its choice to ensure consistent, transparent and ethically-aligned decision-making across all data and Artificial Intelligence initiatives.	30 Sep 2026	30 Sep 2026	15 Sep 2026	Closure Details: Closed: Ceased activity due to anticipated LGR implementation likely to supersede and enforce adherence to caldicott principles Further Information:

Code of Procurement Audit 24.25

Reference	Priority Level	Action Detail	Original Target	Revised Target	Closed	Closure Update
3371	Medium	The Code of Procurement reform changes need to be expedited on the back of this audit and the Procurement Act 2023 updates due to happen in early 2025 to ensure effective and efficient procurement thresholds. The Procurement Lead with the support of the Monitoring Officer to document, review and update (as applicable) a full suite of Procurement documentation to include the Code of Procurement, the Procurement Aide Memoire and supporting procedure notes. Internal Audit recommends that this documentation is reviewed (and is subject to appropriate approval) once every 3 years, or when regulations change (if they change before 3 years). The procurement documentation will be updated by the Procurement Lead/team after discussions with the Monitoring officer and will be reviewed and approved by Director of Finance and Corporate Services. (Amber-Medium).	28 Apr 2025	31 Oct 2026	19 Oct 2026	Closure Details: Closed: Following the approval of the Contract Procedure Rules and amendments to supporting documents this action is now complete. Further Information:

Committee Governance Structure 24.25						
Reference	**Priority Level**	**Action Detail**	**Original Target**	**Revised Target**	**Closed**	**Closure Update**
3716	Medium	The Constitution Review Working Group will evaluate the current scheme of delegation to identify gaps, ambiguities and areas where further detail is needed. This should include an assessment of roles, responsibilities, and authority at each level of the Council. Key stakeholders may need to be engaged throughout the process. Specific delegated authorities should be clearly defined within a clear, structured document. The authority, responsibilities and limits of decision making for each individual, committee or department should be clearly outlined. The delegation should include levels of financial authority, operational decisions and strategic responsibilities as appropriate.	31 Mar 2026	31 Jul 2026	26 Oct 2026	Closure Details: Closed: Revised Scheme of Delegation approved by full Council on 14/10/26 Further Information:

CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT AND FUTURE WORK

Committee	Decisions	Date for Action	Action Taken	Officer Responsible	Delete from future list
N/A	**Constitution Review Working Group** Constitution Review Working Group appointed at Annual Council on 21 May 2026.	N/A	The Working Group met on 5th November 2026 to discuss the Amendments to the Constitution report, prior to its submission to the Committee. The report appears elsewhere on the agenda and includes the feedback from the Working Group. A further meeting of the Working Group is scheduled for 17th December.	Elections & Democratic Services Manager	No

CORPORATE GOVERNANCE COMMITTEE PROGRESS REPORT AND FUTURE WORK

Forward Agendas

TBC - December 2026 (additional)	• Annual Governance Statement and Annual Financial Report
20 January 2027	• Corporate Risk Register (Standing item) • LGR Risk Register (Standing item) • Internal Audit Progress Report (Standing item) • Internal Audit Actions Update (Standing item) • Update on Code of Conduct and Register of Disclosable Pecuniary Interests • Risk Management Strategy/Policy • External Audit 2025/26 • Internal Audit Strategy 2027/28
17 March 2027	• Corporate Risk Register (Standing item) • LGR Risk Register (Standing item) • Internal Audit Progress Report (Standing item) • Internal Audit Actions Update (Standing item) • Draft Internal Audit Plan for 2027/28 and Internal Audit Charter