
Enquiries to Democratic Services
Direct Dial: 024 7637 6000
Direct Email: committee@nuneatonandbedworth.gov.uk
Date: 1st September 2025
Our Ref: MM

Dear Sir/Madam,

A meeting of the **AUDIT & STANDARDS COMMITTEE** will be held in the Council Chamber, Town Hall, Nuneaton, on **Tuesday, 9th September 2025** at **6.00pm**

Yours faithfully,

TOM SHARDLOW

Chief Executive

To: All Members of the
Audit & Standards
Committee

Councillors J. Bonner (Chair), D. Brown
(Vice-Chair), A. Bull, T. Cooper,
L. Cvetkovic, B. Hancox, J. Hartshorn,
T. Jenkins, W. Markham, C. Smith
and M. Wright.

A G E N D A

PART I - PUBLIC BUSINESS

1. **ANNOUNCEMENTS**

To advise the meeting participants of the procedure that will be followed by the Members of the committee.

A fire drill is not expected, so if the alarm sounds please evacuate the building quickly and calmly. Please use the stairs and do not use the lifts. Once out of the building, please gather outside Lloyds Bank on the opposite side of the road.

Exit by the door by which you entered the room or by the fire exits which are clearly indicated by the standard green fire exit signs.

If you need any assistance in evacuating the building, please make yourself known to a member of staff.

Please also make sure all your mobile phones are turned off or set to silent.

2. **APOLOGIES** - To receive apologies for absence from the meeting.

3. **MINUTES** – To confirm the minutes of the meeting of the Audit and Standards Committee held on 24th June 2025, attached **(Page 5)**.

4. **DECLARATIONS OF INTEREST**

To receive declarations of Disclosable Pecuniary and Other Interests, in accordance with the Members' Code of Conduct.

Declaring interests at meetings

If there is any item of business to be discussed at the meeting in which you have a disclosable pecuniary interest or non-pecuniary interest (Other Interests), you must declare the interest appropriately at the start of the meeting or as soon as you become aware that you have an interest.

Arrangements have been made so that interests that are declared regularly by members can be viewed in a schedule on the Council website ([Councillor Schedule of Declarations of Interests for Meetings](#)). Any interest noted in the schedule on the website will be deemed to have been declared and will be minuted as such by the Democratic Services Officer. As a general rule, there will, therefore, be no need for those Members to declare those interests as set out in the schedule.

There are, however, TWO EXCEPTIONS to the general rule:

1. When the interest amounts to a Disclosable Pecuniary Interest that is engaged in connection with any item on the agenda and the member feels that the interest is such that they must leave the room. Prior to leaving the room, the member must inform the meeting that they are doing so, to ensure that it is recorded in the minutes.
2. Where a dispensation has been granted to vote and/or speak on an item where there is a Disclosable Pecuniary Interest, but it is not referred to in the Schedule (where for example, the dispensation was granted by the Monitoring

Officer immediately prior to the meeting). The existence and nature of the dispensation needs to be recorded in the minutes and will, therefore, have to be disclosed at an appropriate time to the meeting.

Note: Following the adoption of the new Code of Conduct, Members are reminded that they should declare the existence and nature of their personal interests at the commencement of the relevant item (or as soon as the interest becomes apparent). If that interest is a Disclosable Pecuniary or a Deemed Disclosable Pecuniary Interest, the Member must withdraw from the room.

Where a Member has a Disclosable Pecuniary Interest but has received a dispensation from Audit & Standards Committee, that Member may vote and/or speak on the matter (as the case may be) and must disclose the existence of the dispensation and any restrictions placed on it at the time the interest is declared.

Where a Member has a Deemed Disclosable Interest as defined in the Code of Conduct, the Member may address the meeting as a member of the public as set out in the Code.

Note: Council Procedure Rules require Members with Disclosable Pecuniary Interests to withdraw from the meeting unless a dispensation allows them to remain to vote and/or speak on the business giving rise to the interest.

Where a Member has a Deemed Disclosable Interest, the Council's Code of Conduct permits public speaking on the item, after which the Member is required by Council Procedure Rules to withdraw from the meeting.

5. PUBLIC CONSULTATION - Members of the Public will be given the opportunity to speak on specific agenda items, if notice has been received.

Members of the public will be given three minutes to speak on a particular item and this is strictly timed. The chair will inform all public speakers that: their comments must be limited to addressing issues raised in the agenda item under consideration: and that any departure from the item will not be tolerated.

The chair may interrupt the speaker if they start discussing other matters which are not related to the item, or the speaker uses threatening or inappropriate language towards Councillors or officers and if after a warning issued by the chair, the speaker persists, they will be asked to stop speaking by the chair.

The chair will advise the speaker that, having ignored the warning, the speaker's opportunity to speak to the current or other items on the agenda may not be allowed. In this eventuality, the chair has discretion to exclude the speaker from speaking further on the item under consideration or other items of the agenda.

6. INTERNAL AUDIT CHARTER AND MANDATE – a report of the Audit Manager attached **(Page 8)**.
7. INTERNAL AUDIT PROGRESS REPORT – a report of the Audit Manager attached **(Page 20)**
8. INTERNAL AUDIT ANNUAL OPINION REPORT 2024 – 2025 – a report of the Audit Manager attached **(Page 51)**

9. TREASURY MANAGEMENT UPDATE 2025-2026 - a report of the Finance Manager – Treasury, attached **(Page 75)**
10. LGSCO - ANNUAL REVIEW OF LOCAL GOVERNMENT COMPLAINTS FOR 2024-25 - a report of the Customer Experience and Data Protection Officer attached **(Page 82)**.
11. ANNUAL GOVERNANCE STATEMENT 2024-2025 - FINAL - a report of the Assistant Director – Democracy & Governance, attached **(Page 92)**.
12. RIPA 2000 AND THE INVESTIGATORY POWERS ACT 2016 - a report of the Assistant Director – Democracy & Governance and Monitoring Officer, attached **(Page 127)**.
13. OVERVIEW OF MEMBER COMPLAINTS - a report of the Monitoring Officer, attached **(Page 134)**
14. ANY OTHER ITEMS - which in the opinion of the Chair should be discussed as a matter of urgency because of special circumstances (which must be specified).

NUNEATON AND BEDWORTH BOROUGH COUNCIL

AUDIT & STANDARDS COMMITTEE

24th June 2025

A meeting of the Audit & Standards Committee was held on Tuesday, 24th June 2025 in the Council Chamber, Town Hall, Nuneaton.

Present

Councillor J. Bonner – Chair

Councillors: D. Brown (Vice-Chair), T. Cooper, L. Cvetkovic, B. Hancox, J. Hartshorn, T. Jenkins, C. Smith, M. Wright, M. Walsh (substitute for W. Markham) and C. Phillips (substitute for A. Bull)

Apologies: Councillors W. Markham and A. Bull.

PART I – PUBLIC BUSINESS

A minutes silence was held in memory of Linda Downes prior to the meeting.

ASC1 **Minutes**

RESOLVED that the minutes of the Audit and Standards Committee meeting held on 1st April 2025 be approved and signed by the Chair.

ASC2 **Declarations of Interest**

RESOLVED that the declarations of interests are as set out in the Schedule which can be viewed on the Council website ([Councillor Declarations of Interests](#)).

ASC3 **Audit and Standards Committee Core Work Programme 2025/26**

A Report of The Assistant Director – Democracy and Governance gave the Committee the opportunity to consider and approve the Audit and Standards Committee Core Work Programme for 2025/26 after taking into consideration the purpose and functions of the Committee.

RESOLVED that the Audit and Standards Committee Core Work Programme for 2025-26 be approved.

ASC4 **External Audit Plan 2025/25**

A Report of the Strategic Director – Corporate Resources and External Auditors to give the Committee an opportunity to consider the audit plan for the Statement of Accounts for 2024/25.

RESOLVED that the detail contained within the audit plan be noted.

ASC5 **Annual Governance Statement 2024/2025**

The Assistant Director – Democracy and Governance presented the findings of an assessment of Nuneaton and Bedworth Borough Council's corporate governance framework as presented in the Annual Governance Statement (AGS).

RESOLVED that

- a) consideration be given to the findings of corporate governance and internal control as set out in the draft Annual Governance Statement (AGS);
- b) the draft AGS be endorsed (subject to the amendments in c) and d) of this resolution), noting the AGS will need to be re-submitted in September 2025 for full approval as a result of the delayed Internal Audit opinion and in the event the Committee require any amendments;
- c) for more graphics to be included where possible, to make some sections within the document easier to understand visually. This includes a flowchart at section 3.4 and a table at section 5 of the document under Statement of Accounts for date purposes; and
- d) a clear link be added in the introduction with an overview of the Statutory Services the Council provides, aligning with the Narrative Report provided due to be in the Statement of Accounts.

ASC6 **Recommendation from the Constitution Review Working Party – Member Code of Conduct Complaint Process**

A Report of The Assistant Director – Democracy and Governance and Monitoring Officer allowed Members to consider and approve the recommendations from the Constitution Review Working Party and recommend changes to the Constitution.

RESOLVED that

- a) the changes to the Member Code of Conduct Complaint Process be approved; and
- b) **IT BE RECOMMENDED TO COUNCIL** that the Constitution be amended accordingly.

ASC7 **Recommendation from the Constitution Review Working Party – Council Meeting Agenda Order**

A Report of The Assistant Director – Democracy and Governance and Monitoring Officer allowed Members to consider and approve the recommendations from the Constitution Review Working Party and recommend changes to the Constitution.

A five minute adjournment of the meeting took place during the discussion.

RESOLVED that

- a) **IT BE RECOMMENDED TO COUNCIL** that agenda item ‘Questions By Members’ be moved to the end of the agenda at Full Council and, if required due to time restrictions, Standing Orders be automatically suspended as necessary, in connection with the three-hour meeting rule, to maintain up to 45 minutes of ‘Questions By Members’; and
- b) **IT BE RECOMMENDED TO COUNCIL** that the constitution be amended accordingly.

ASC8 **Treasury Management 2024/25 – Year End Review**

The Finance Manager – Treasury reported that the Council is required through the CIPFA Code of Practice on Treasury Management (the Code) and the CIPFA Prudential Code for Capital Finance in Local Authorities (the Prudential Code) to report to Full Council an annual review.

This report to the Committee set out the Council's treasury position as at 31st March 2025 and therefore any decisions made after this date are not reflected in this report.

RESOLVED that

- a) The annual report be noted; and
- b) **IT BE RECOMMENDED TO COUNCIL** that the annual report be approved.

Chair _____

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: Audit and Standards Committee – 9th September 2025

From: Audit Manager

Subject: Internal Audit Charter & Mandate

1. Purpose of the Report

- 1.1 This report seeks approval of the Internal Audit Charter and Mandate. Having an internal audit charter and mandate establishes the internal audit activity's position within the organisation and demonstrates commitment to adhering to the Global Internal Audit Standards (GIAS).

2. Recommendations

- 2.1 To review and approve the CMAP Internal Audit Charter (Incl Internal Audit Mandate).

3. What the Committee is being asked to consider?

- 3.1 The Audit & Standards Committee is responsible for providing assurance to the Council on the effectiveness of its governance arrangements, its risk management framework and the internal control environment. The work of Internal Audit supports Committee in providing this assurance.
- 3.2 The GIAS requires approval of the Internal Audit Charter by the Board. The GIAS define the board as the highest-level body charged with governance. For Nuneaton & Bedworth Borough Council, this is the Audit & Standards Committee.

4. Internal Audit Charter & Mandate

- 4.1 The attached Internal Audit Charter and Mandate was discussed with the CMAP Operational Group on 4th June 2025.
- 4.2 The Internal Audit Charter is a formal document that defines internal audit's purpose, authority, responsibility and position within the organisation. The Charter should set out the nature of services that internal audit will provide and how internal audit will help the organisation to achieve its objectives.
- 4.3 The Internal Audit Charter is vital to internal audit's success and should be reviewed periodically by Head of Audit Partnership and the Audit Manager and presented to the Audit and Governance Committee for approval. CMAP reviews its Charter on an annual basis and takes it to each partner organisation's audit committee for approval. The CMAP Internal Audit

Charter for Nuneaton & Bedworth Borough Council is attached to this report.

- 4.4 Standard 6.2 of the GIAS requires the chief audit executive (Audit Manager) to develop and maintain an internal audit charter that specifies, at a minimum, the internal audit function's:
- Purpose of Internal Auditing.
 - Commitment to adhering to the Global Internal Audit Standards.
 - Mandate, including scope and types of services to be provided, and the board's responsibilities and expectations regarding management's support of the internal audit function.
 - Organisational position and reporting relationships.
- 4.5 The Mandate for the provision of internal audit services is found in two pieces of legislation: Section 151 of the Local Government Act 1972 and the Accounts and Audit Regulations 2015.
- 4.6 The chief audit executive must discuss the proposed charter with the board and senior management to confirm that it accurately reflects their understanding and expectations of the internal audit function. That discussion should also ensure all topics have been included within the internal audit charter to enable an effective internal audit function.
- 4.7 Standard 6.3 of the GIAS requires the chief audit executive to provide the board and senior management with the information needed to support and promote recognition of the internal audit function throughout the organisation. The chief audit executive must coordinate the internal audit function's board communications with senior management to support the board's ability to fulfil its requirements.

ADRIAN MANIFOLD
AUDIT MANAGER

Nuneaton & Bedworth Borough Council – CMAP Internal Audit Charter

Audit & Standards Committee: 9th September 2025



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Our Vision

To bring about improvements in the control, governance and risk management arrangements of our Partners by providing cost effective, high quality internal audit services.

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Introduction

Purpose of Report

This report is presented to the Audit & Standards Committee to inform Members of the requirement to update the Council's Internal Audit Charter in response to the recently issued Global Internal Audit Standards, published by the Institute of Internal Auditors (IIA).

The purpose of this report is to outline the key change necessitating revision (specifically, the introduction of a formal Mandate) and to seek the Committee's endorsement of the updated Internal Audit Charter to ensure continued alignment with professional standards and good practice.

Recommendation

That the Audit & Standards Committee notes the changes introduced by the Global Internal Audit Standards and approves the revised Internal Audit Charter, including the inclusion of a clearly defined Mandate, as required by the new Standards.

Background

The Global Internal Audit Standards, which took effect from 1st April 2025, represent a significant evolution in the professional framework for internal auditing. They supersede the International Professional Practices Framework (IPPF) and the UK's Public Sector Internal Audit Standards and are now the authoritative global benchmark for the internal audit profession. One of the core structural changes is the explicit requirement for internal audit functions to operate under a formal Mandate, which defines the authority, purpose, and responsibility of internal audit within the organisation.

To maintain compliance with these standards, and to demonstrate the Council's ongoing commitment to effective governance and robust internal control, it is necessary to update the Internal Audit Charter accordingly. The revised Charter has been drafted to incorporate this requirement and is appended to this report for the Committee's review and approval.

This revised Charter has already been submitted to the Partnership's Operational Group for review and approval on 4th June 2025.

Internal Audit Charter

Purpose & Mission

The purpose of Nuneaton & Bedworth Borough Council's internal audit service is to provide independent, objective assurance and consulting services designed to add value and improve the Council's operations. The mission of internal audit is to enhance and protect organisational value by providing risk-based and objective assurance, advice, and insight. The internal audit service helps the Council accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of governance, risk management, and control processes.

Role of Internal Audit

The role of the Internal Audit Service includes:

- Supporting the delivery of the Council's strategic objectives by providing risk-based and objective assurance on the adequacy and effectiveness of governance, risk management and internal controls.
- Championing good practice in governance through assurance, advice and contributing to the Council's annual governance review.
- Advising on governance, risk management and internal control arrangements for major projects, programmes and system changes.
- Governance oversight of the Council's collaborative and arm's-length arrangements.

Nuneaton & Bedworth Borough Council's Internal Audit Service is provided by the Central Midlands Audit Partnership (CMAP). Derby City Council acts as the host authority for CMAP.

CMAP's Internal Audit Service is most effective when:

- a) Internal auditing is performed by competent professionals in conformance with Internal Audit Standards, which are set in the public interest.
- b) The Internal Audit Service is independently positioned with direct accountability to the Council's Leadership Team and its Audit & Standards Committee.
- c) Internal auditors are free from undue influence and committed to making objective assessments.

Commitment to Adhering to the Global Internal Audit Standards in the UK Public Sector

CMAP will adhere to the mandatory elements of The Institute of Internal Auditors' International Professional Practices Framework, which are the Global Internal Audit Standards. This will take into account:

CMAP Internal Audit Charter

- a) the CIPFA Application Note, which provides a framework for the practice of internal audit in the UK public sector when taken together with the Global Internal Audit Standards;
- and
- b) the CIPFA Code of Practice for the Governance of Internal Audit in UK Local Government, which complements the Global Internal Audit Standards from the perspective of the "Head of Internal Audit". Overall, this means that the Internal Audit Service will adhere to the "Global Internal Audit Standards in the UK Public Sector".

The Chief Audit Executive will report periodically to Leadership Team and the Audit & Standards Committee regarding CMAP's conformance with the Standards, Application Note, and CIPFA Code, which will be assessed through a quality assurance and improvement programme.

Authority – Internal Audit Mandate

The mandate for CMAP's provision of the internal audit service is found in two pieces of legislation:

Section 151 of the Local Government Act 1972

requires that authorities 'make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs'.

The Financial Regulations (Constitution part 4 – Financial Regulations) state that the Chief Financial (s151) Officer has this responsibility ('establishing an adequate and effective system of internal audit').

The Accounts and Audit Regulations 2015

Part 2: Internal Control, Section 5: Internal Audit requires that a relevant authority must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance.

Any officer or member of a relevant body must, if required to do so for the purposes of internal audit –

- a) make available such documents and records; and
- b) supply such information and explanation.

as are considered necessary by those conducting the internal audit.

In this regulation "documents and records" includes information recorded in an electronic form.

The Internal Audit Service's authority is created by its direct reporting relationship to the Leadership Team and the Audit & Standards Committee. Such authority allows for unrestricted access.

CMAP Internal Audit Charter

The Leadership Team and Audit & Standards Committee authorises the Internal Audit Service to:

- a) Have full and unrestricted access to all functions, data, records, information, physical property, and personnel that it considers necessary to fulfil its responsibilities. Internal auditors are accountable for confidentiality and safeguarding records and information.
- b) Allocate resources, set frequencies, select subjects, determine scopes of work, apply techniques, and issue communications to accomplish the function's objectives.
- c) Obtain assistance from specialised services from within or outside Nuneaton & Bedworth Borough Council to complete internal audit services.

Internal Audit will be appropriately staffed in terms of numbers, qualification levels and experience. The Chief Audit Executive will report on the adequacy of resources to the Council's s151 Officer and to the Audit & Standards Committee.

Independence, Organisational Position, and Reporting Relationships

The Chief Audit Executive will ensure that the internal audit service remains free from all conditions that threaten the ability of internal auditors to carry out their responsibilities in an unbiased manner, including matters of audit selection, scope, procedures, frequency, timing, and report content. If the Chief Audit Executive determines that independence or objectivity may be impaired in fact or appearance, the details of impairment will be disclosed to appropriate parties.

The Audit & Standards Committee authorises the internal audit service to:

- Have full, free, and unrestricted access to all functions, records, property, and personnel pertinent to carrying out any engagement, subject to accountability for confidentiality and safeguarding of records and information.
- Allocate resources, set frequencies, select subjects, determine scopes of work, apply techniques required to accomplish audit objectives, and issue reports.
- Obtain assistance from the necessary personnel of the Council, as well as other specialised services from within or outside the Council, in order to complete the engagement.

Independence & Objectivity

Internal auditors will maintain an unbiased mental attitude that allows them to perform engagements objectively and in such a manner that they believe in their work product, that no quality compromises are made, and that they do not subordinate their judgment on audit matters to others.

Internal auditors will have no direct operational responsibility or authority over any of the activities audited. Accordingly, internal auditors will not implement internal controls, develop procedures, install systems, prepare records, or engage in any other activity that may impair their judgment, including:

- Assessing specific operations for which they had responsibility within the previous year.

CMAP Internal Audit Charter

- Performing any operational duties for the organisation or its affiliates.
- Initiating or approving transactions external to the internal audit service.
- Directing the activities of any organisation employee not employed by the internal audit service, except to the extent that such employees have been appropriately assigned to auditing teams or to otherwise assist internal auditors.

Where the Chief Audit Executive has or is expected to have roles and/or responsibilities that fall outside of internal auditing, safeguards will be established to limit impairments to independence or objectivity.

Internal auditors will:

- Disclose any impairment of independence or objectivity, in fact or appearance, to appropriate parties.
- Exhibit professional objectivity in gathering, evaluating, and communicating information about the activity or process being examined.
- Make balanced assessments of all available and relevant facts and circumstances.
- Take necessary precautions to avoid being unduly influenced by their own interests or by others in forming judgments.

The Chief Audit Executive will confirm to the Audit & Standards Committee, at least annually, the organisational independence of the internal audit service.

The Chief Audit Executive will disclose to the Audit & Standards Committee any interference and related implications in determining the scope of internal auditing, performing work, and/or communicating results.

Organisational Position and Reporting Relationships

The Chief Audit Executive will report functionally to the Audit & Standards Committee and administratively (i.e., day-to-day operations) to the Council's s151 Officer.

In order to establish, maintain, and assure that the Council's internal audit service has sufficient authority to fulfil its duties, the Audit & Standards Committee will:

- Approve the internal audit service's charter and mandate.
- Approve the risk-based internal audit plan.
- Receive communications from the Chief Audit Executive on the internal audit service's performance relative to its plan and other matters.
- Make appropriate inquiries of management and the Chief Audit Executive to determine whether there is inappropriate scope or resource limitations.
- The Chief Audit Executive will have unrestricted access to, and communicate and interact directly with, the Audit & Standards Committee, including in private meetings without management present.

The Chief Audit Executive will report periodically to senior management and the Audit & Standards Committee regarding:

- The internal audit service's purpose, authority, and responsibility.
- The internal audit service's plan and performance relative to its plan.

CMAP Internal Audit Charter

- The internal audit service's conformance with The Institute of Internal Auditors' (IIA) Code of Ethics and Standards, and action plans to address any significant conformance issues.
- Significant risk exposures and control issues, including fraud risks, governance issues, and other matters requiring the attention of, or requested by, the Audit & Standards Committee.
- Results of audit engagements or other activities.
- Resource requirements.
- Any response to risk by management that may be unacceptable to the organisation.

Scope of Internal Audit Activities

The scope of internal audit activities encompasses, but is not limited to, objective examinations of evidence for the purpose of providing independent assessments to the Audit & Standards Committee, management, and outside parties on the adequacy and effectiveness of governance, risk management, and control processes at the Council. Internal audit assessments include evaluating whether:

- Risks relating to the achievement of the Council's strategic objectives are appropriately identified and managed.
- The actions of the Council's employees and contractors are in compliance with its policies, procedures, and applicable laws, regulations, and governance standards.
- The results of operations or programs are consistent with established goals and objectives.
- Operations or programs are being carried out effectively and efficiently.
- Established processes and systems enable compliance with the policies, procedures, laws, and regulations that could significantly impact the organisation.
- Information and the means used to identify, measure, analyse, classify, and report such information are reliable and have integrity.
- Resources and assets are acquired economically, used efficiently, and protected adequately.

The Chief Audit Executive coordinates activities, where possible, and considers relying upon the work of other internal and external assurance and consulting service providers as needed. The internal audit service may perform advisory and related client service activities, the nature and scope of which will be agreed with the client, provided the internal audit service does not assume management responsibility.

Opportunities for improving the efficiency of governance, risk management, and control processes may be identified during engagements. These opportunities will be communicated to the appropriate level of management.

CMAP Internal Audit Charter

Responsibility of Chief Audit Executive

The Chief Audit Executive has the responsibility to:

- Submit to the Audit & Standards Committee, a risk-based internal audit plan for review and approval.
- Communicate to senior management and the Audit & Standards Committee the impact of resource limitations on the internal audit plan.
- Review and adjust the internal audit plan, as necessary, in response to changes in the organisation's business, risks, operations, programmes, systems, and controls.
- Communicate to senior management and the Audit & Standards Committee any significant interim changes to the internal audit plan.
- Ensure each engagement of the internal audit plan is executed, including the establishment of objectives and scope, the assignment of appropriate and adequately supervised resources, the documentation of work programs and testing results, and the communication of engagement results with applicable conclusions and recommendations to appropriate parties.
- Follow up on engagement findings and corrective actions, and report periodically to senior management and the Audit & Standards Committee any corrective actions not effectively implemented.
- Ensure the principles of integrity, objectivity, confidentiality, and competency are applied and upheld.
- Ensure the internal audit service collectively possesses or obtains the knowledge, skills, and other competencies needed to meet the requirements of the internal audit charter.
- Ensure trends and emerging issues that could impact the organisation are considered and communicated to senior management and the Audit & Standards Committee as appropriate.
- Ensure emerging trends and successful practices in internal auditing are considered.
- Establish and ensure adherence to policies and procedures designed to guide the internal audit service.
- Ensure adherence to the organisation's relevant policies and procedures, unless such policies and procedures conflict with the internal audit charter. Any such conflicts will be resolved or otherwise communicated to senior management and the Audit & Standards Committee.
- Ensure conformance of the internal audit service with the Standards, with the following qualifications:
 - If the internal audit service is prohibited by law or regulation from conformance with certain parts of the Standards, the Chief Audit Executive will ensure appropriate disclosures and will ensure conformance with all other parts of the Standards.

CMAP Internal Audit Charter

- o When the Standards are used in conjunction with requirements issued by the Chartered Institute of Public Finance and Accountancy (CIPFA), the Chief Audit Executive will ensure that the internal audit service conforms with the Standards, even if the internal audit service also conforms with the additional requirements of CIPFA.

Quality Assurance & Improvement Programme (QAIP)

The internal audit service will maintain a quality assurance and improvement programme that covers all aspects of the internal audit service. The program will include an evaluation of the internal audit service's conformance with the Standards and an evaluation of whether internal auditors apply The IIA's Code of Ethics. The program will also assess the efficiency and effectiveness of the internal audit service and identify opportunities for improvement.

The Chief Audit Executive will communicate to senior management and the Audit & Standards Committee on the internal audit service's quality assurance and improvement programme, including results of internal assessments (both on-going and periodic) and external assessments conducted at least once every five years by a qualified, independent assessor or assessment team from outside the organisation.



Central Midlands
Audit Partnership

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: Audit and Standards Committee – 9th September 2025

From: Audit Manager

Subject: Internal Audit Progress Report

1. Purpose of the Report

- 1.1 To provide an update on progress against the approved Internal Audit Plan. This details the performance and activity of Internal Audit since the last Progress Report presented to this Committee.

2. Recommendations

- 2.1 That the report of the Audit Manager (Appendix 1) is considered, and any issues identified are subject to a follow-up report as appropriate.

3. What the Committee is being asked to consider?

- 3.1 The Audit & Standards Committee is responsible for:
- scrutinising the activity of the Internal Audit service,
 - challenging the responses of management to recommended control improvement or lack of progress against agreed actions,
 - supporting improvements in governance, risk management and internal controls.
 - Ensuring Internal Audit remains independent, effective, and risk focused.

4. Internal Audit Progress Report

- 4.1 A report on the progress against the 2025/26 internal audit plan is attached at Appendix 1.

ADRIAN MANIFOLD

AUDIT MANAGER



central midlands audit partnership

Nuneaton & Bedworth Borough Council – Audit Progress Report

Audit & Standards Committee: 9th September 2025



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Our Vision

To bring about improvements in the control, governance and risk management arrangements of our Partners by providing cost effective, high quality internal audit services.

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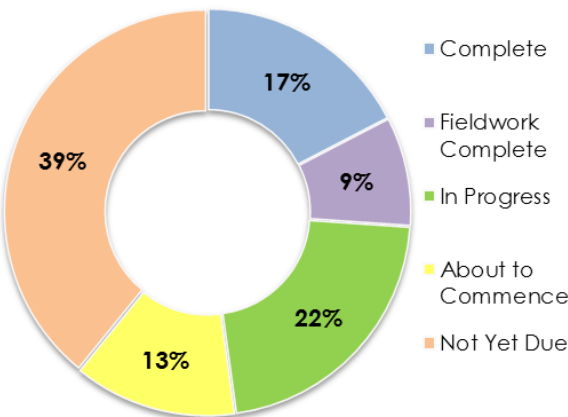
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DE1 2FS



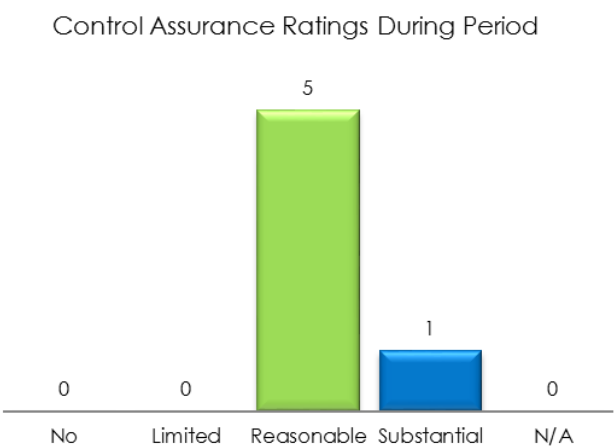
Nuneaton & Bedworth Borough Council – Audit Progress Report

AUDIT DASHBOARD

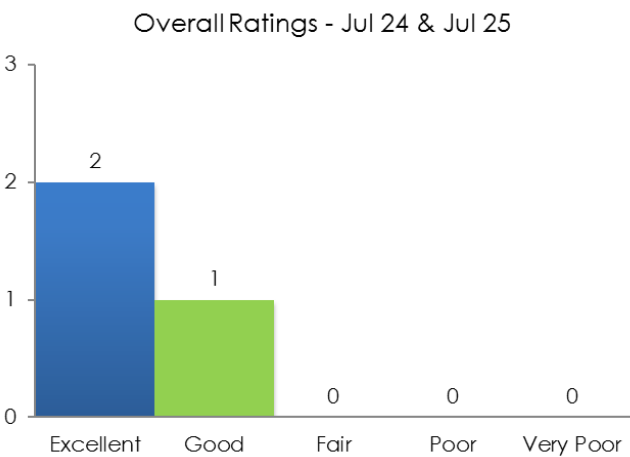
Plan Progress



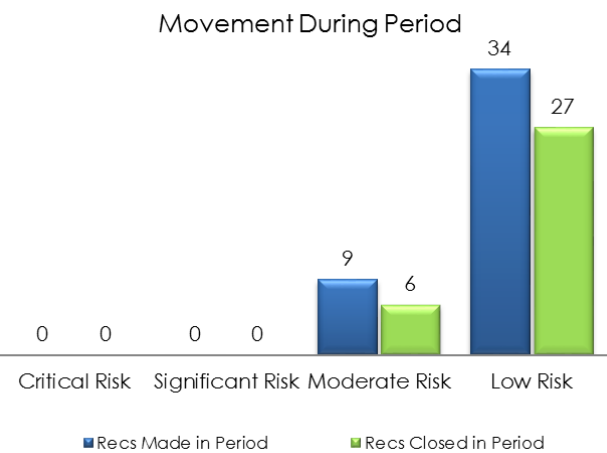
Jobs Completed in Period



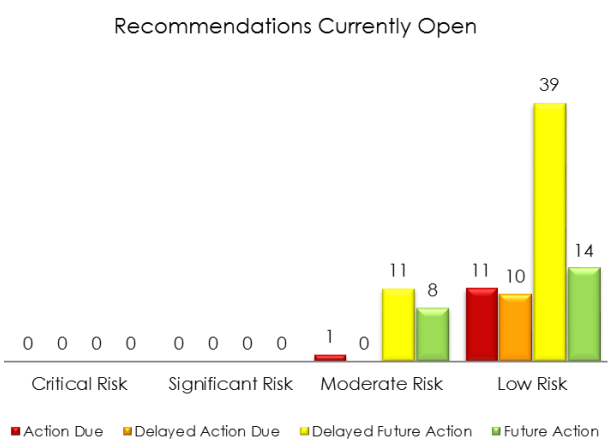
Customer Satisfaction



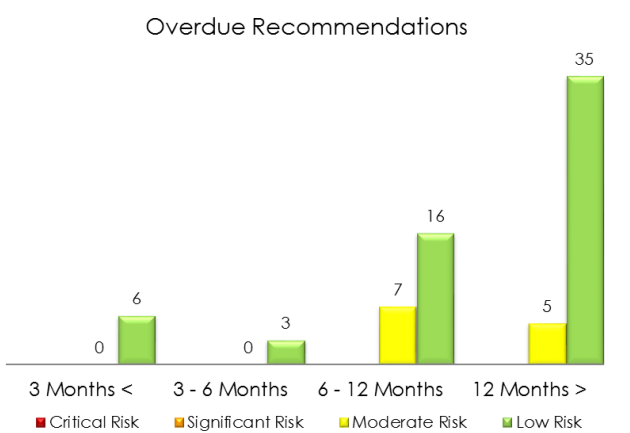
Recommendations Movement



Recommendations Open



Recommendations Overdue



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AUDIT PLAN

Progress on Audit Assignments

The following tables provide Audit & Standards Committee with information on how audit assignments were progressing as at 31st July 2025.

2025-26 Assignments	Status	% Complete	Assurance Rating
Insurance	Not Allocated		
Housing Benefit & Council Tax Support	Not Allocated		
Business Change & Transformation	In Progress	55%	
IT Infrastructure/Applications	Not Allocated		
Procurement (Contracts Register)	Not Allocated		
Risk Management 2025-26	In Progress	75%	
Corporate Governance 2025-26	Fieldwork Complete	80%	
Grant Certification 2025-26	In Progress	25%	
Markets & Street Trading	Not Allocated		
Corporate Fire Risk Management	Allocated	5%	
Voids Management	Allocated		
Capital Project Management	Not Allocated		
Health & Safety	Not Allocated		
Waste Management	Not Allocated		
Parks & Open Spaces	Not Allocated		

B/Fwd Assignments	Status	% Complete	Assurance Rating
Corporate Credit Cards	In Progress	20%	
Electoral Services	Final Report	100%	Substantial
Fire Risk Management	In Progress	65%	
Fuel Cards	In Progress	10%	
Licensing	Final Report	100%	Reasonable
Food Hygiene f/u	Fieldwork Complete	80%	
Grounds Maintenance	Final Report	100%	Reasonable
Homelessness	Final Report	100%	Reasonable

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Plan Changes

Due to the unexpected passing of the Audit Manager, an additional audit of the Council's Corporate Governance arrangements has had to be undertaken, and the planned Risk Management audit has been brought forward to allow me to provide an Audit Opinion for 2024-25.

Also, a request from another member of Nuneaton & Bedworth's Audit team to significantly reduce their hours, will result in a shortfall of the planned Audit resources available to us. This may result in a reduction in Audit coverage during 2025-26. It is currently too early to determine what the effects will be, but any proposed changes to the Audit Plan will be made in consultation with Senior Management and will be reported to this Committee.

An additional piece of audit work has also been requested to certify the claim for Arts Council England's Creative Explorers Grant.

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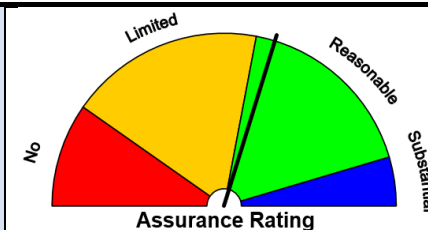
AUDIT COVERAGE

Completed Audit Assignments

Between 12th November 2024 and 19th August 2025, the following audit assignments have been finalised.

Audit Assignments Completed in Period	Assurance Rating	Recommendations Made				% Recs Closed
		Critical Risk	Significant Risk	Moderate Risk	Low Risk	
Homelessness	Reasonable			2	12	57%
Housing Rental Income	Reasonable			2	5	14%
Commercial Rental Income	Reasonable			1	4	0%
Licensing	Reasonable			2	8	10%
Electoral Services	Substantial				1	
Grounds Maintenance 2023-24	Reasonable			2	4	33%

Homelessness 2023-24



Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
To ensure that the Council's Homelessness service is operating effectively and in compliance with the current legislation and Homelessness Code of Guidance for Local Authorities (issued by the Department of Levelling Up, Housing and Communities (DLUHC)).	15	8	2	5
To ensure that the Council has appropriate, up to date policies and procedures in place to ensure that a consistent approach is taken by everyone involved with Homelessness applications and to ensure compliance with the Homelessness Strategy, and that these are readily available to all staff involved in administering the service	2	2	0	0
All income due is received and correctly accounted for and effective systems are in place across the Council's areas for managing and recovering arrears	10	3	2	5

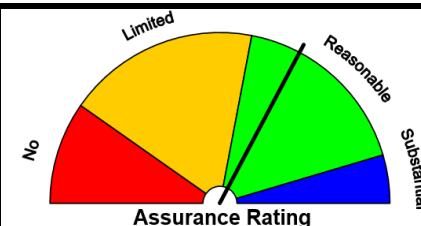
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The expenditure relating to the homelessness placement is correct and appropriately authorised in all cases, and regular budget monitoring arrangement is in place and effective		2	2	0	0
TOTALS		29	15	4	10
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date
1	Signed Personal Housing Plans (PHP) could not be located for five of the ten completed homelessness applications reviewed (50%).	Low Risk	07/04/2025	Implemented	
2	Of the five PHP's located, the PHP section on Abrisas was not completed in three cases (60%).	Low Risk	07/04/2025	Implemented	
3	A current risk assessment (Personal Data Sharing risk) could not be located for two clients/placements (20%). The reason for not completing one was not recorded in the relevant section on Abrisas.	Moderate Risk	07/04/2025	Implemented	
4	Signed Licence (to occupy) agreement could not be located for two of the ten cases reviewed (20%).	Low Risk	07/04/2025	Implemented	
5	Signed Consent declaration forms could not be located in two cases of the ten examined (20%).	Low Risk	07/04/2025	Implemented	
6	TA memos were not retained in Abrisas on the relevant clients' folders; therefore, a full audit trail was not available in one location (in Abrisas).	Low Risk	30/06/2025	Delayed Future Action	30/09/2025
7	Currently, only one Housing Assistant (HA) in Housing Customer Accounts Team (HCAT) has been granted access to Abrisas to set up TA rent accounts and provide TA admin support to the Housing Solutions team (HST), which could impact on business continuity arrangement.	Low Risk	30/09/2025	Future Action	
8	One rechargeable repairs invoice (that had been issued within the 15 placements reviewed) was found to be incorrectly coded to Housing Rechargeable repairs code.	Low Risk	07/04/2025	Implemented	
9	TA HRA rechargeable repairs invoices are coded using the same budget code as general Housing Rechargeable repairs code (LY05 9395 L7000), therefore, not easily identifiable on the monthly outstanding debtor report.	Low Risk	30/06/2025	Implemented	
10	The 'agreed lower limit' amount (for when an invoice should not be raised) was not specified in the Policy or Financial Accounting Instruction (FAI), therefore, a potential risk of minor value invoices (<£20) being raised, which could impact on the system's efficiency and effectiveness.	Low Risk	30/06/2025	Delayed Future Action	30/09/2025
11	Four of the fifteen former TA rent accounts (27%) reviewed have a credit or debit balance remaining on the accounts, as a result of mis-posting of income or service charges between the multiple accounts.	Low Risk	30/09/2025	Future Action	
12	The status of all fifteen (100%) former TA rent accounts reviewed were still showing as 'Open' in Cx, though the tenancies have ended.	Low Risk	30/09/2025	Future Action	

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13	There has been no active arrears recovery action taken on TA former tenant accounts for several years. As at 16/12/2024, approximately 1,645 former TA accounts with arrears balances, totalling approximately £843k, and 226 accounts with credit balances, totalling £207k.	Moderate Risk	30/09/2025	Future Action	
14	Outstanding invoice report meetings between the Recovery team and Homelessness team, which were suspended during the Covid-19 pandemic, had not been fully reinstated.	Low Risk	07/04/2025	Implemented	

Housing Rental Income

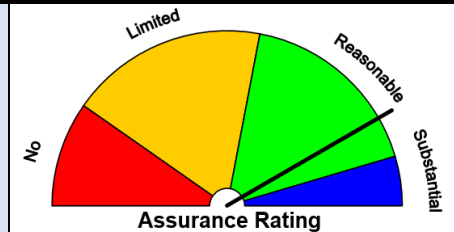


Control Objectives Examined		Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
Tenancy Agreements	To ensure that signed tenancy agreements exist for each new tenancy and the rent account set up is timely and correctly on the system.	4	2	0	2
Rent Roll	To ensure that an annual rent roll is produced and reconciled to the independent housing records.	1	1	0	0
Rent Reconciliations	To ensure that monthly reconciliations of the housing rents system to the nominal ledger are carried out by the Accountancy Section.	1	0	0	1
Reconciliations To Feeder Systems	To ensure the housing rents system is reconciled regularly to the cash and housing benefits feeder systems. (Cash/direct debit reconciled 4 weekly by Accountancy; housing benefits – weekly by Housing and by CF Support - Finance).	2	0	1	1
Rent Arrears	To ensure that rent arrears are regularly monitored and effective recovery action is taken on timely basis.	4	3	0	1
Rent Refunds	To ensure that refunds are processed and authorised correctly.	5	3	0	2
Rent Write-offs	To ensure that refunds are processed and authorised correctly	2	0	1	1
TOTALS		19	9	2	8
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date

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1	There have been no checks on introductory tenancy accounts since May 2024, to ensure the terms of tenancy are being complied with, to permit the tenure to be granted 'Secure' status.	Low Risk	31/03/2025	Delayed Future Action	30/09/2025
2	For new housing tenancies there is no effective monitoring post tenancy. This has resulted in some tenancies that have reached 12 months that qualify for 'Secure' status still remaining as 'Introductory'.	Low Risk	31/03/2025	Delayed Future Action	30/09/2025
3	The monthly reconciliation of housing rents to the General Ledger are ineffective as the financial data is not being matched from two independent sources of data.	Moderate Risk	01/09/2025	Future Action	
4	The weekly cash to rent account reconciliation had not been completed since CX went live in September 2020.	Moderate Risk	01/04/2027	Future Action	
5	No active recovery action was undertaken on tenancy accounts that had overdue rent from 2020 – 2022.	Low Risk	31/03/2025	Delayed Future Action	30/09/2025
6	Staff have never received any training with regards to money laundering.	Low Risk	30/06/2025	Implemented	
7	The March 2024 sub delegation prepared by AD-Finance for write-offs and the Financial Procedure Rules does not match the officer levels and write-off values stated in the Corporate Debt Policy approved by Cabinet.	Low Risk	01/08/2025	Delayed Future Action	30/09/2025

Commercial Rental Income

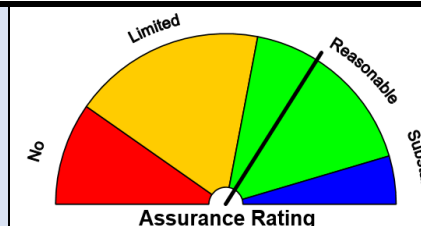


Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
To ensure that a valid lease agreement exists for each commercial property.	1	1	0	0
To ensure that tenant/ lease details are correctly entered on IPF Asset Management system.	1	0	0	1
To ensure that rent is correctly charged and invoiced.	1	0	0	1
To ensure that rent review details were specified in the lease agreement and formal review carried promptly when due.	1	0	0	1
To ensure that rent arrears is effectively managed.	1	0	1	0

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To ensure that credit balances identified are investigated and refunds are appropriate and in accordance with the Council's policy		1	0	0	1
TOTALS		6	1	1	4
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date
1	Lease details have failed to be entered on the IPF corporate asset management system.	Low Risk	01/04/2026	Future Action	
2	Two (66%) of the three commercial rent reviews cases remain incomplete and therefore potential rent income is being missed.	Low Risk	01/09/2025	Future Action	
3	There was an inconsistency between the credit terms set on the Debtors system to the lease agreements.	Low Risk	01/09/2025	Future Action	
4	Long term rent debts have not been litigated against in a timely manner resulting in the write-off of income.	Moderate Risk	01/09/2025	Future Action	
5	The Debt Recovery Team has not received any formal training on money laundering.	Low Risk	31/12/2025	Future Action	

Licensing 2023-24

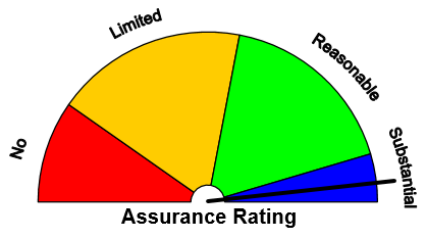


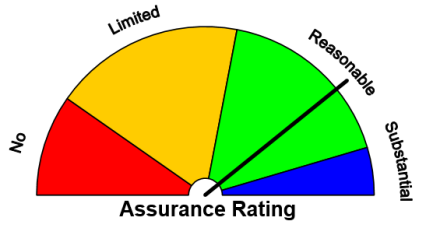
Control Objectives Examined		Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
An overarching policy and associated procedures are in place for all aspects of Licensing, ensuring that licences are issued in compliance with relevant guidelines and legislation.		10	5	0	5
Fees and charges associated with Licensing are set in line with national guidance and reviewed regularly, with all income being collected appropriately and fully reconciled.		7	2	1	4
TOTALS		17	7	1	9
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date
1	The approved Gambling Policy 2025 - 2028 (which contained the Statement of Principles) has not been published on the Council's website.	Low Risk	30/06/2025	Implemented	

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2	The Council's public register of licences was not maintained up to date and did not always contain the relevant information as recommended by best practice.	Low Risk	31/08/2025	Future Action	
3	The current licensing invoice outstanding process followed a set recovery path, which was protracted and not as efficient as it could be.	Low Risk	31/07/2025	Action Due	
4	Documents relating to licensing applications were now being retained in Content Manager. However, there was still a large amount of historical personal, sensitive documents stored in various folders on the Licensing network drive, which presents a risk of data breach/non-compliance with the DPA/GDPR requirements.	Low Risk	31/12/2025	Future Action	
5	There was no secure online application facility available for Licensing, so personal information was being submitted by applicants in email attachments, which presents a heightened risk of a data breach occurring.	Low Risk	31/10/2025	Future Action	
6	There was no annual reporting on the general licensing administration compliance to the Licensing Committee or Management Team for information.	Low Risk	30/06/2026	Future Action	
7	No quality checks were carried out by a senior officer on licensing data entered into the Flare system, resulting in errors or omissions not being identified and addressed in a timely manner.	Low Risk	30/06/2025	Delayed Future Action	30/09/2025
8	There were no reconciliations being performed between the income received in the General Ledger (Agresso) and the number of live/active licences on Flare.	Moderate Risk	31/10/2025	Future Action	
9	The Licensing fees have not been reviewed/updated since 2019-20. A review of the Licensing budget showed the function was in budget deficit in the past three years, which could indicate that full cost recovery was not being achieved.	Moderate Risk	31/10/2025	Future Action	
10	The Council's Statement of Licensing Policy 2021-2026 or associated procedures did not specify how cases in which rateable value (RV) had not yet been determined at the time a premises licence application was received should be handled once the RV had been assessed, in terms of fees due.	Low Risk	31/10/2025	Future Action	

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Electoral Services					
Control Objectives Examined		Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
Robust controls are in place which ensure that the integrity of the Electoral system is maintained.		14	13	1	0
Electoral Services expenditure is justified, accurate and approved.		7	4	2	1
TOTALS		21	17	3	1
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date
1	There was no independent check by the Finance team of the Returning Officer's claim form before it was submitted to the Electoral Commission Unit for reimbursement.	Low Risk	30/09/2025	Future Action	

Grounds Maintenance 2023-24					
Control Objectives Examined		Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
The terms and conditions within the contract are clear and appropriate to ensure the delivery of an effective grounds maintenance service that provides value for money for the Council.		3	2	1	0
Works have been verified as complete to the required standard prior to invoices being approved for payment.		5	2	2	1
Rectification notices, default notices or 'notice of failure' have been issued when appropriate, the notice is actioned by the GM Contractor in a timely manner and the cost of the notice is recharged back the Contactor.		1	0	1	0

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Complaints have been responded to in a reasonable timeframe as agreed by the Contractor.		1	1	0	0
There are adequate arrangements in place to allow contractual obligations and expectations to be identified and monitored effectively.		1	0	1	0
TOTALS		11	5	5	1
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date
1	One of the three KPIs which were mutually agreed at the start of the contract to facilitate the ongoing monitoring of the contract was not being reported, there was limited evidence to support the figures reported for one indicator, and targets set were insufficiently challenging.	Low Risk	01/04/2026	Future Action	
2	There was no reliable evidence to confirm that checks were made to ensure that works had been completed, prior to contractor payments being made.	Moderate Risk	01/04/2026	Future Action	
3	There was a lack of a clear audit trail to support mileage claims submitted and paid in respect of Grounds Maintenance inspection visits.	Low Risk	01/07/2025	Implemented	
4	A photo audit trail of work completed, a key contractual obligation allowing desktop monitoring of performance, was not being fully provided. Furthermore, where images were provided, there was no metadata on the uploaded images to verify date and time taken.	Moderate Risk	01/04/2026	Future Action	
5	There was no adequate audit trail to verify that the rectification notices were formally issued, remedial works were completed, and the penalty notice fee was charged.	Low Risk	01/07/2025	Action Due	
6	There has been no consistent action plan maintained of agreed actions at contract meetings and full minutes were not always recorded.	Low Risk	01/07/2025	Implemented	

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RECOMMENDATION TRACKING

Final Report Date	Audit Assignments with Open Recommendations	Assurance Rating	Recommendations Open			
			Action Due	Delayed Action Due	Delayed Future Action	Future Action
22-Nov-18	Overtime			1		
02-May-19	Miscellaneous Income				1	
10-May-19	Environmental Health Licences				1	
13-Sep-21	Land Charges		2			
13-Sep-21	Street Naming & Numbering			1		
21-Oct-21	Community Groups Funding		1		1	
11-Feb-22	Cemeteries & Crematorium Income		4		2	
01-Mar-22	S106 Agreements				2	
09-Mar-22	CCTV			2		
08-Apr-22	Mobile Phones				3	
02-May-22	Emergency Planning		1	1	1	
16-Sep-22	Business Rates				1	
29-Sep-22	Council Tax 2022-23				1	
03-Mar-23	Housing Lettings				2	
16-Aug-23	Sports Development			1		
08-Sep-23	Human Resources Management				6	
28-Mar-24	HEART (Home Environment Assessment & Response Team)		2		1	
31-Mar-24	Payroll Follow-up			4		
12-Apr-24	Leaseholder Management 2023-24				4	
03-Jun-24	Economic Development 2023-24				5	
04-Jun-24	Treasury Management 2023-24				3	
12-Jul-24	Absence Management 2023-24				5	
29-Jul-24	Car Park Income 2023-24				2	
22-Aug-24	Customer Feedback 2023-24				2	
06-Mar-25	Commercial Rental Income	Reasonable				5
06-Mar-25	Housing Rental Income 2023-24	Reasonable			4	2
07-Apr-25	Homelessness 2023-24	Reasonable			2	4
11-Jun-25	Licensing	Reasonable	1		1	7
30-Jul-25	Electoral Services	Substantial				1
30-Jul-25	Grounds Maintenance 2023-24	Reasonable	1			3
		TOTALS	12	10	50	22

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Action Due = The agreed actions are due, but Internal Audit has been unable to ascertain any progress information from the responsible officer.

Delayed Action Due = The original action date has now passed and Internal Audit has obtained status update comments from the responsible officer and a revised action date. This revised action date has now passed, but Internal Audit has been unable to ascertain any progress information from the responsible officer.

Delayed Future Action = The original action date has now passed and Internal Audit has obtained status update comments from the responsible officer and a revised action date which is in the future.

Future Action = The agreed actions are not yet due, so Internal Audit has not followed the matter up.

Audit Assignments with Recommendations Due	Action Due				Delayed Action Due				Delayed Future Action			
	Critical Risk	Significant Risk	Moderate Risk	Low Risk	Critical Risk	Significant Risk	Moderate Risk	Low Risk	Critical Risk	Significant Risk	Moderate Risk	Low Risk
Overtime								1				
Miscellaneous Income												1
Environmental Health Licences												1
Land Charges				2								
Street Naming & Numbering								1				
Community Groups Funding				1								1
Cemeteries & Crematorium Income			1	3							2	
S106 Agreements												2
CCTV								2				
Mobile Phones											1	2
Emergency Planning				1				1				1
Business Rates												1
Council Tax 2022-23												1
Housing Lettings												2
Sports Development								1				
Human Resources Management											2	4
HEART				2								1
Payroll Follow-up								4				
Leaseholder Management 2023-24												4
Economic Development 2023-24											2	3
Treasury Management 2023-24											2	1
Absence Management 2023-24												5
Car Park Income 2023-24											2	
Customer Feedback 2023-24												2
Housing Rental Income 2023-24												4
Homelessness 2023-24												2

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Licensing				1								1
Grounds Maintenance 2023-24				1								
TOTALS			1	11				10			11	39

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HIGHLIGHTED RECOMMENDATIONS

Critical, Significant or Moderate Risk Recommendations Past Original Action Date

The following moderate risk rated recommendations, that have not yet been implemented, are detailed for Committee's scrutiny.

Job Name	Cemeteries & Crematorium Income	Original Action Date	31/03/2023
Risk Rating	Moderate Risk	Revised Action Date	
Recommendation Number	6	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
There is a significant risk that historic cemeteries records held on the paper book ledgers as well as data held on the standalone EPILOGUE system (currently unsupported by IT) could become inaccessible should a disaster occur at the Town Hall. The recently appointed Cemeteries Officer has only now been set up with access to EPILOGUE. At present reliance is being placed on another member of the Team (who is now working as a casual administrative assistant), to retrieve any missing data from the old system as and when required, but this arrangement is not ideal and could present a business continuity risk.	It is imperative that data from the cemeteries paper ledgers is transferred onto the EPITAPH database as soon as possible to avoid the risk of statutory burial data being permanently lost in unforeseen circumstances.	This is subject to available resources within the Cemeteries Team, beyond those required for routine service delivery. This will require an officer with knowledge of the cemeteries processes, incl. both the current & previous software systems & an understanding of the ledger records.	Alternative methods of capturing the data (e.g., scanning) are being explored.

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Job Name	Cemeteries & Crematorium Income	Original Action Date	31/03/2023
Risk Rating	Moderate Risk	Revised Action Date	31/12/2025
Recommendation Number	8	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
<p>Lack of 2.5 years rent income for Crematorium valuing approximately £362.5k due lessee's Dignity Plc.</p> <p>The Council should be receiving market rent income from March 2020 onwards in line with the lease agreement though due to the COVID pandemic, there appears to be a delay on the formal valuation by the District Valuer. To enable Finance to account for an income reserve, the Head of Estates was requested to estimate a rent value, and this was confirmed as £145k per year back in 2021.</p> <p>Since then, there appears to be no progress made by Estates with Dignity to agree an interim rent sum, and the suggestion made by Finance to raise an invoice 'on account' for a larger value until such time as actual market rent value is determined has not been considered. At present, the Council are receiving a rent sum of £5k per annum (£1250 per quarter) based on the expired rent value, so there is a annual shortfall of approximate £140k rental income.</p>	The Head of Estates to respond urgently on this unresolved matter to either formally claim the rent income due or enable Finance to make the appropriate provisions in the account.	Agreed	This is currently with the District Valuer who are looking to arrange a meeting with the other side this month, the issue they have had is providing evidence to support a valuation. Hopefully the meeting will help progress the situation and we will continue to chase.

Job Name	Cemeteries & Crematorium Income	Original Action Date	31/03/2023
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	9	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The Council's Building A Better Borough (BABB) document outlines the strategic view on identifying potential land for future burials. The action deadline has been set for March 2023 where a formal report is to be presented to Cabinet. Discussions with the Head of Planning showed that the Council's search for a suitable cemetery land for Nuneaton is still continuing as the previously identified land at Eastboro Way has been deemed not viable. The Borough Plan (BP) review is currently out for consultation, which includes land options. The next stage of the BP review is a 'Publication consultation' which is planned to be consulted	Management to advise on the current status to ensure that the target will be met for the key action outlined in the DOF.	Agreed	Service Director liaising with Cabinet Members on steer. Current request is looking to extend lawn burial plots at Oaston Rd, Bucks Hill and Attleborough Cemetery sites. External feasibility underway to review what these sites could support re extra plots. Once known Cabinet to determine way forward and use of Martston

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upon in January 2022. It is understood that the Director – PS has scheduled meetings with the HEEP, Director - PR, and Head of Planning to agree on a collective approach to deal with this matter.			Lane as longer-term solution. NB. the Council does NOT have to provide burial space for residents it is a political decision to confirm way forward.
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Job Name	Mobile Phones	Original Action Date	01/09/2022
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	2	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
There was no monitoring process in place over the mobile phone usage as call usage reports have not been provided to Line Managers for scrutiny/review. Therefore, any unusual/high spend would not be picked up during the budget monitoring process. However, audit review of the itemised call reports identified three staff where usage had incurred additional call charges. Further scrutiny highlighted the following two staff where calls were inappropriate as these were made to enter a personal cash win competition.	The mobile phone bills should be regularly reviewed/scrutinised for any unusual spend/costs incurred, and relevant staff should be reminded on the need to ensure that the Council's policy is adhered to, and appropriate action taken to address improper use.	A chaser email had been sent to Virgin regarding the monitoring and exception reports, however no response has been received. A further follow up email is due to be sent.	A review was undertaken in 2024/25 and the number of mobile phones has been reduced significantly. Further work around the policy wording and requirements will be undertaken in 2025/26 financial year.

Job Name	Human Resources Management	Original Action Date	12/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/04/2026
Recommendation Number	1	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The Council is in the process of developing a People Strategy (PS), though the target date for implementation for 1 June 22 as now passed. This strategy is essential in ensuring that the Council can attract and retain a talented, and experienced workforce with the essential skill needs for the future. Several work streams have been established which focus on four key areas (Employee engagement and wellbeing; Leadership Development; Develop Talent and Promote an inclusive work environment- make the Council an employer of choice). The results from the workstreams will be used to feed into the development of the PS. Once implemented the PS will	A formal work programme is established for the development and implementation of the PS, with completion target dates for each workstream to help focus attention and assist in monitoring progress. The progress of the PS development should be reported regularly to Management Team and Employment Committee (EC).	Agreed	People strategy is being written for submission to OSP/Cabinet in September 2025, and adoption in April 2026. The previous People Strategy was not adopted by previous administration.

Nuneaton & Bedworth Borough Council – Audit Progress Report

then inform the direction of HR policies and procedures, to ensure that agreed principles are included and embedded.			
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Job Name	Human Resources Management	Original Action Date	12/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	14	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
<p>Recruitment and Retention (R&R) generally forms part of the organisation's strategic management of human resources, which has a number of interrelated elements designed to deliver long term sustainable success.</p> <p>People issues are not featured in the Council's Strategic Risk Register (SRR). A review of the Operation Risk Register (ORR) showed that two HR related risks were added on to the former Customer, Revenues and Assurance ORR (Aug 21), however, this document has not been updated following the Oct 21 management restructure.</p> <p>Consequently, employee morale and staff retention could be significantly impacted if HR-specific risks are not fully identified, effectively monitored and or managed.</p>	<p>The management needs to ensure that potentially high-impact and high-likelihood HR risks (for example, 'Not having the right people in the right place at the right time', 'multiple vacancies in key positions of the Council'; 'employing staff who do not have the required competencies and/or cultural fit with the Council etc.) are identified, mitigated and effectively managed and monitored.</p>	Agreed	Under review as part of the Strategic Workforce Planning.

Job Name	Economic Development 2023-24	Original Action Date	31/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/10/2025
Recommendation Number	1	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
<p>The Council's Economic Development Strategy (EDS) and Action Plan (AP) was adopted in 2016, which provides a framework for the delivery of the Council's ED priorities. The timeframe for the EDS is to 2031, to align with the then Borough Plan (BP) and Corporate Plan (CP), with a comprehensive review due in 2021. The EDS and AP was reviewed and re-drafted by the interim Economic Development Manager (EDM) in 2021/22, however, to date, the updated EDS and AP has not been finalised and approved. Given the length of time that has passed it is</p>	<p>The Council needs to ensure that it has an up to date, approved EDS and AP in place, that aligns with the Council's BaBB and all relevant county-wide and sub-regional priorities, to provide a clear and strategic direction for ED.</p>		<p>Borough Plans to be approved by Cabinet in October 2025. Updated 2025 ED Strategy to be included to support Borough Plan submission. Action Plan being updated by the end of September.</p>

Nuneaton & Bedworth Borough Council – Audit Progress Report

highly likely that the revised draft EDS and AP is now out of date, as some of the key policies used to inform its development; for example, the Warwickshire Education Strategy (WES) 2024-29 has now been refreshed and the new county-wide Warwickshire Strategic Economic Plan (SEP) 2024 – 34 is now in place and effective from 1 May 24.			
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Job Name	Economic Development 2023-24	Original Action Date	31/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	2	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The progress of the EDS Action Plan 2016 was required to be reported annually to the Economic and Corporate (EC) Overview and Scrutiny Panel (OSP), until it became defunct in 2017/18. This responsibility was then transferred to the Business, Regulation and Planning (BRP) OSP; however, we have not been able to locate any progress reports either to the BRP-OSP or Mngement Team (MT), though we understand that there were ED activities undertaken in the past four years, until responsibility for the function was assigned to the Housing and Community Safety (HCS) team from 1 April 22.	An effective monitoring, tracking, and reporting mechanism for the EDS AP activities should be established and the arrangement clearly specified within the updated EDS.		2025 updated Strategy to be amended to include mechanism for effective monitoring, tracking, and reporting Action Plan being updated complete by end of September 2025.

Job Name	Treasury Management 2023-24	Original Action Date	30/06/2024
Risk Rating	Moderate Risk	Revised Action Date	31/10/2025
Recommendation Number	4	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The updated Prudential Code 2021 requires all local authorities to prepare a Capital Strategy (CS) report. The aim of the Capital Strategy is to ensure that all the Council's elected members fully understand the overall long-term policy objectives and resulting Capital Strategy requirements, governance procedures and risk appetite. However, our findings showed that the Council currently did not have a Capital Strategy in place which represents best practice.	To ensure the Council fully complies with the Code and contributes towards achieving good practice, it is crucial that it puts in place a sound CS that supports decision making, and ensures it has a robust approval, reporting and monitoring framework in place which clearly links capital expenditure to the wider Council objectives and impact on the revenue budget. However, we understand that a CS plan, covering expenditure over the next 3 years, is currently being produced by Finance. The CS should be	Agreed	Updated Capital Strategy is going to OSP in Sept and Cabinet/Council afterwards for approval.

Nuneaton & Bedworth Borough Council – Audit Progress Report

	completed as soon as possible, appropriately approved, and updated annually.		
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Job Name	Treasury Management 2023-24	Original Action Date	02/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	8	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
At the time of testing, we understand that due to resource issues, the reconciliations of the loans/investments/interests to the GL had not been performed for 2022/23 and 2023/24. Therefore, there is risk of errors/discrepancies not being identified promptly and investigated, and the brought forward balances impacted. It is important that the team undertake regular reconciliations, so that any discrepancy can be promptly highlighted and followed up, though we appreciate that Finance – Treasury team has had resource issues and has been involved in a restructure over the last 18 months.	Reconciliations of loans, investments and interests due and received should be regularly completed and any discrepancies investigated.	Agreed	Reconciliations of loans are done continuously as part of the treasury management database. <i>Awaiting evidence before closing down.</i>

Job Name	Car Park Income 2023-24	Original Action Date	12/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	3	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Our findings showed that the income reconciliation of online payments relating to season tickets and PCN's is undertaken regularly by the Parking team, using the daily card transactions (world-pay) report sent by CS, to manually update the records within Chipside. However, the season ticket and penalty charge notice income due and received is not being reconciled to the income posted on Agresso; therefore, there is a risk of all income due not being collected and correctly accounted for.	Reconciliation of the PCN and Season ticket income between Chipside and Agresso should be completed on a regular basis, independently of the Parking team. If feasible, to facilitate the reconciliation process, the PCN and season ticket or car registration numbers (as detailed in the customer ID section on the world-pay statement) should be recorded in the text field, or PO field when posting income into Mentec/Agresso.	Agreed	To implement a quarterly reconciliation using Car Parking reports and cash posted transactions in Agresso starting from 2025-26 onwards. Audit to be advised when the 1 st quarter reconciliation has been completed.

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	Car Park Income 2023-24	Original Action Date	28/11/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation Number	6	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The penalty charge notice debts returned by the bailiffs as uncollectable were marked as 'written off' after either the Town Centre Manager or Assistant Director had signed and returned the 'Debts Unable to Collect' form to the Parking team. However, this is in breach of the Procedure Rule's as neither of them have the delegated authority to approve write-offs.	A formal decision is obtained from the Assistant Director - Finance, allowing the SM - TCM and AD - E to authorise write-offs and a copy of the delegated authority form is sent to Legal Services for retention on the central delegated decisions folder.	Agreed	In liaison with the Assistant Director for Economy and Regeneration to sort out the process

Nuneaton & Bedworth Borough Council – Audit Progress Report

Low Risk Recommendations Over 36 Months Past Original Action Date

The following 12 low risk rated recommendations, that have not yet been implemented and have exceeded their original action date by more than 36 months, are also detailed for Committee's scrutiny.

Job Name	Overtime	Original Action Date	30/11/2018
Risk Rating	Low Risk	Revised Action Date	17/05/2019
Recommendation Number	1	Recommendation Status	Delayed Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Of the 20 overtime claims reviewed, three claims relating to standby craft workers were found to be incorrect. HR has advised that the CRAFT conditions are being revised and a report will be presented to Management Team shortly, followed by the formal consultation period. The HR Officer also advised that the current CRAFT terms & conditions - point 3.c does state that no enhancement/uplift would be applied to the hourly rate of a substantive post, but an enhancement has always been paid - a decision made historically by the previous Payroll Manager.	The revised 'terms & conditions' for CRAFT workers is presented to Management Team without undue delay	Agreed	The revised 'terms & conditions' for CRAFT workers is being implemented. The process of dismissal and re engagement is due to complete 17 May-19

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	Environmental Health Licences	Original Action Date	31/03/2020
Risk Rating	Low Risk	Revised Action Date	30/09/2025
Recommendation Number	3	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Web search using Google and FB on the 'Nuneaton Community Forum' group for skin piercing services highlighted a further 10 potential registrations that are not listed on Council records – 3 relating to microblading, 1 relating to electrolysis, 6 relating to ear piercing	Further investigations are undertaken on those businesses identified to confirm that the service advertised is being provided and action is taken to ensure they are registered.	From the 10 businesses identified there are: 4 operators that indeed require to be followed up. 2 premises are registered in a different name and so will be followed up to confirm whether they have been taken over by new operators. 4 operators are believed to have registered many years ago when the old paper register was in existence – hence no FLARE record. At present the Corporate Admin Team are unable to locate the old manual registers, however this body of work is being planned as project to be reviewed next year.	This has been completed. <i>Awaiting evidence before closing down.</i>

Job Name	Miscellaneous Income	Original Action Date	31/03/2020
Risk Rating	Low Risk	Revised Action Date	31/03/2026
Recommendation Number	2	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
A check of the Fees & Charges 2018/19 booklet could not locate a defined surveyor's fee for 'disposal of land' or 'licence to under-lease'. Review of the surveyors fees code (9600 E000) for 2018/19 highlighted 20 income receipts, though only the following one transaction could be reconciled to the published fees & charges. A request was made to the Head of Estates to confirm the rates used to calculate the surveyors fees, however no response was received.	Consideration is given to reviewing the fees & charges for land & property so that the charges paid by clients are consistent with published fees to avoid any adverse queries being received.	Charges are variable and dependant on terms agreed upon by Head of Estates. Suggest that for clarity within the Fees & Charges book that the specific line is updated to reflect "variable but £450 max" (subject to agreement from Head of Estates)	Will be reviewed for 2026/27 budget setting

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	Land Charges	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	
Recommendation Number	6	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The LCC Service has been making a substantial surplus annually in the last three years (and for a number of years prior to that). This is clearly in breach of the Local Authorities (England) (Charges for Property Searches) Regulations 2008 and the Local Government Property Search Services – Costing and Charging Guidance 2009. Regulation 6 (3), states that 'A local authority must take all reasonable steps to ensure that over the course of any period of three consecutive financial years, the total income (including notional income from internal transactions) from such charges and recharges does not exceed the total costs of granting access to property records.'	The budget should be monitored, and fees and charges adjusted as appropriate, to ensure compliance with the regulations.	Agreed	A time cost analysis should be completed when the transition to HMLR has taken place.

Job Name	Land Charges	Original Action Date	31/03/2021
Risk Rating	Low Risk	Revised Action Date	
Recommendation Number	7	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Section 9, of the Statutory Instrument 2008 No. 3248 (of the above regulations) requires the Council to publish annually its LLC financial statement for the previous year and estimates used to calculate the LLC Fees for the current financial year. However, the Council has not published this information since the Regulations came into force in 2010.	The LLC financial statement and estimates required under Section 9 of the Local Authorities (England) (Charges for Property Searches) Regulations 2008 should be published annually. An appropriate mechanism should be put in place to ensure that the relevant information is published annually.	Agreed	Will work with the Finance Business Partner to see what can be resolved.

Job Name	Community Groups Funding	Original Action Date	29/10/2021
Risk Rating	Low Risk	Revised Action Date	
Recommendation Number	1	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
There were no Service Level Agreement (SLA) in place for the grant awarded to Bulkington Village Centre (BVC) for 2019/20, 2020/21 and 2021/22; therefore, the Council's policy and procedures are not being complied with.	The Council needs to ensure that any future grant awarded to BVC is covered by a valid SLA, in line with the Council's policy and procedures.	Agreed/In progress The SLA's for BVC for 2021 -22 are now in progress, and will be in place shortly.	

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	Community Groups Funding	Original Action Date	31/01/2022
Risk Rating	Low Risk	Revised Action Date	30/09/2025
Recommendation Number	10	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
There was no evidence to support that current Member approval has been obtained for the funding awarded to Warwickshire Community and Voluntary Action (WCAVA).	The Management needs to ensure that relevant approval has been obtained for each award period for any grant made to the individual community group/ organisation.	ICMD to be undertaken in 2022 – 23, to confirm the details of the SLA's and continual funding	This is included in the budget every year so the approval is when the budget paper in February is approved by full council. <i>Awaiting evidence of itemised approval before closing down.</i>

Job Name	S106 Agreements	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	30/11/2025
Recommendation Number	1	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Currently, Planning manually records and monitors the s106 agreements using Excel spreadsheet. The lack of automated/ technical system for the monitoring of s106 agreements could potentially lead to error/omission, data corruption and process inefficiencies.	The feasibility of having an integrating s106 monitoring software within the new planning system should be explored with the system supplier. The Management needs to ensure that all the relevant teams (i.e., Planning, Finance, Leisure, Parks & Green Spaces) are involved in the new system planning & implementation process, and relevant staff members provided with access to the system as commensurate to their respective roles and needs.	Agreed	IDOX, the new software for Planning is due to be rolled out in October 2025, which is due to automate the process. There is an associated software package, Exacom which can also be used alongside IDOX and we are currently in discussions with IDOX about this.

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	S106 Agreements	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	30/09/2025
Recommendation Number	5	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
There were no written procedures available to assist the relevant staff (especially new starters) involved in the monitoring of s106 agreements.	The procedures for the s106 monitoring system should be formally documented, stored in a central location, maintained up to date, and made available to the relevant staff involved in administering the system.	Agreed	Once the Section 106 Agreement Audit is concluded (August 2025) the Assistant Director for Planning is carrying out a review of how S106 Monitoring and Discharge of Conditions can best be resourced, which may well result in an additional post - this will be a sensible time to formally document all matters listed.

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	CCTV	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	31/03/2023
Recommendation Number	2	Recommendation Status	Delayed Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
<p>In addition to the main Control Room CCTV scheme, the Council operates other peripheral systems, all owned by the Waste & Transport Services, which are not currently covered under NBBC CCTV Code of Practice and Procedures Manual. These are;</p> <ul style="list-style-type: none"> (i) Smart cameras on Council refuse collection vehicles; (ii) Fly tipping cameras; and (iii) Body worn video (BWV) – externalised environmental enforcement service 	<p>The Council needs to ensure that all the CCTV systems it operates (internally or externally provided), are disclosed and covered by its CCTV Code of Practice (CoP).</p>	<p>Former Head of Town Centre (HTC) response. Fly-tipping and smart cameras on Council refuse collection vehicles are owned by the Waste & Transport service and do not feed into the Control Room. Therefore, they do not fall under the remit of the CCTV Controllers and do not need to be included in the CoP and PM for the Control Room. However, if they need to be included, then a separate CoP & PM specifically for the Waste & Transport Service is needed as the current CoP & PM relate to & reflect the Control Room only.</p> <p>Former Head of Waste & Transport (HWT) response. In process of liaising with HTC to include RCV camera and fly tipping protocols within the CP & PM. The document will then be issued to all authorised personnel with responsibility for Camera use or management.</p>	<p>By Former HTC Contact with HWT has not yet taking place due to current workload priority. It is proposed that once the CCTV system is finally upgraded, the whole service to be reviewed, with a view to bringing all the camera systems into a single service as a piece of work in 2023.</p>

Nuneaton & Bedworth Borough Council – Audit Progress Report

Job Name	CCTV	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	31/03/2023
Recommendation Number	12	Recommendation Status	Delayed Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The two stand-alone CCTV systems (Waste fleet and fly-tipping cameras) have no live viewing; i.e., the footage is not viewable and can only be accessed retrospectively by downloading the footage via the Wi-fi link at the Depot (Waste fleet), or by the Control Room operators (fly-tipping). There is no documented procedure for checking and maintaining the health of the stand-alone systems' equipment, to ensure that the cameras are working and recording and that the date and time programmed into equipment is correct. Poorly maintained cameras/equipment could lead to ineffective use of resources and unsuccessful litigation against the polluters/defence of claims against the Council.	The equipment health checks procedure should be specified within the CoP & PM to assist with effective operation and litigation process.	Fly-tipping and smart cameras on Council refuse collection vehicles are owned by the Waste & Transport service and do not feed into the Control Room. Therefore, they do not fall under the remit of the CCTV Controllers and do not need to be included in the CoP and PM for the Control Room. However, if they need to be included, then a separate CoP & PM specifically for the Waste & Transport Service is needed as the current CoP & PM relate to & reflect the Control Room only. Former Head of Waste & Transport (HWT) response. In process of liaising with HTC to include RCV camera and fly tipping protocols within the CP & PM. The document will then be issued to all authorised personnel with responsibility for Camera use or management.	By Former HTCCContact with HWT has not yet taking place due to current workload priority. It is proposed that once the CCTV system is finally upgraded, the whole service to be reviewed, with a view to bringing all the camera systems into a single service as a piece of work in 2023.

Job Name	Street Naming & Numbering	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	28/02/2023
Recommendation Number	3	Recommendation Status	Delayed Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
A review of the SNN budget for the past five years shows that the service has generated a profit in the first four years, though for 2020/21 there was an under-recovery of costs of approximately £1.8k. The charges should not exceed the cost of providing the service, so the Council is in breach of the regulations.	The SNN income and expenditure should be regularly monitored, and fees and charges adjusted as appropriate to ensure compliance with the regulations.	Agreed	We will look to create an income reconciliation between the Flare and General Ledger systems. The SNN fees are in the process of being reviewed.

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: **Audit and Standards Committee – 9th September 2025**

From: **Audit Manager**

Subject: **Internal Audit Annual Opinion Report 2024-25**

1. Purpose of the Report

- 1.1 This report provides Committee with the Annual Internal Audit Opinion as required by the Public Sector Internal Audit Standards, together with a summary of the work that the Council's Internal Audit Service has undertaken during 2024/25.
- 1.2 The report also provides information on the performance of the Internal Audit service in 2024/25 and an assessment of the conformance against the Public Sector Internal Auditing Standards.

2. Recommendations

- 2.1 To consider and note the Annual Internal Audit Opinion for 2024-25 (Appendix 1).

3. What the Committee is being asked to consider?

- 3.1 The Audit and Standards Committee is responsible for providing assurance to the Council on the effectiveness of the governance arrangements, risk management framework and internal control environment. Specifically, Committee is being asked:
 - Does the overall Annual Audit Opinion provide a clear opinion on the Council's governance, risk management and control framework?
 - Is the Opinion evidence based, unbiased and reflective of the Council's risk landscape?
 - Have any significant issues been identified that require further management action or escalation?
 - Is the Council making satisfactory progress in response to audit recommendations?
 - Has Internal Audit operated in accordance with Public Sector Internal Audit Standards?
 - Does the Internal Audit Opinion support the Council's Annual Governance Statement (AGS)?

4. Internal Audit Annual Opinion

- 4.1 The Public Sector Internal Audit Standards (PSIAS) requires that the 'Chief Audit Executive' (in the case of Nuneaton & Bedworth Borough

Council the Audit Manager) must deliver an annual internal audit opinion and report that can be used by the Council to inform its Annual Governance Statement.

- 4.2 The annual internal audit opinion must conclude on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and internal control. The annual report must also include a statement on conformance with the PSIAS and the results of the Quality Assurance and Improvement Programme (QAIP).
- 4.4 Internal Auditing is defined as *“an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes”*. (Public Sector Internal Audit Standards – PSIAS).

ADRIAN MANIFOLD

AUDIT MANAGER

Nuneaton & Bedworth BC – Internal Audit Annual Report 2024-25

Audit & Standards Committee: 9th September 2025



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Our Vision

To bring about improvements in the control, governance and risk management arrangements of our Partners by providing cost effective, high quality internal audit services.

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Providing Excellent Audit Services in the Public Sector

Introduction

This report provides the Annual Internal Audit Opinion for the year ended 31 March 2025, as required under the Public Sector Internal Audit Standards (PSIAS). The opinion is provided to support the Council's Annual Governance Statement and reflects the outcomes of the internal audit activity undertaken during the year.

The Chief Audit Executive is responsible for leading the internal audit function, providing independent and objective assurance to senior management and elected members on the adequacy and effectiveness of the organisation's governance, risk management, and internal control processes. The Chief Audit Executive supports the organisation in achieving its objectives by evaluating and improving the effectiveness of these processes and plays a key role in promoting good governance and accountability.

Due to the unfortunate passing of the Chief Audit Executive shortly after the end of the financial year, this report has been compiled under exceptional circumstances and is based solely on the audit work completed to date and the information available at the time of writing.

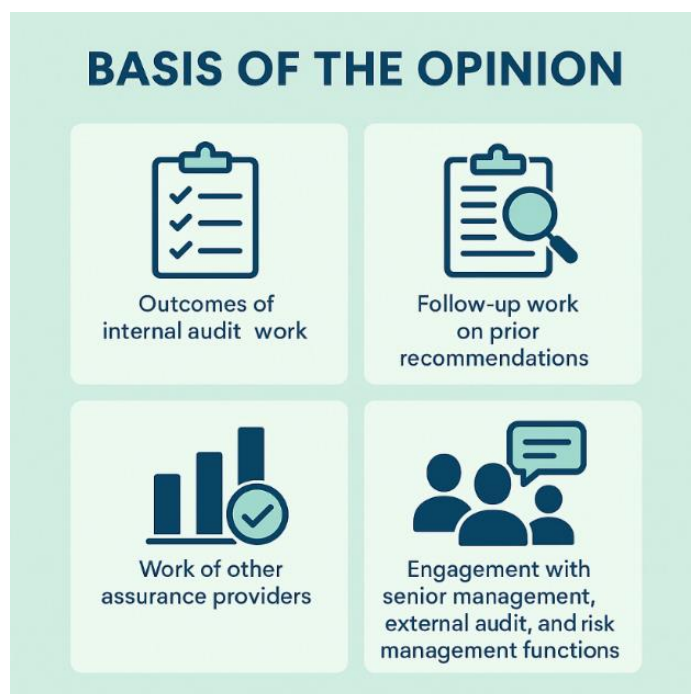
Purpose of the Internal Audit Opinion

The purpose of the annual opinion is to provide:

- An independent and objective assessment of the Council's risk management, control and governance arrangements.
- Assurance to senior management and the Audit & Standards Committee on the overall adequacy and effectiveness of these arrangements.
- A basis for the Audit & Standards Committee to assess the Council's internal control environment.

Basis of the Opinion

Internal Audit's risk-based plan must take into account the requirement to produce an annual internal audit opinion. Accordingly, the Audit Plan must incorporate sufficient work to enable the Chief Audit Executive to give an opinion on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and control. Internal Audit must therefore have sufficient resources to deliver the Audit Plan.



Nuneaton & Bedworth – Internal Audit Annual Report 2024-25

This opinion is based on:

- The outcomes of internal audit work undertaken during the year, as approved in the annual audit plan.
- Reports and documentation previously issued by the internal audit service.
- Advice from internal stakeholders where available.
- Historical audit records and progress updates previously submitted to the Audit & Standards Committee.
- Limited discussions with senior management and key personnel due to time and resource constraints.

Only limited audit testing, independent fieldwork, or further validation could be carried out by the report's author due to the short time frame and transitional period following the sad and unexpected passing of the former Chief Audit Executive.

Annual Internal Audit Opinion

In my capacity as the Council's acting Chief Audit Executive, I am required to provide an annual opinion on the overall adequacy and effectiveness of the organisation's framework of governance, risk management and internal control.

Overall Possible Opinions

The Chief Audit Executive's opinion relative to the organisation overall would normally fall into one of the following 4 categories:

OVERALL POSSIBLE OPINIONS

Substantial Assurance

A sound system of governance, risk management and control exists, with only minor weaknesses. Most controls are well designed and operating effectively, and risks are well managed.

Reasonable Assurance

The framework of governance, risk management and control is generally adequate and effective, although some improvements are required. Most systems and processes are well designed and operating effectively, but a small number of moderate risk issues were identified that require management attention.

Limited Assurance

There are significant weaknesses in governance, risk management and/or control which could jeopardise the achievement of objectives. Several audit findings suggest control breakdowns or gaps, some of which are high-risk or systemic.

No Assurance

The overall system of governance, risk management and control is ineffective. Fundamental or pervasive weaknesses exist across systems reviewed; immediate remedial action is required.

Nuneaton & Bedworth – Internal Audit Annual Report 2024-25

Opinion for 2024-25

Reasonable Assurance can be given that Nuneaton & Bedworth Borough Council's framework of governance, risk management and control is adequate and effective.

Please note that this opinion has been arrived at with a lack of direct oversight, testing or evaluation by the report's author. The opinion has mainly been formed based on the work carried out under the leadership of the late Chief Audit Executive and the available documentation and evidence.

In forming this opinion, I am satisfied that no conflicts of interest have occurred which would have any bearing on my independence or objectivity. Also, my organisational independence and objectivity has not been subject to any impairment in fact or appearance; nor has the scope of our work been restricted in any way.

I have arrived at this opinion having regard to the following:

- The report has been prepared during a period of transition for the Internal Audit function.
- The late Chief Audit Executive deferred or cancelled several planned audits due to emerging priorities or other operational pressures. As such, assurance has not been obtained in some areas originally identified as part of the original 2024-25 risk-based audit plan. This reduced overall coverage and has limited our ability to draw broader conclusions across the control environment. Accordingly, we have relied to some degree on management self-assurance and other non-audit sources. These have not been independently verified by internal audit.
- Due to the unexpected passing of the Chief Audit Executive, we were unable to establish their professional insight and overarching knowledge of the Council's governance, risk management, and internal control arrangements to inform the 2024-25 annual opinion. Accordingly, this has constrained our ability to provide a confident assessment.
- Also, the 2024-25 Audit Plan provided no coverage of the Council's corporate governance and risk management arrangements. This left us with no option but to defer our Opinion Report from the June 2025 Audit & Standards Committee to allow time for additional audit coverage of these two frameworks to be undertaken.
- This additional coverage of corporate governance and risk management, coupled with more planned work reaching a conclusion, has now provided us with sufficient evidence to allow me to provide an opinion.
- The process for following up audit recommendations at Nuneaton & Bedworth was not considered to be efficient or timely and did not provide either Internal Audit, Senior Management and the Audit & Standards Committee with transparent and appropriate details of management's actions in relation to addressing control weaknesses. As a result, it is apparent that an inflated number of audit recommendations is currently being shown as outstanding.
- We are undertaking an exercise with senior management to establish an update position on audit recommendations perceived to be still outstanding. Time limitations have prevented us from completing this exercise in full, but we have established a clearer picture of the current situation.
- We have been able to determine that where weaknesses have been identified by Internal Audit, management has made a clear commitment to make the necessary control improvements. For a significant number of outstanding recommendations management has provided assurances that corrective actions have already been taken to address the weaknesses. We are still in the process of verifying all the evidence required to demonstrate that these recommendations have been appropriately rectified before closing them down.
- The Internal Audit service is currently in the process of deploying the K10 Vision Audit Management System at Nuneaton & Bedworth, which will provide Management and this Committee with greater visibility of all outstanding audit recommendations. This system will notify management when audit recommendations are due and will allow managers to

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provide update information direct to the system and also attach evidence of the successful completion of the agreed actions.

This opinion is provided with the following caveats:

- The opinion does not imply that Internal Audit has reviewed all risks, controls and governance arrangements relating to the Council. The opinion is substantially derived from the conduct of risk-based audit work and as such, it is only one component that is considered when producing the Council's Annual Governance Statement.
- No system of control can provide absolute assurance against material misstatement or loss, nor can Internal Audit give absolute assurance.
- Full implementation of all agreed actions is essential if the benefits of the control improvements detailed in each individual audit report are to be realised.

Internal Audit Performance & Compliance

During 2024-25 Internal Audit has operated in accordance with the PSIAS and the Internal Audit Charter approved by the Audit & Standards Committee.

A self-assessment of compliance with the PSIAS was recently conducted, and actions are being taken to address any areas for improvement. These actions are contained within CMAP's Quality Assurance & Improvement Programme (QAIP). The CMAP Leadership team revise the QAIP on an annual basis, with regular reviews of the progress on actions throughout the year. The QAIP is a standing item on all CMAP team meeting agendas and on the CMAP Operational Group meeting agendas.

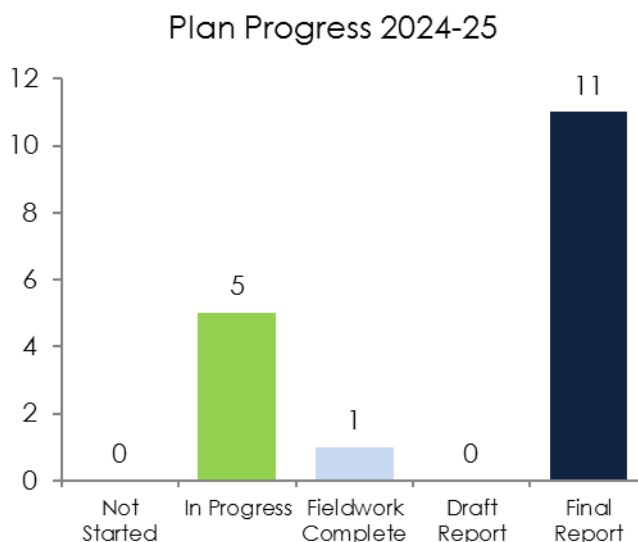
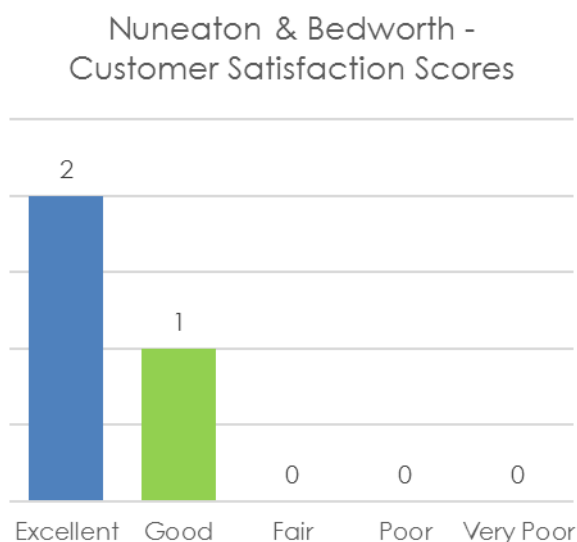
The QAIP for 2024/25 and the progress made during the year on securing the improvements is shown in [Appendix A](#) at the back of this report.

An external quality assessment was last undertaken in October 2022 and it was determined that we generally conformed with each standard. 'Generally Conforms' means the evaluator has concluded that the relevant structures, policies, and procedures of the activity, as well as the processes by which they are applied, comply with the requirements of the individual *Standard* or element of the Code of Ethics in all material respects. For the sections and major categories, this means that there is general conformance to a majority of the individual *Standards* or elements of the Code of Ethics, and at least partial conformance to the others, within the section/category. There may be significant opportunities for improvement, but these must not represent situations where the activity has not implemented the *Standards* or the Code of Ethics, has not applied them effectively, or has not achieved their stated objectives. As indicated above, general conformance does not require complete/perfect conformance, the ideal situation, successful practice, etc.

Assessments were based on the following 3 ratings:

- **Generally Conforms** - means that an internal audit activity has a charter, policies, and processes that are judged to be in conformance with the Standards.
- **Partially Conforms** - means deficiencies in practice are noted that are judged to deviate from the Standards, but these deficiencies did not preclude the internal audit activity from performing its responsibilities in an acceptable manner.
- **Does Not Conform** - means deficiencies in practice are judged to be so significant as to seriously impair or preclude the internal audit activity from performing adequately in all or in significant areas of its responsibilities.

Another external quality assessment will be scheduled for completion in 2027.



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Summary of Audit Work Undertaken

Audit Plan 2024-25

The 2024-25 Internal audit plan, approved by the Audit & Standards Committee, 12th March 2024, was developed by the late Chief Audit Executive. The risk assessment process used at Nuneaton & Bedworth Borough Council (NBBC) was reported to have considered factors such as:

- The extent of change and development.
- Staffing issues, e.g., inadequate training, high vacancy levels or extensive delegation.
- The complexity of the system.
- Previous audit findings, agreed action plans and the length of time since the last review.
- Frauds detected or investigated.
- The sensitivity of the system, for example the impact to the Council of something going wrong.
- The value and volume of transactions.

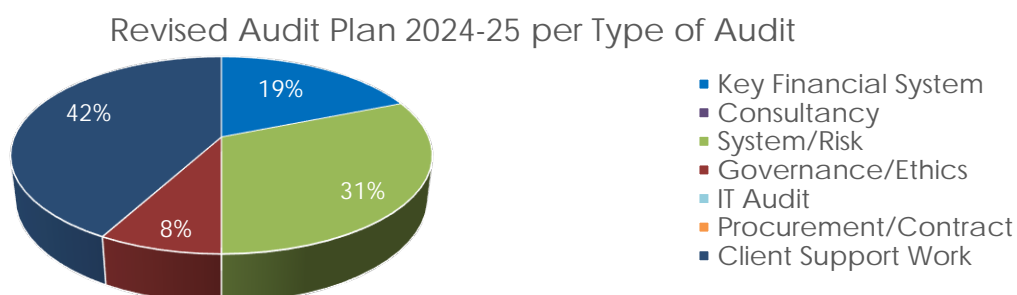
The following tables summarise the revised 2024-25 Audit Plan assignments and their outcomes as well as those assignments from the 2023-24 Audit Plan which were still ongoing in 2024-25.

2024-25 Jobs	Status	% Complete	Assurance Rating
Corporate Credit Cards	In Progress	20%	Not Yet Complete
Electoral Services	Final Report	100%	Substantial
Fire Risk Management	In Progress	65%	Not Yet Complete
Fuel Cards	In Progress	10%	Not Yet Complete
Licensing	Final Report	100%	Reasonable
Corporate Governance †	Fieldwork Complete	80%	Reasonable*
Risk Management †	In Progress	75%	Reasonable*

† Additional audits required to provide an Opinion

2023-24 Jobs B/fwd	Status	% Complete	Assurance Rating
Car Park Income	Final Report	100%	Reasonable
Leaseholder Management	Final Report	100%	Reasonable
Treasury Management	Final Report	100%	Limited
Absence Management	Final Report	100%	Limited
Commercial Rental Income	Final Report	100%	Reasonable
Housing Rental Income	Final Report	100%	Reasonable
Food Hygiene f/u	Fieldwork Complete	80%	Reasonable*
Grounds Maintenance	Final Report	100%	Reasonable
Homelessness	Final Report	100%	Reasonable
Customer Feedback	Final Report	100%	Reasonable
Economic Development	Final Report	100%	Limited

* Assurance rating yet to be finalised



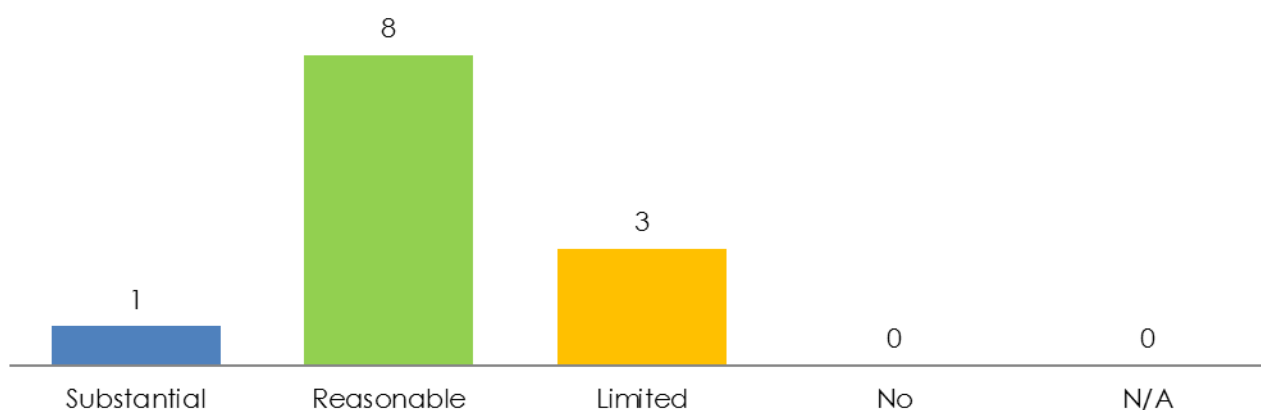
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Assurances Provided

The following table summarises the extent of audit coverage provided to Nuneaton & Bedworth Borough Council during 2024-25 and the assurance ratings associated with each audit assignment.

Summary of Audit Plan 2024-25 Results (incl. Jobs B/Fwd)	Type of Review					Totals
	Key Financial System	Consultancy	System /Risk	Governance /Ethics	IT Audit	
Not Yet Complete	1		3	2		6
Substantial			1			1
Reasonable	2		6			8
Limited	1		2			3
No						
N/A						
	4		12	2		18

Assurances Provided 2024-25



Assurance Ratings Explained

Substantial - A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.

Reasonable - There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.

Limited - Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.

No - Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

N/A - The type of work undertaken did not allow us to reach a conclusion on the adequacy of the overall level of internal control, i.e. a consultancy engagement.

Moving forward, these assurance ratings will be determined using our bespoke modelling technique which takes into account the number of control weaknesses identified in relation to those examined, weighted by the significance of the risks.

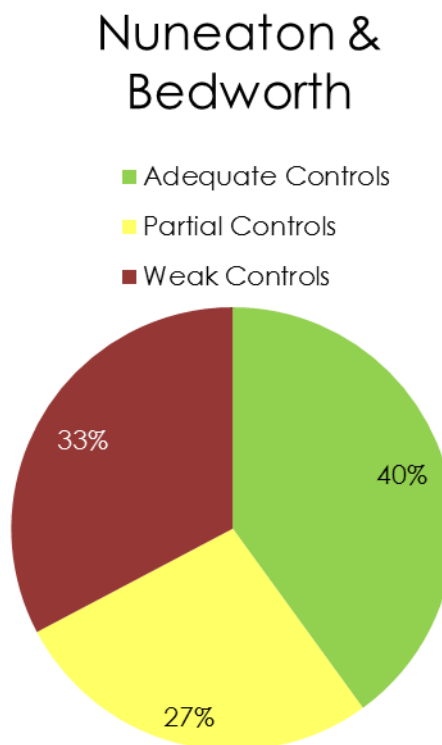
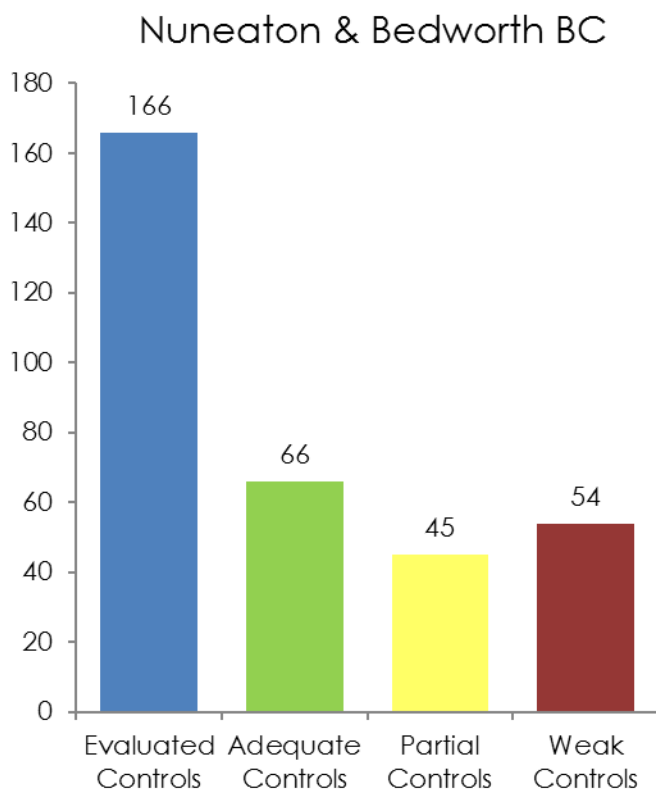
For 2024-25, we have attempted to align the assurances determined by Nuneaton & Bedworth's internal audit's service, conducted utilising their previous processes and working papers, with those assurance ratings used by Central Midlands Audit Partnership (CMAP). Given the material differences

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in each methodology, we cannot place absolute reliance on the overall assurance ratings determined using the old methodology.

Internal Controls Examined

For those audits finalised during 2024-25, we established the following information about the controls examined:



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Audit Recommendations

Audit Recommendations Made 2024-25

The control weaknesses identified above resulted in 73 recommendations which suggested actions for control improvements. The following table and charts show where the recommendations came from, how the recommendations were risk rated and the current status of all recommendations made in 2024-25:

Audit Assignments Completed in Period	Assurance Rating	Recommendations Made				% Recs Closed
		Critical Risk	Significant Risk	Moderate Risk	Low Risk	
Corporate Credit Cards						n/a
Treasury Management 2023-24	Limited			4	4	63%
Commercial Rental Income	Reasonable			1	4	
Housing Rental Income	Reasonable			2	5	14%
Electoral Services	Substantial				1	
Fire Risk Management						n/a
Fuel Cards						n/a
Licensing	Reasonable			2	8	10%
Car Park Income 2023-24	Reasonable			2	2	25%
Leaseholder Management 2023-24	Reasonable			2	6	50%
Absence Management 2023-24	Limited				5	
Food Hygiene f/u						n/a
Grounds Maintenance	Reasonable			2	4	33%
Homelessness	Reasonable			1	9	40%
Customer Feedback 2023-24	Reasonable				2	
Economic Development 2023-24	Limited			2	5	29%
Corporate Governance	Reasonable*					n/a
Risk Management	Reasonable*					n/a
TOTALS				18	55	27%

* Assurance ratings yet to be finalised

2024-25 Recommendations Status

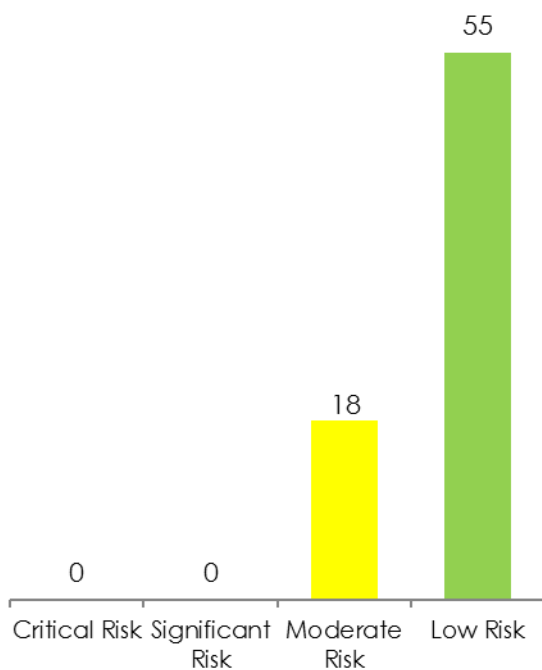
Audit Assignments	Type of Review	Recommendations Status				
		Total Closed	Action Due	Delayed Action Due	Delayed Future Action	Future Action
Corporate Credit Cards*	Key Financial System					
Treasury Management 2023-24	Key Financial System	5			3	
Commercial Rental Income	Key Financial System					5
Housing Rental Income 2023-24	Key Financial System	1			4	2
Electoral Services	System/Risk					1
Fire Risk Management*	System/Risk					
Fuel Cards*	System/Risk					
Licensing	System/Risk	1	1		1	7
Car Park Income 2023-24	System/Risk	1	1		2	
Leaseholder Management 2023-24	System/Risk	4			4	
Absence Management 2023-24	System/Risk		4		1	

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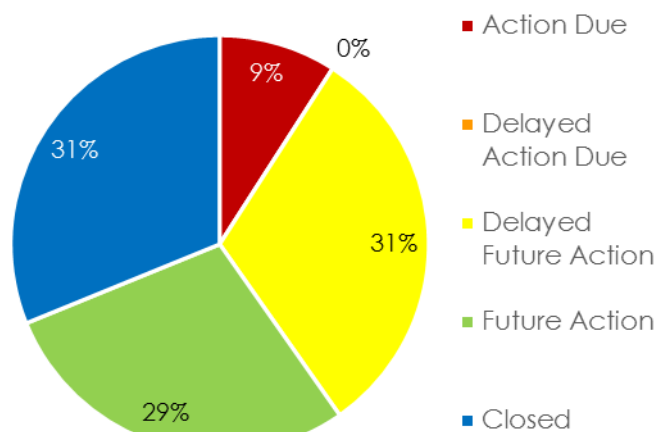
Food Hygiene f/u*	System/Risk					
Grounds Maintenance	System/Risk	2	1			3
Homelessness 2023-24	System/Risk	4			2	4
Customer Feedback 2023-24	System/Risk				2	
Economic Development 2023-24	System/Risk	2			5	
Corporate Governance	Governance/Ethics					
Risk Management	Governance/Ethics					
TOTALS		20	7		24	22

* This assignment is not yet complete, therefore formal recommendations have yet to be made.

Recommendations by Risk Rating



Recommendation Status



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Key Recommendations Arising from Audits in 2024-25

The following represents a selection of moderate risk recommendations made during 2024-25:

Job Name	Economic Development 2023-24	Original Action Date	31/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation No.	2	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
The progress of the EDS Action Plan 2016 was required to be reported annually to the Economic and Corporate (EC) Overview and Scrutiny Panel (OSP), until it became defunct in 2017/18. This responsibility was then transferred to the Business, Regulation and Planning (BRP) OSP; however, we have not been able to locate any progress reports either to the BRP-OSP or Management Team (MT), though we understand that there were ED activities undertaken in the past four years, until responsibility for the function was assigned to the Housing and Community Safety (HCS) team from 1 April 22.		An effective monitoring, tracking, and reporting mechanism for the EDS AP activities should be established and the arrangement clearly specified within the updated EDS.	
Management Response/Action Details		Status Update Comments	
N/A		2025 updated Strategy to be amended to include mechanism for effective monitoring, tracking and reporting Action Plan being updated by end of September 2025.	

Job Name	Car Park Income 2023-24	Original Action Date	12/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation No.	3	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
Our findings showed that the income reconciliation of online payments relating to season tickets and PCN's is undertaken regularly by the Parking team, using the daily card transactions (world-pay) report sent by CS, to manually update the records within Chipside. However, the season ticket and penalty charge notice income due and received is not being reconciled to the income posted on Agresso; therefore, there is a risk of all income due not being collected and correctly accounted for.		Reconciliation of the PCN and Season ticket income between Chipside and Agresso should be completed on a regular basis, independently of the Parking team. If feasible, to facilitate the reconciliation process, the PCN and season ticket or car registration numbers (as detailed in the customer ID section on the world-pay statement) should be recorded in the text field, or PO field when posting income into Mentec/Agresso.	
Management Response/Action Details		Status Update Comments	
N/A		To implement a quarterly reconciliation using Car Parking reports and cash posted transactions in Agresso starting from 2025-26 onwards. Audit to be advised when the 1 st quarter reconciliation has been completed.	

Job Name	Car Park Income 2023-24	Original Action Date	28/11/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation No.	6	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
The penalty charge notice debts returned by the bailiffs as uncollectable were marked as 'written off' after either the Town Centre Manager or Assistant Director had signed and returned the 'Debts Unable to Collect' form to the Parking team. However, this is in breach of the Procedure Rule's as		A formal decision is obtained from the Assistant Director - Finance, allowing the SM – TCM and AD - E to authorise write-offs and a copy of the delegated authority form is sent to Legal Services for retention on the central delegated decisions folder.	

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neither of them have the delegated authority to approve write-offs.	
Management Response/Action Details	Status Update Comments
N/A	In liaison with the Assistant Director for Economy and Regeneration to sort out the process.

Job Name	Treasury Management 2023-24	Original Action Date	02/12/2024
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation No.	8	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
At the time of testing, we understand that due to resource issues, the reconciliations of the loans/investments/interests to the GL had not been performed for 2022/23 and 2023/24. Therefore, there is risk of errors/discrepancies not being identified promptly and investigated, and the brought forward balances impacted. It is important that the team undertake regular reconciliations, so that any discrepancy can be promptly highlighted and followed up, though we appreciate that Finance – Treasury team has had resource issues and has been involved in a restructure over the last 18 months.		Reconciliations of loans, investments and interests due and received should be regularly completed and any discrepancies investigated.	
Management Response/Action Details		Status Update Comments	
N/A		Reconciliations are done continuously as part of the treasury management database. <i>Waiting for evidence of reconciliation before marking as implemented.</i>	

Job Name	Housing Rental Income 2023-24	Original Action Date	01/09/2025
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	3	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
The monthly reconciliation of housing rents to the General Ledger are ineffective as the financial data is not being matched from two independent sources of data.		We recommend that a valid rent reconciliation is performed monthly using income reports extracted from two separate independent sources i.e. General Ledger (Agresso) and Housing rent system (CX). Also, a reconciliation statement is prepared on completion to verify the balancing with narrative for any discrepancies investigated and resolved. The document is countersigned, and the final record is saved as a PDF.	
Management Response/Action Details		Status Update Comments	
This is something that was historically done but due to capacity has fell by the waste side. This needs to be re-introduced but whether this is monthly or quarterly basis may differ.		The level debtors and creditors are currently being investigated to understand the difference between CX information and Agresso. Once this has been completed a monthly reconciliation will be re-instated.	

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Job Name	Housing Rental Income 2023-24	Original Action Date	01/04/2027
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	4	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
The weekly cash to rent account reconciliation had not been completed since CX went live in September 2020.		We recommend that training on the cash rent income reconciliation is delivered to the responsible officers as soon as possible to enable the weekly reconciliation to be re-instated.	
Management Response/Action Details		Status Update Comments	
Agreed, however, this is due to not having a finance interface with Agresso and Cx. Fundamental issues with Cx housing management system is preventing this from happening. Re-procurement of a new system is underway and will be operational in 18-24 months' time.		Meetings have been held to understand the process of reconciling accounts, and how often this needs to be done. We are aiming for 01/09/2025 roll out where Housing Assistants will reconcile the account they manage. However, further discussions are needed to reconcile former accounts	

Job Name	Commercial Rental Income	Original Action Date	01/09/2025
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	4	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
Long term rent debts have not been litigated against in a timely manner resulting in the write-off of income.		We recommend that Management Team to be informed of the lack of action by Legal Services with a view of introducing management controls to improve the litigation service.	
Management Response/Action Details		Status Update Comments	
Accepted issues exasperated by lack of resource in both the Legal team and in Land and Property. Recruitment underway in both teams.		N/A	

Job Name	Licensing	Original Action Date	31/10/2025
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	8	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
There were no reconciliations being performed between the income received in the General Ledger (Agresso) and the number of live/active licences on Flare.		We recommend that regular reconciliation between the number of live licences in Flare to the invoices in the Civica Debtor system is undertaken, and appropriate action taken where gaps are identified.	
Management Response/Action Details		Status Update Comments	
The Licensing Team Leader will run reports periodically from Flare and Civica Debtor and reconcile the two resources, to identify any gaps and take action as appropriate.		N/A	

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Job Name	Licensing	Original Action Date	31/10/2025
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	9	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
The Licensing fees have not been reviewed/updated since 2019-20. A review of the Licensing budget showed the function was in budget deficit in the past three years, which could indicate that full cost recovery was not being achieved.		We recommend that the Licensing fees should be reviewed at regular intervals to ensure full cost recovery is being achieved and compliance with the relevant fees regulations.	
Management Response/Action Details		Status Update Comments	
The fee review process is scheduled to commence this year, and a 1st draft document to be ready for presenting to the relevant body by October 2025.		N/A	

Job Name	Grounds Maintenance	Original Action Date	01/04/2026
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	2	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
There was no reliable evidence to confirm that checks were made to ensure that works had been completed, prior to contractor payments being made.		We recommend that the Parks Team select a random sample of scheduled jobs claimed to be completed each month and conduct a site inspection supported by photographs to provide assurance that works have been completed and quality standards are met, to substantiate contractor payments.	
Management Response/Action Details		Status Update Comments	
This will take the form of an adaptation of the current KPI sheet we currently report on, but we are looking to develop it as a tablet-based version for ease of use in the field.		N/A	

Job Name	Grounds Maintenance	Original Action Date	01/04/2026
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	4	Recommendation Status	Future Action
Summary of Weakness		Recommendation	
A photo audit trail of work completed, a key contractual obligation allowing desktop monitoring of performance, was not being fully provided. Furthermore, where images were provided, there was no metadata on the uploaded images to verify date and time taken.		We recommend that a post completion photograph is uploaded as a minimum, with a date and time stamp. We also recommend that the level of jobs deemed to be completed with nil photos is monitored and the Council considers pausing contract payments until reasonable photographic evidence has been provided in accordance with the contract.	
Management Response/Action Details		Status Update Comments	
We have requested that pre & post photographs are taken of each task completed. However, the nature of the data identifies multiple entries for each task & makes such unacceptably onerous. We have agreed that single instances for each task will be acceptable & that the date/time stamp of the recoding system is utilised.		N/A	

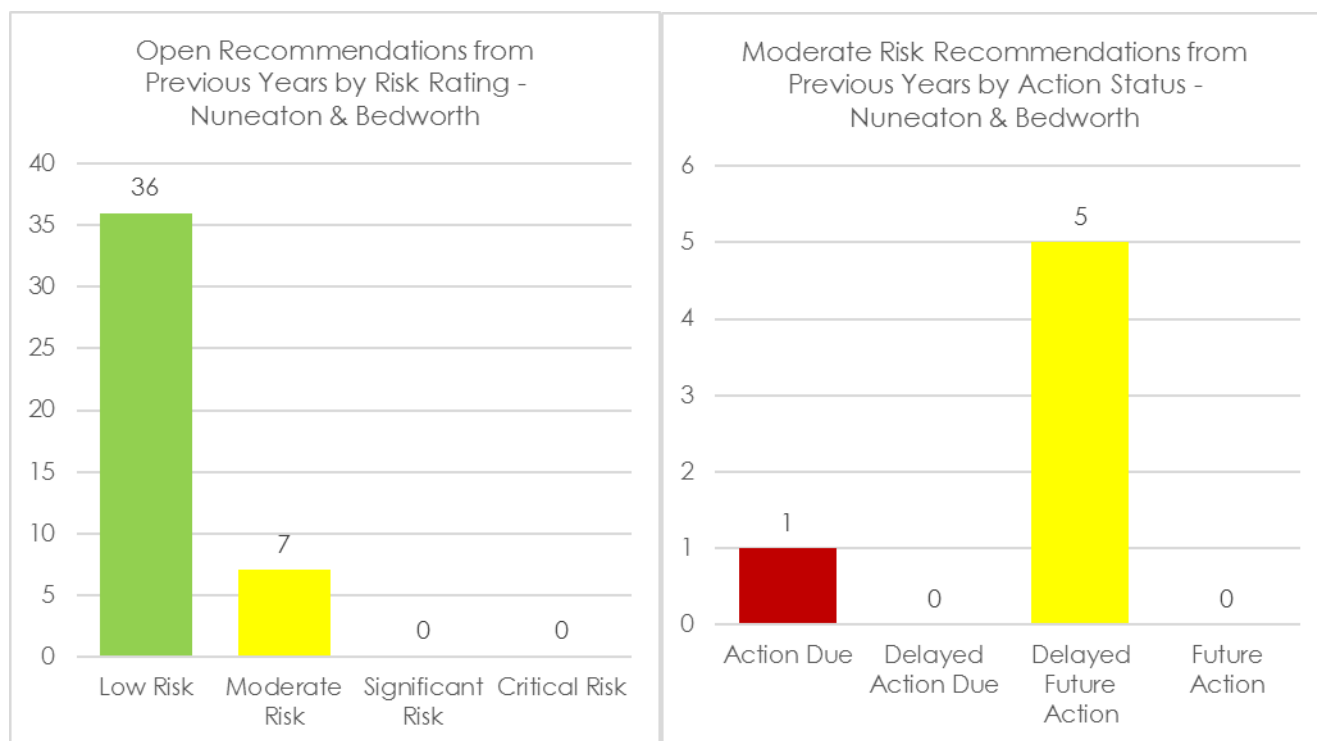
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Outstanding Audit Recommendations from Previous Years

The introduction of the K10 Vision audit management system will provide the Council's managers with direct access to update recommendations with update information. This will provide greater transparency of outstanding recommendations and will no doubt result in prompt positive action being taken to close several long-standing recommendations. As this new process embeds itself within the Council's governance framework, it is hoped that the continued oversight on timely implementation of audit recommendations will further strengthen the overall management of risks at a service level.

As stated previously, we are undertaking an exercise with senior management to establish an update position on audit recommendations perceived to be still outstanding. Time limitations have prevented us from completing this exercise in full, but we have established a clearer picture of the current situation.

In summary, the following recommendations from previous years were still showing as outstanding:



Key Audit Recommendations Still Open from Previous Years

The following moderate risk recommendations, are examples of recommendations made in previous years, are still to be addressed:

Job Name	Cemeteries & Crematorium Income	Original Action Date	31/03/2023
Risk Rating	Moderate Risk	Revised Action Date	N/A
Recommendation No.	6	Recommendation Status	Action Due
Summary of Weakness		Recommendation	
There is a significant risk that historic cemeteries records held on the paper book ledgers as well as data held on the standalone EPILOGUE system (currently unsupported by IT) could become inaccessible should a disaster occur at the Town Hall. The recently appointed Cemeteries Officer has only now been set up with access to EPILOGUE. At present reliance is being placed on another member of the Team		It is imperative that data from the cemeteries paper ledgers is transferred onto the EPITAPH database as soon as possible to avoid the risk of statutory burial data being permanently lost in unforeseen circumstances.	

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(who is now working as a casual administrative assistant), to retrieve any missing data from the old system as and when required, but this arrangement is not ideal and could present a business continuity risk.	
Management Response/Action Details	Status Update Comments
This is subject to available resources within the Cemeteries Team, beyond those required for routine service delivery. This will require an officer with knowledge of the cemeteries processes, incl. both the current & previous software systems & an understanding of the ledger records.	Alternative methods of capturing the data (e.g., scanning) are being explored.

Job Name	Cemeteries & Crematorium Income	Original Action Date	31/03/2023
Risk Rating	Moderate Risk	Revised Action Date	31/12/2025
Recommendation No.	8	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
<p>Lack of 2.5 years rent income for Crematorium valuing approximately £362.5k due lessee's Dignity Plc.</p> <p>The Council should be receiving market rent income from March 2020 onwards in line with the lease agreement though due to the COVID pandemic, there appears to be a delay on the formal valuation by the District Valuer. To enable Finance to account for an income reserve, the Head of Estates was requested to estimate a rent value, and this was confirmed as £145k per year back in 2021.</p> <p>Since then, there appears to be no progress made by Estates with Dignity to agree an interim rent sum, and the suggestion made by Finance to raise an invoice 'on account' for a larger value until such time as actual market rent value is determined has not been considered. At present, the Council are receiving a rent sum of £5k per annum (£1250 per quarter) based on the expired rent value, so there is a annual shortfall of approximate £140k rental income.</p>		<p>The Head of Estates to respond urgently on this unresolved matter to either formally claim the rent income due or enable Finance to make the appropriate provisions in the account.</p>	
Management Response/Action Details		Status Update Comments	
Agreed		<p>This is currently with the District Valuer who are looking to arrange a meeting with the other side this month, the issue they have had is providing evidence to support a valuation. Hopefully the meeting will help progress the situation and we will continue to chase.</p>	

Job Name	Cemeteries & Crematorium Income	Original Action Date	31/03/2023
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation No.	9	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
<p>The Council's Building A Better Borough (BABB) document outlines the strategic view on identifying potential land for future burials. The action deadline has been set for March 2023 where a formal report is to be presented to Cabinet. Discussions with the Head of Planning showed that the Council's search for a suitable cemetery land for Nuneaton is still continuing as the previously identified land at Eastboro Way has been deemed not viable. The Borough Plan (BP) review is currently out for consultation, which includes land options. The next stage of the BP review is a 'Publication consultation' which is planned to be consulted upon in</p>		<p>Management to advise on the current status to ensure that the target will be met for the key action outlined in the DOF.</p>	

Nuneaton & Bedworth – Internal Audit Annual Report 2024-25

January 2022. It is understood that the Director – PS has scheduled meetings with the HEEP, Director - PR, and Head of Planning to agree on a collective approach to deal with this matter.	
Management Response/Action Details	Status Update Comments
Agreed	Service Director liaising with Cabinet Members on steer. Current request is looking to extend lawn burial plots at Oaston Rd, Bucks Hill and Attleborough Cemetery sites. External feasibility underway to review what these sites could support re extra plots. Once known Cabinet to determine way forward and use of Martston Lane as longer-term solution. NB. the Council does NOT have to provide burial space for residents it is a political decision to confirm way forward.

Job Name	Mobile Phones	Original Action Date	01/09/2022
Risk Rating	Moderate Risk	Revised Action Date	30/09/2025
Recommendation No.	2	Recommendation Status	Delayed Future Action
Summary of Weakness		Recommendation	
There was no monitoring process in place over the mobile phone usage as call usage reports have not been provided to Line Managers for scrutiny/review. Therefore, any unusual/high spend would not be picked up during the budget monitoring process. However, audit review of the itemised call reports identified three staff where usage had incurred additional call charges. Further scrutiny highlighted the following two staff where calls were inappropriate as these were made to enter a personal cash win competition.		The mobile phone bills should be regularly reviewed/scrutinised for any unusual spend/costs incurred, and relevant staff should be reminded on the need to ensure that the Council's policy is adhered to, and appropriate action taken to address improper use.	
Management Response/Action Details		Status Update Comments	
A chaser email had been sent to Virgin regarding the monitoring and exception reports, however no response has been received. A further follow up email is due to be sent.		A review was undertaken in 2024/25 and the number of mobile phones has been reduced significantly. Further work around the policy wording and requirements will be undertaken in 2025/26 financial year.	

Conclusion

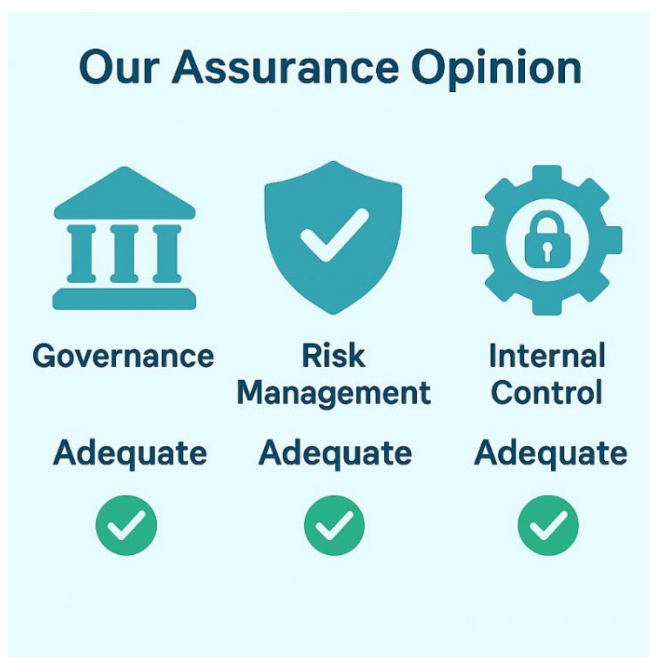
Reasonable Assurance

The framework of governance, risk management and control is generally adequate and effective, although some improvements are required. Most systems and processes are well designed and operating effectively, but a small number of moderate risk issues were identified that require management attention.

It should be recognised that the limitations in audit coverage reduce the level of confidence that can be placed in the assurance level we have provided in respect of governance, risk management and control arrangements across the Council as a whole.

Internal Audit coverage detailed in the 2025-26 Audit Plan will allow us to gain further assurance over areas where we currently have limited knowledge or evidence to demonstrate that a sound framework of governance, risk management and internal control exists which is operating effectively.

The audit work completed during 2024-25 supports the conclusion that the Council continues to operate a generally sound system of internal control. Continued focus on recommendation implementation to mitigate weaknesses in control will ensure that the Council can respond to financial and operational challenges going forward.



Prepared by:



Adrian Manifold

Chief Audit Executive / Audit Manager

26th August 2025

Appendix A - QAIP – Improvement Plan

One of the outcomes of the CMAP Quality Assurance and Improvement Programme is that it enables an assessment of the efficiency and effectiveness of the Internal Audit activity and identifies opportunities for improvement.

The CMAP Leadership team revise the QAIP on an annual basis, with regular reviews of the progress on actions throughout the year. The QAIP is a standing item on all CMAP team meeting agendas, on the Operational Group meeting agendas and is reported to Partner Audit Committees. The latest Improvement Plan that was in place during 2024-25 is shown below.

Actions	Update Position
1. We should ask staff to complete a Personal Development Plan as part of our overall Training & Development Plan for the Team.	Currently we only have individual development plans. We are looking at how best to convert this into a CMAP Training & Development Plan. No progress due to other higher priorities.
2. We should formally develop our approach around the use of data analytics and other CAATs and identify the benefits it could bring to the audit processes.	Strategy for the use of data analytics within CMAP has been drafted.
3. We should continue to develop the process for incorporating other assurance information into our overall risk assessment process and our overall opinion and how the other assurance provider information we gather can be used to demonstrate an audit assurance framework for each partner organisation. We also need to get all Partners interested in producing their own Assurance Maps.	This approach may need to vary for each partner. All are at different stages in relation to what they are doing on assurance mapping and what CMAP can use in its process. A consultancy piece of work on assurance mapping has been assigned at Derby CC but is on hold due to lack of engagement from key officers.
4. To support the improvement of the organisation's governance framework, we should undertake consultancy work to facilitate the self-assessment of the effectiveness of the Audit Committee at all partner organisations. This will be particularly important given the proposed changes to the composition of Audit Committees with the addition of co-opted/ independent members.	Support is currently provided at four partners to help them assess the effectiveness of their audit committees.
5. We should consider how we could systematically evaluate the potential for the occurrence of fraud at each partner organisation and how each organisation manages fraud risk.	No progress made on a formalised approach. However, other work and audit work informs our knowledge on this.
6. To review all CMAP reports that are to be published to assess compliance with the Web Content Accessibility Guidelines (WCAG).	This is being assessed as part of the development of two automated report templates (the Audit Assignment Report and the Internal Audit Progress Report) within the K10 Audit Management System.
7. To fully implement the K10 Audit Management System.	We are currently parallel running K10 and the old AMS until the automated Internal Audit Progress Report is fully operational.
8. To assess conformance with the new Global Internal Auditing Standards in the UK Public Sector and adjust our practices where necessary.	A gap analysis exercise is underway.

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	9 th September 2025
Subject:	Treasury Management Update 2025/26
Portfolio:	Not Applicable
Responsible Officer:	Finance Manager - Treasury
Ward Relevance:	All
Public or Private:	Public
Forward Plan:	Not Applicable
Subject to Call-in:	Not Applicable

1. Purpose of Report

- 1.1. The Council is required through the CIPFA Code of Practice on Treasury Management (the Code) and the CIPFA Prudential Code for Capital Finance in Local Authorities (the Prudential Code) to report to full Council a mid-year review.
- 1.2. This report sets out the Council's treasury position as at 30th June 2025 and therefore any decisions made after this date are not reflected in this report.

2. Recommendations

- 2.1. That it be recommended to Council that the Treasury Management Report for 2025/26 – Quarter 1 Review be noted.

3. Background

- 3.1. The Council operates a balanced budget, which broadly means cash raised during the year will meet cash expenditure. Part of the purpose of treasury management operations is to ensure cashflow is planned, with surplus monies being invested in low-risk counterparties, providing adequate liquidity to meet cashflow before considering optimising investment returns.
- 3.2. The second main function of the treasury management service is the funding of the Council's capital plans. These capital plans provide a guide to the borrowing need of the Council, essentially the longer-term cash flow planning to ensure the

Council can meet its capital spending operations. This management of longer-term cash may involve arranging long or short-term loans, or using longer-term cash flow surpluses, and on occasion any debt previously drawn may be restructured to meet Council risk or cost objectives.

3.3. Accordingly, Treasury Management is defined by the Chartered Institute of Public Finance and Accountancy's (CIPFA) Code of Practice as: "The management of the local authority's borrowing, investments and cash flows, its banking, money market and capital market transactions; the effective control of the risks associated with those activities; and the pursuit of optimum performance consistent with those risks."

3.4. This report has been written in accordance with the requirements of the CIPFA's Code of Practice for Treasury Management. The primary requirements of the Code are as follows:

- i.) Creation and maintenance of a Treasury Management Policy Statement which sets out the policies and objectives of the Council's treasury management activities.
- ii.) Creation and maintenance of Treasury Management Practices which set out the way the Council will seek to achieve those policies and objectives.
- iii.) Receipt by the full Council of an annual Treasury Management Strategy Statement – including the Annual Investment Strategy and Minimum Revenue Provision Policy – for the year ahead, a Mid-year Review Report (this report) and an Annual Report covering activities during the previous year.
- iv.) Delegation by the Council of responsibilities for implementing and monitoring treasury management policies and practices and for the execution and administration of treasury management decisions.
- v.) Delegation by the Council of the role of scrutiny of treasury management strategy and policies to a specific named body. For this Council, the delegated body is the Audit & Standards Committee.

3.5. This mid-year report has been prepared in compliance with the Code and covers the following:

- An economic update for the first three months of 2025/26.
- A review of the Council's investment portfolio as of Q1 2025/26.
- A review of the Council's debt portfolio as of Q1 2025/26.
- A review of any debt rescheduling undertaken during 2025/26.

4. Economic Update for Q1 of 2025/26

- 4.1. The Council's in-house team of qualified finance staff monitor and maintain the Council's Treasury Management activity in line with the Council's Strategy. The Council employs Link Group as its treasury management advisor and officers hold regular meetings with them concerning existing and future potential economic circumstances regarding both investments and short/long-term borrowing.
- 4.2. The first quarter of 2025/26 saw:
- UK GDP fell 0.3% m/m in April, the first fall since October 2024.
 - CPI inflation eased to 3.5% in May 2025 down from 3.8% in April.
 - The Bank of England cut the Base Rate to 4.25% in May (from 4.50%) and held the rate steady in the June Monetary Policy Committee (MPC) meeting.
- 4.3. The consequence of the above is that PWLB rates (Public Works Loan Board) have fallen slightly since our last update. PWLB 5 to 50 years Maturity Rates are, generally, in the range of 4.00% to 5.32%. The PWLB rate is linked (but not directly) to the rate that similar Gilts are traded at. If the cost of Gilts increases or decreases, it will affect the PWLB rate. Reducing the Base Rate can also assist with reducing the Gilt Rate.
- 4.4. The US President introduced a series of Tariffs on international goods in April 2025. This caused a fears of a potential trade war and a drop in the FTSE, however as this was de-escalated, the FTSE 100 closed 2% higher at the end of June compared to the beginning of April. There could still be future issues caused by international trade increasing interest rates around the world, and the latest US Budget Bill is likely to increase the US Debt (meaning that there is more competition for Gilts/US bonds and therefore higher interest rates for both).
- 4.5. Our Treasury Advisors at the end of June had the view that the markets have built in decreases in the long-term gilt rates, but there are some differences in opinions on when a rate cut will occur meaning some variances in the short-term gilt market which will affect short-term borrowing and the rates of any Money Market Funds (MMFs).
- 4.6. Overall, there are predicted improvements to the UK economy, which will lead to reductions of the Bank of England Base Rate however the speed and amount of them will change, especially as inflationary pressures both at home and internationally will affect both the short term and long term PWLB rates. At the 30th June, it was expected that the MPC would reduce the Base Rate in the August meeting.

5. The Council's Investment Portfolio as at 30th June 2025

5.1. The Treasury Management Strategy Statement (TMSS) for 2025/26, which includes the Annual Investment Strategy, in accordance with the CIPFA Treasury Management Code of Practice, it sets out the Council's investment priorities as being:

- Security of capital
- Liquidity
- Yield

5.2. A list of all investments held as at 30th June 2025 is shown below:

Counterparty	Amount Invested	Deposit Period	Maturity Date	Interest Rate
Fixed Term Deposit:				
West Mercia Police and Crime Commissioner	£5.0m	2 Weeks	Jul 2025	4.28%
Total Fixed Term Deposits	£5.0m			4.28%
Notice Accounts:				
Total Notice Accounts	£0.0m			N/A
Property Funds				
CCLA Local Authority Property Fund	£2.0m	N/A	N/A	3.90%
Total Property Funds	£2.0m			3.90%
Money Market Funds:				
Federated Prime Rate	£10.0m	N/A	N/A	4.26%
Goldman Sachs	£2.0m	N/A	N/A	4.23%
Total Money Market Funds	£12.0m			4.25%
Instant Access/Call Accounts				
Lloyds Bank (Current Account)	£4.05m	Overnight	N/A	4.15%
Total Instant Access	£4.05m			4.15%
Total Investments	£23.05m			4.21%

5.3. The current investment counterparty criteria selection approved in the TMSS is meeting the requirement of the treasury management function.

6. The Council's Debt Position as at 30th June 2025

6.1. The Council's borrowing activity for the first 3 months of the financial year can be summarised as follows:

- No new loans were taken out
- £0.0m of debt matured
- £62.705m of debt is outstanding as at 30th June 2025 at an average rate of 3.64%. There are five loans due to be repaid in 25/26 totalling £12.0m

6.2. Due to the high interest rates, the Treasury Team is minimalising the amount of new external debt that the Council is undertaking and are waiting for the rates to drop unless there is a cashflow reason for processing a loan. The treasury team will choose maturity dates that minimise interest rates whilst still meeting the Council's Prudential Indicators.

6.3. The Council's Debt Position as at 30th June 2025 is shown below:

Borrowing	2025/26 Opening Balance £m	Balance as of 30 th June 2025 £m	2025/26 Closing Forecast £m
General Fund			
PWLB	6.75	6.75	31.75
Market LOBO	2.00	2.00	2.00
HRA			
PWLB	53.96	53.96	63.96
Total	62.71	62.71	97.71

7. Debt Rescheduling

7.1. Debt rescheduling opportunities have been very limited in the current economic climate and following the various increases in the margins added to gilt yields which have impacted PWLB new borrowing rates. No debt rescheduling has therefore been undertaken to date in the current financial year, and no debt rescheduling is planned in the foreseeable future.

7.2. The Council is currently breaching their Debt Maturity limits when the full Debt of both the General Fund and the HRA is considered. This is mainly due to HRA debts that were transferred from Central Government to the Council in 2011/12 which are expecting to mature in the next 5 years.

7.3. Part of the reason for the breach has been the use of internal borrowing over the last few years. Whilst making financial sense due to the high interest rates, this has indirectly led to the breach as the Council is not borrowing more long-term debt, and therefore the percentage of debt that is maturing shortly is higher. As the CPR figure earlier showed, the Council has more capacity for debt and therefore this is not as much a problem as if we were over-borrowed.

7.4. It should be noted that breaching these limits does not cause financial harm directly to the Council but should be taken as a warning that close management of the debt structure should be taken into consideration. New loans should be managed to ensure that the repayment of loans does not cause the Council financial difficulties, and that the amount borrowed meets the Councils financial requirements (e.g. no breaches of the Capital Financing

Requirement (CFR) are planned unless borrowing in advance for better interest rates).

- 7.5. The Council is expecting to use external borrowing later this year, which should assist with correcting the Debt Maturity breach, even if you include the HRA figures.

Total Debt Maturity Profile				
Debt Maturity within	£m	% of Total Debt	% of Running Total Debt	% for Lower and Upper Limit of Debt
Under 1 Year	12.0	19.1%	19.1%	0%-35%
1 -2 Years	10.0	15.9%	35.1%	0%-40%
2-5 Years	24.2	38.6%	73.7%	0%-50%
5-10 Years	8.5	13.6%	87.2%	0%-60%
10-20 Years	4.0	6.4%	93.6%	0%-70%
20-30 Years	0.0	0.0%	93.6%	0%-80%
30-40 Years	2.0	3.2%	96.8%	0%-90%
Over 40 Years	2.0	3.2%	100.0%	0%-100%
Total Debt	62.7	100.0%	100.0%	

- 7.6. If we look at just the General Fund Debt, there is no breach of the Debt Maturity limits. There is also room for capital loans in the 5-10 year region if needed, but this would have to be evaluated over the Council's priorities and the expected lifespan of the asset linked to the capital spend.

General Fund Debt Maturity Profile				
Debt Maturity within	£m	% of Total Debt	% of Running Total Debt	% for Lower and Upper Limit of Debt
Under 1 Year	2.0	22.2%	22.2%	0%-35%
1 -2 Years	0.0	0.0%	22.2%	0%-40%
2-5 Years	2.0	22.2%	44.4%	0%-50%
5-10 Years	0.0	0.0%	44.4%	0%-60%
10-20 Years	1.0	11.1%	55.5%	0%-70%
20-30 Years	0.0	0.0%	55.5%	0%-80%
30-40 Years	2.0	22.2%	77.7%	0%-90%
Over 40 Years	2.0	22.2%	100.0%	0%-100%
Total Debt	9.0	100.0%	100.0%	

8. Other Issues

8.1. Technical Breach of limits

On the 1st April 2025, The Council breached its technical limit by £15,862.75. This was caused by holding £10,015,862.75 in its current account at the end of the day. The limit for the Council's current account is £10,000,000. This breach occurred as unexpected funds were received during the day after the Treasury

dealing was completed. The Treasury team had left a £90,000 buffer to allow for extra funds to be received, but this was unexpectedly insufficient. As there was no location for the funds to be moved to (no counterparties were available to move the funds once the breach was noticed), the Council was forced to breach its limit overnight. On the 2nd April 2025, this breach was rectified, and no further breaches have occurred. There is no financial impact to the Council due to this breach. This breach was previously reported in June 2025 as part of the 2024/25 Treasury Annual Report.

8.2. Post Q1 Update

Since 30th June 2025, PWLB rates have risen to a range of 5.06-6.36%. This is partly due to the Bank of England increasing the number of longer-term gilts but also because the normal counterparties (Pension Funds and Insurance Companies) preferring shorter-term gilts increasing the price the Bank of England needs to pay. Based on this our Treasury Advisors have recommended that Councils should borrow short term and refinance those loans as they expire. They have also reevaluated their assumption that the long-term PWLB loan rate would fall as quickly as previously forecast. The over 25 year PWLB loan rate will still fall but at a slower rate.

There has also been a decision by the MPC to reduce the Bank of England Base Rate to 4.00% on the 7th August 2025. This was the closest vote yet with the first vote failing to make a clear decision, and a second vote was needed, which ended up changing the rate from 4.25% at 5-4.

With such a close vote, and a large proportion of the Committee voting to hold the rate at 4.25%, it is likely the BoE Base Rate will stay at 4.00% for the rest of the year. This (with the above change in how the Pension and insurance companies are investing) will likely mean that over 25 year Gilts and PWLB loans will be at a higher rate for longer.

9. Conclusion

- 9.1. That Audit & Standards Committee is recommended to note the Treasury Management 2025/26 Quarter 1 review

10. Appendices (if none, state none)

- 10.1. None

11. Background Papers (if none, state none)

- 11.1. None

AGENDA ITEM NO. 10

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: Audit and Standards

Date of Meeting: 9th September 2025

Subject: Local Government and Social Care
Ombudsman Annual Report 2024/2025

Portfolio: Central Operations

Responsible Officer: Customer Experience and Data Protection
Officer

Corporate Plan – Theme: Your Council

Corporate Plan – Aim: YC1 – Delivering Services Effectively

Ward Relevance: All

Public or Private: Public

Forward Plan: Not applicable

Subject to Call-in: Not applicable. Not for Cabinet, not an
Executive Decision.

1. Purpose of report

- 1.1. The report provides the committee with the annual summary of the complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2025.

2. Recommendations

- 2.1. It is recommended that:
- 2.1.1. The report be noted.

- 2.1.2. The Committee acknowledge the value of the information provided, which offers insight into how Nuneaton and Bedworth Borough Council approaches complaints.
- 2.1.3. The committee note the forthcoming changes to the Local Government and Social Care Ombudsman's complaint handling code, expected in 2026, which will align it more closely with the Housing Ombudsman's code.

3. Background

- 3.1. The report comprises of 3 main elements; these are set out below.
 - 3.1.1. Complaints upheld, complaints where fault has been found in Nuneaton and Bedworth Borough councils' actions, including where we have accepted fault before any investigated.
 - 3.1.2. Compliance with recommendations this is a way for us to put things right when faults have caused injustice and monitor their compliance with our recommendations.
 - 3.1.3. Satisfactory remedy provided by Nuneaton and Bedworth Borough Council. In these cases, we upheld the complaint, and we agreed and offered to put things right.
- 3.2. The complaints that have been referred to the Local Government Ombudsman have exhausted our formal complaints process however the complainant is still seeking redress or disagrees with the outcome that we have provided.

4. Body of report and reason for recommendations

- 4.1. Each year, the Local Government and Social Care Ombudsman publishes an annual report which includes data on each local authority detailing complaints received by them for investigation and review. Appendix A and B include the data and the letter for the 2024/2025 period.
- 4.2. In total 24 cases were referred to the Ombudsman from 1st April 2024 to 31st March 2025, this compares to 41 cases in the previous year resulting in a 41% decrease.

4.3. The 24 cases are broken into the following:

- 4.3.1. 15 cases were assessed and closed;
- 4.3.2. 7 cases were not for the LGO and were rejected or redirected; and
- 4.3.3. 2 cases were investigated and fault found against Nuneaton and Bedworth Borough Council.

4.4. Complaints Upheld: 2 out of 2 complaints or 100% that went onto investigation were upheld, 1 case was for Waste Management and the other case was for Planning and Building Control.

Compliance Outcomes: in 100% of cases we successfully implemented the recommendations that the Local Government Ombudsman requested, this compares to an average of 100% of a similar comparable authority.

4.5. Satisfactory Remedy Decisions: in 50% of upheld cases we provided a satisfactory remedy before the complaint reached the Ombudsman. This compares to an average of 15% in similar comparable authorities.

4.6. Total cases (17) received by the Ombudsman that went to assessment or investigation. For the avoidance of doubt, this is a combination of 4.3.1 and 4.3.3 (15 + 2 = 17).

Date	LGO/ HO	Ombudsman Reference	Complaint Reference	Service Area	Summary
01/09/2024	LGO	23009724	CF541369383	Waste Management	Missed bin assisted collection
14/06/2024	LGO	24001703	CF595263460	Parks	Allotment issues
15/06/2024	LGO	24003331	CF605893143	Parks Ground Main	Mud on car following GM work
15/07/2024	LGO	24003384	CF612392350	Parks Ground Main	Damage to house
13/08/2024	LGO	24005084	CF621020316	CT Charge	CT Discount
23/09/2024	LGO	24008513	CF629073127	Planning	Building Control
24/09/2024	LGO	24009468	CF629272779	Planning	Building Control
14/05/2024	LGO	23014933	n/a	Planning	Building Control
21/10/2024	LGO	24008760	CF639077875	Parks Ground Main	Path not cleared
31/10/2024	LGO	24009867	CF643219361	Planning	Consultation on planning
05/11/2024	LGO	24005945	CF619000071	Planning	Consultation on planning
24/12/2024	LGO	24012392	CF654924647	Housing	Private rented house landlord issues
13/03/2025	LGO	24017858	CF663376751	HEART	DFG Grant

25/03/2025	LGO	24018146	CF652187976	Planning	Planning Meeting
26/03/2025	LGO	24022216	CF689281005	Waste Management	Bin not returned correctly
10/04/2025	LGO	24015783	n/a	Council Tax Liability	Council Tax
02/05/2025	LGO	24018799	CF663261184	Enviro Health	Noise Complaint

4.7. Evidence base: [Nuneaton & Bedworth Borough Council - Local Government and Social Care Ombudsman](#)

4.8. Officers are reviewing its complaint handling code and a separate report and decision is due. Introducing one complaints policy for all housing and non-housing complaints along with an updated compensation policy, and vexatious policy will ensure the Council is aligned with the updated complaints handling code. It also ensures one consistent approach across the Council.

5. [Consultation with the public, members, officers and associated stakeholders](#)

5.1. Internal consultation with officers has been undertaken, both from internal review of processes and escalation to Senior Leadership Team (SLT), as well as Corporate Governance Group (CGG).

6. [Financial Implications](#)

6.1. Where fault is found during a complaint investigation, the Ombudsman can recommend a financial remedy to put the person back in the position they would have been in had the situation not happened, or to recognise time and trouble and/or distress caused. The Council can also award a financial remedy through its own local complaint handling procedure where appropriate. Following investigations from the Ombudsman the following compensation payments have been award £6,150 in the period up to 31st March 2025.

6.2. Failure to maintain standards and compliance with policy and legislation puts the Council at risk of receiving complaints and thus, compensation requests.

7. [Legal Implications](#)

7.1. The Local Government Act 1974 established the Local Government and Social Care Ombudsman and gives the Ombudsman wide powers to investigate complaints about the actions of local government.

- 7.2. The matters in this report comply with the above legislation. This report is a noting report and there are no legal implications directly arising from this report directly
- 7.3. Despite 7.2 above, as the report notes at 2.1.3, the new code is expected in 2026 so the Council will need to comply with the code. A review is underway currently to ensure the Council is aligned with the code. Therefore, legal implications could be realised if the policy is not adopted as this is a statutory/legislative change. This will be for Cabinet to agree once the policy has been reviewed and is ready for approval.

8. Equalities implications

- 8.1. A review has been undertaken, and it has been identified that no assessment is required following consultation and liaison with the appropriate officer.
- 8.2. Ensuring we maintain good complaint handling practice enables our services to be accessible to all and to ensure people are not disadvantaged in any way.

9. Health implications

- 9.1. No specific health implications have been identified following the completion of an impact assessment.

10. Climate and environmental implications

- 10.1. No direct climate and/or environmental implications have been identified.

11. Section 17 Crime and Disorder Implications

- 11.1. No direct Section 17 crime and disorder implications have been identified.

12. Risk management implications

- 12.1. No direct risk management implications have been identified. The Committee should note the decrease in complaints. Complaints are inevitable; however, the Council should do all it can in its day-to-day services and operations to mitigate and limit risk from a financial, legal and reputational perspective. The transparent reporting by

the Ombudsman ensures local authorities appropriately manage complaints which in turn, reduces risk if correctly managed as an organisation.

13. Human resources implications

13.1. No direct human resource implications have been identified.

14. Options considered and reason for their rejection

14.1. In formulating this report and recommendations, the following other options were identified. Reasons for their rejection or why the option and recommendation proposed in section 2 of the report has been selected are outlined below.

Option Ref	Option Title	Reason for rejection or why the option and recommendation proposed in section 2 of the report has been selected
A	Do nothing	<ul style="list-style-type: none"> - Failing to report to the committee goes against the transparency and public sector best duty initiative. The Committee should consider the Council's standards and performance and consider what intervention (if any) is required to improve the standards across the Council. - Failing to improve puts the Council at risk from a financial, legal and reputational perspective. That is why the Council should continually improve its services to mitigate risk of complaints. - We would be in breach of the complaint handling code from April 2026 which could mean that all cases that are investigated we are found at fault.

15. Conclusion

15.1. Although there have been only 2 cases that the Council have been found to be at fault, in both cases if we had

followed the correct process and policies then we would have not been taken to investigation. Although, the committee should not in the planning case we did offer remedy to the complaint prior to the final decision from the Ombudsman which they have noted.

16. Appendices

16.1. Please note the following appendices:

- i. Appendix A – Nuneaton & Bedworth Borough Council - Local Government and Social Care Ombudsman data.
- ii. Appendix B – Annual Letter – 2024 2025

17. Background papers

17.1. Please note there are no background papers attached to this report.

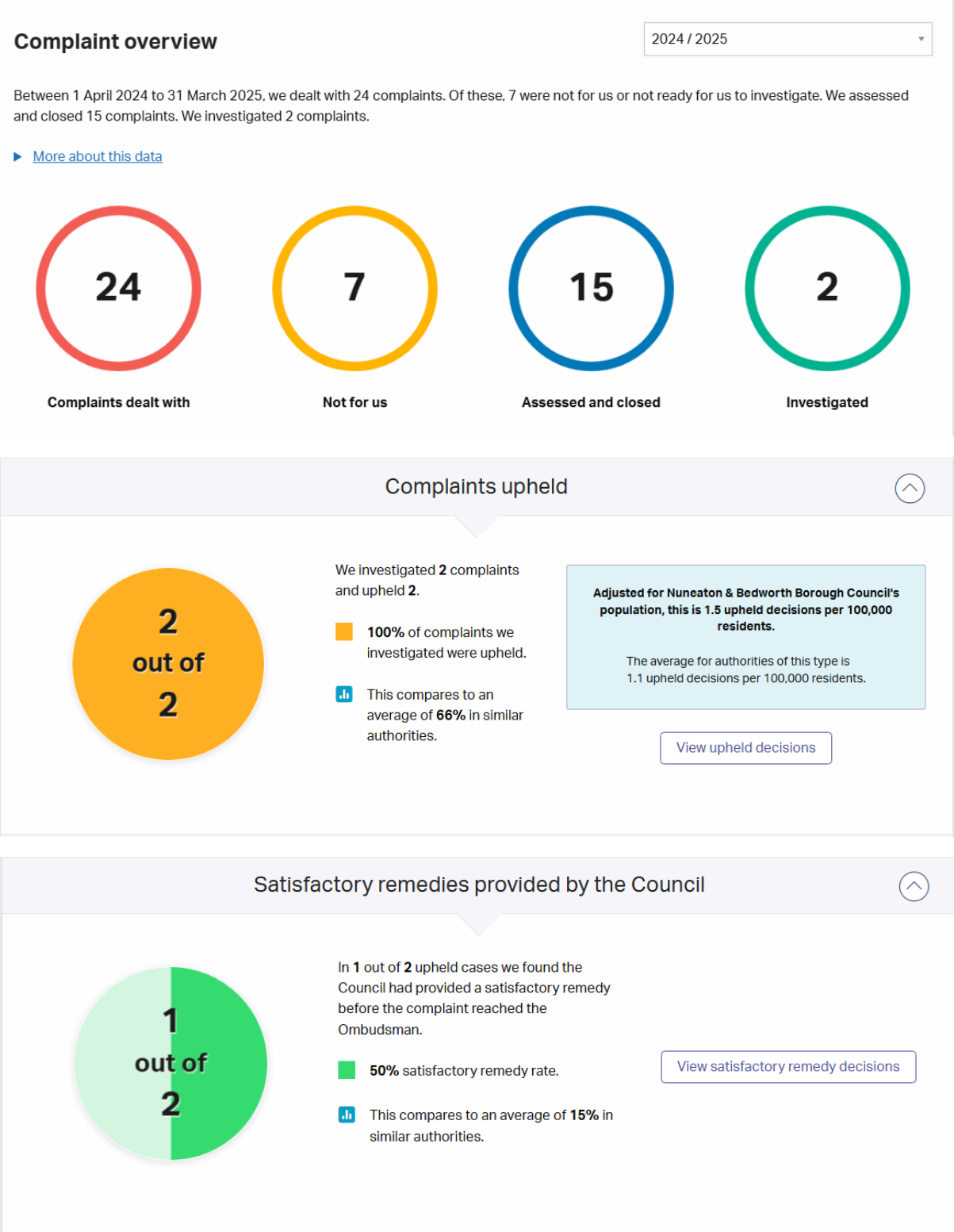
18. Report Writer Details:

Officer Job Title: John Sherratt

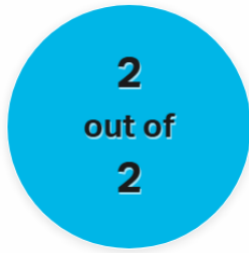
Officer Name: Customer Experience and Data Protection Officer

Officer Email Address: john.sherratt@nuneatonandbedworth.gov.uk

Appendix A - [Nuneaton & Bedworth Borough Council - Local Government and Social Care Ombudsman](#) data



Compliance with Ombudsman recommendations



We recorded compliance outcomes in **2** cases.
In **2** cases we were satisfied with the actions taken.

■ **100%** compliance rate with recommendations.

▮ This compares to an average of **100%** in similar authorities.

Appendix B

21 May 2025

By email

Mr Shardlow
Chief Executive
Nuneaton & Bedworth Borough Council

Local Government & Social Care OMBUDSMAN

Dear Mr Shardlow

Annual Review letter 2024-25

I write to you with your annual summary of complaint statistics from the Local Government and Social Care Ombudsman for the year ending 31 March 2025. The information offers valuable insight about your organisation's approach to complaints, and I know you will consider it as part of your corporate governance processes. We have listened to your feedback, and I am pleased to be able to share your annual statistics earlier in the year to better fit with local reporting cycles. I hope this proves helpful to you.

[Your annual statistics are available here.](#)

In addition, you can find the detail of the decisions we have made about your Council, read the public reports we have issued, and view the service improvements your Council has agreed to make as a result of our investigations, as well as previous annual review letters.

In a change to our approach, we will write to organisations in July where there is exceptional practice or where we have concerns about an organisation's complaint handling. Not all organisations will get a letter. If you do receive a letter it will be sent in advance of its publication on our website on 16 July 2025, alongside our annual Review of Local Government Complaints.

Supporting complaint and service improvement

In February we published [good practice guides](#) to support councils to adopt our [Complaint Handling Code](#). The guides were developed in consultation with councils that have been piloting the Code and are based on the real-life, front-line experience of people handling complaints day-to-day, including their experience of reporting to senior leaders and elected members. The guides were issued alongside free [training resources](#) organisations can use to make sure front-line staff understand what to do when someone raises a complaint. We will be applying the Code in our casework from April 2026 and we know a large number of councils have already adopted it into their local policies with positive results.

This year we relaunched our popular [complaint handling training](#) programme. The training is now more interactive than ever, providing delegates with an opportunity to consider a complaint from receipt to resolution. Early feedback has been extremely positive with delegates reporting an increase in confidence in handling complaints after completing the training. To find out more contact training@lgo.org.uk.

Yours sincerely,



Amerdeep Somal
Local Government and Social Care Ombudsman
Chair, Commission for Local Administration in England

AGENDA ITEM NO. 11

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	9 th September 2025
Subject:	Annual Governance Statement 2024-2025 - FINAL
Portfolio:	Not Applicable
Responsible Officer:	Assistant Director – Governance & Democracy
Corporate Plan – Theme:	Your Council
Corporate Plan – Aim:	Strive for transparency and accountability, in all that we do. Increase public scrutiny
Ward Relevance:	All
Public or Private:	Public
Forward Plan:	Not applicable (not for Cabinet)
Subject to Call-in:	Not applicable (not for Cabinet)

1. Purpose of report

- 1.1. To seek approval of the Annual Governance Statement 2024/2025.

2. Recommendations

- 2.1. To approve the Annual Governance Statement (AGS) for the 2024/2025 financial year enclosed at Appendix A to this report.

3. Background

- 3.1. The production of an AGS is a statutory requirement for local authorities. Regulation 6 of the Accounts and Audit (England) Regulations 2015 states that every financial year a local authority must conduct a review of the system of internal control and prepare an AGS. The AGS must be approved in advance of the relevant authority approving the Statement of Accounts.
- 3.2. The Committee will recall that the draft AGS was submitted for review and comment at the previous committee (24th June 2025).

4. Body of report and reason for recommendations

- 4.1. The AGS must meet the requirements of the revised 2016 Good Governance Framework. The Framework states that the AGS should be prepared in order for the local authority to report publicly on the extent to which it has complied with its own code of governance, including how it has monitored and evaluated the effectiveness of the governance arrangements in the year, and on any planned changes in the coming year. The process of preparing the AGS should itself add value to the effectiveness of the corporate governance and internal control framework.
- 4.2. The AGS should include:
 - 4.2.1. An acknowledgment of responsibility for ensuring that there is a sound system of governance, incorporating the system of internal control, and reference to the Council's code of governance;
 - 4.2.2. Reference to and assessment of the effectiveness of the key elements of the governance framework and the role of those responsible for the development and maintenance of the governance environment, such as the Management team, the Audit & Standards Committee, Internal Audit and others as appropriate;
 - 4.2.3. An opinion on the level of assurance that the governance arrangements can provide and that the arrangements continue to be regarded as fit for purpose in accordance with the governance framework;
 - 4.2.4. An action plan showing actions taken, or proposed, to deal with significant governance issues; reference to how issues raised in the previous year's annual governance statement have been resolved; and

- 4.2.5. A conclusion.
- 4.3. Evidence sources for collating the AGS were as follows:
 - 4.3.1. Consultation with Corporate Governance Group;
 - 4.3.2. Consultation and approval from Corporate Executive Team;
 - 4.3.3. Work undertaken by internal audit and other inspection regimes;
 - 4.3.4. Review of progress against the previous year's AGS action plan; and
 - 4.3.5. Draft AGS reviewed by the Audit and Standards Committee on 24th June 2025 and amendments incorporated in into the final version as enclosed in Appendix A of the report.
- 4.4. Further to the Audit and Standards meeting on the 24th June 2025 which noted the Annual Internal Audit Opinion was not yet finalised, it should be noted that the Annual Internal Audit Opinion has now been finalised and included in section 5a) of the AGS (Appendix A).
- 4.5. Please note, the Action Plan will be routinely reviewed by Corporate Governance Group throughout 2025/2026.
- 4.6. The AGS shall be incorporated into the Statement of Accounts for the 2024/2025 financial year as well.
- 5. Consultation with the public, members, officers and associated stakeholders
 - 5.1. Please see section 4.3 of the report above.
 - 5.2. For the purposes of 4.3.5 of the report, the following amendments made by the Audit and Standards Committee have been incorporated into the final AGS for 24/25:
 - 5.2.1. for more graphics to be included where possible, to make some sections within the document easier to understand visually. This includes a flowchart at section 3.4 of the AGS and a table at section 5 of the AGS under Statement of Accounts for date purposes; and
 - 5.2.2. a clear link be added in the introduction with an overview of the Statutory Services the Council provides, aligning with the Narrative Report provided due to be in the Statement of Accounts.
- 6. Financial Implications

6.1. None directly linked to this report.

7. Legal Implications

7.1. The production of an AGS is a statutory requirement for local authorities. Regulation 6 of the Accounts and Audit (England) Regulations 2015 states that every financial year a local authority must conduct a review of the system of internal control and prepare an AGS. The AGS must be approved in advance of the relevant authority approving the Statement of Accounts.

8. Equalities implications

8.1. Not applicable to this report. It is however noted that effective systems of corporate governance provide assurance on compliance with laws, regulation, internal policies, and procedures.

9. Health implications

9.1. Not applicable to this report.

10. Climate and environmental implications

10.1. No direct climate and/or environmental implications have been identified.

11. Section 17 Crime and Disorder Implications

11.1. No direct Section 17 crime and disorder implications have been identified.

12. Risk management implications

12.1. Failing to have an AGS in place means the Council fails to comply with Regulation 6 of the Accounts and Audit (England) Regulations 2015 and given this is a statutory document that sits alongside the Statement of Accounts, it places additional risk both reputationally and legally, regarding the conduct of the Council in its governance arrangements.

13. Human resources implications

13.1. No direct human resource implications have been identified.

14. Options considered and reason for their rejection

14.1. In formulating this report and recommendations, the following other options were identified. Reasons for their rejection or why the option and recommendation proposed in section 2 of the report has been selected are outlined below.

Option Ref	Option Title	Reason for rejection or why the option and recommendation proposed in section 2 of the report has been selected
A	Not to approve	<p>This would result in the Council being unable to comply with Regulation 6 of the Accounts and Audit (England) Regulations 2015 and as per 12.1 of the report, it places additional risk for the Statement of Accounts given the Statement of Accounts relies upon the AGS for the governance framework.</p> <p>It must also be noted that the AGS have been consulted on and therefore addresses amendments and comments raised both internally from Officers and Elected Members at the previous Audit and Standards Committee.</p>

15. Appendices

15.1. Please note the following appendix:

- i. Appendix A – Annual Governance Statement 2024/2025

16. Background papers

16.1. Please note the draft AGS and report was issued to the previous Audit and Standards Committee on the 24th June 2025 (agenda item 8).

[24 June 2025: Audit and Standards Committee | Nuneaton and Bedworth Borough Council](#)

16.2. Accounts and Audit Regulations 2015: [The Accounts and Audit Regulations 2015](#) (legislation.gov.uk)

17. Report Writer Details:

Officer Job Title: Assistant Director – Democracy and Governance

Officer Name: Matthew Wallbank

Officer Email Address:

matthew.wallbank@nuneatonandbedworth.gov.uk

Appendix A

Annual Governance Statement

For the period 1 April 2024 to 31 March 2025





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1. Introduction

1.1. The Accounts and Audit Regulations 2015 require the Council to prepare an annual governance statement which is ratified by senior management and then approved by the Audit and Standards Committee, as those charged with governance.

1.2. Governance is about how an organisation is directed and controlled to achieve its objectives. It therefore comprises the systems, structures, and values that an organisation has in place to achieve those objectives.

1.3. Good governance:

a) requires that objectives be achieved not only efficiently and effectively but also ethically and in compliance with laws and recognised standards of conduct;

b) ensures that there is a sound system of internal control which facilitates the effective exercise of its functions, and which includes arrangements for the management of risk; and

c) comprises robust systems and sound structures together with effective leadership and high standards of behaviour.

1.4. Key Priorities:



Live	Work	Visit
<ul style="list-style-type: none"> • Promote residents' health and wellbeing • Enable appropriate housing development • Sponsor a sustainable green approach • Prioritise community safety and empowerment 	<ul style="list-style-type: none"> • Grow a strong and inclusive economy • Champion education skills • Embrace new and emerging technology • Support local businesses 	<ul style="list-style-type: none"> • Create vibrant and diverse town centres • Stimulate regeneration • Celebrate and promote our heritage • Improve the physical environment

1.4.1. Whilst the Council had the key priorities as set out in its corporate plan (1.4), the Council has to deliver and provide statutory services to local residents and constituents. Examples of statutory services include but are not limited to:

- Rubbish collection
- Recycling
- Council tax and business rate collection
- Housing
- Planning applications and local plans
- Licensing (such as venues, premises and taxi license matters)
- Environmental health provision
- Leisure centre provision
- Electoral registration office.

Further information regarding the Council and Borough can be found in the Statement of Accounts which shall be located on the Council website: [Financial information 2024 to 2025 | Nuneaton and Bedworth Borough Council](#)

1.5. Delivering the key priorities requires good governance - for our residents, employees, businesses, service users and councillors. Our Corporate Plan provides the building blocks to our success. Supporting the Plan are number of strategies and policies showing how we will deliver our ambitions, and our 'Local Code of Governance' sets out the seven principles of good governance. The Local Code of Corporate Governance is consistent with the principles of the Chartered Institute of Public Finance and Accountancy and the Society of Local Authority Chief Executives and Senior Managers (CIPFA/SOLACE) joint framework for delivering good governance in local government.

- Behaving with integrity and in accordance with our core values.
- Being open and ensuring effective engagement takes place.
- Working together to achieve our intended outcomes.
- Setting goals for economic, social, and environmental benefits and reaching them.
- Growing our capacity – including our leadership and the people who work with us.
- Managing risks and performance through robust internal control and strong financial management.

- Implementing good practice in transparency, reporting and audit – delivering effective waccountability.

1.6. With ongoing global emergencies and conflicts, persistent inflation, cost of living pressures and continued increased demand on our services, this has been an incredibly challenging year for Nuneaton and Bedworth Borough Council. Along with other councils up and down the country, we have been operating in an extremely difficult economic environment which has forced us to take some tough decisions with regards to ensuring our financial sustainability.

1.7. Despite these undoubted challenges, we have demonstrated our commitment improve the borough and the services provided by the Council. Please see Section 5 - Effectiveness of our governance in 2024/2025 – an Overview

1.8. Please note, the 2024/2025 Annual Governance Statement is now in a different format to previous Annual Governance Statements prepared by the Council. This is to ensure the level of detail is relevant and set out in a clear way to assist any reader, whether that be a resident, tenant, a 3rd party to review and understand.



2. Opinion - Annual Governance Statement 2024/2025

We are pleased to confirm our opinion that the Council's governance arrangements in 2024/2025 were sound, reviewed and updated to provide a robust and effective platform for achieving the Council's priorities and challenges in 2024/2025.



Councillor Chris Watkins

Leader



Tom Shardlow

Chief Executive Officer

3. Governance at Nuneaton and Bedworth Borough Council

Governance is defined¹ as the framework by which organisations are directed and controlled. It identifies who can make decisions, who has the authority to act on behalf of the organisation and who is accountable for how an organisation and its people behave and perform. It comprises of the systems and processes for the direction and control of the organisation and its activities through which it accounts to, engages with, and leads the community. It enables the organisation to monitor the achievements of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.

The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to identify and prioritise the risks to the achievement of Nuneaton and Bedworth Borough Council's policies, aims and objectives, to evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively, and economically.

We have a duty under the Local Government Act 1999 to improve the delivery of local government services and to make arrangements to secure continuous improvement in the way their functions are exercised, having regard to a combination of economy, efficiency, and effectiveness.

The governance framework set out below has been in place at Nuneaton and Bedworth Borough Council for the year ending 31st March 2025.

1 Source: Chartered Governance Institute – UK & Ireland



3.1. Essential elements of governance

- 1. Decision Making**
- 2. Scrutiny and Accountability**
- 3. Financial Management and external audit**
- 4. Managing risks through internal control and internal audit**
- 5. Senior Officers and Statutory Officers**
- 6. Member and Employee Code of Conduct**

1. Decision Making

The Local Government Act 2000 changes the basis of decision making in local authorities fundamentally. It requires the Council to record and keep up to date details of who has responsibility for which decisions, and to make this available to the public. The Council sets the budget and policy framework and the Executive, through the Cabinet, takes the key decisions within that framework unless reserved to a Committee or Officer.

Some decisions are for the Council to make or to delegate. The Council can delegate to Committees, Sub-Committees and officers, or to joint Committees, joint arrangements or other authorities. Those delegations must be recorded in the Council's Constitution which must be kept up to date.

Other decisions are for the Cabinet to make, and it is for the Cabinet to decide whether to delegate the power to make any of those decisions. Only the Cabinet may decide to delegate executive functions to Area Committees, joint arrangements or other local authorities. Where it does so, those delegations must also be recorded in the Cabinet's Scheme of Delegations in Part 3 of the Constitution. Though changes to the Constitution must be made by the Council, changes to the Scheme of Delegations are for the Leader and Cabinet to decide, and must be reported to the Full Council.

Where the power to take decisions is delegated by the Cabinet, the extent of the delegation must be recorded, as must any limitations on the delegated power. Details of the person, body or forum to which the decision is delegated must be recorded, as must the extent of delegation on to others from them.

The Council will issue and keep up to date a record of what part of the Council or individual has responsibility for particular types of decisions or decisions relating to particular areas or functions. This record is set out in Part 3 of the Constitution.

2. Scrutiny and Accountability

Scrutiny provides the legal power for elected members to look into issues of concern for residents or poor performance, holding decision-makers to account for the decisions they are making. Scrutiny is not decision making but acts as a check and balance to the executive, which takes the majority of key decisions on behalf of the Council. The Overview and Scrutiny Panels exist (see Governance Structure – Political Management Arrangements) to scrutinise, monitor and review performance as well as policy, Corporate Plan, Forward Plan, the Council's Strategic Risk Register and the development of the Council's annual budget and reviews.

From an internal perspective, the mechanisms in place as set out in Governance Structure – Internal Organisation Governance, provide means for internal organisation scrutiny and accountability.

3. Financial Management and external audit

Strong financial management is critical to ensuring the financial sustainability and future prosperity of the Council. The Constitution contains the Financial Procedure Rules which set the principles for managing the Council's financial affairs. A set of strategic documents form the second level of financial governance, with a third tier represented by detailed financial instructions to provide clear guidance on the operation of key financial processes. All documents are regularly reviewed and updated to ensure they remain current and fit for purpose, reflecting changes in the external environment and also in the Council itself.

Strategic Documents include:

- Treasury Management Strategy
- Budget for the General Fund and Housing Revenue Account
- Capital Budget
- Medium Term Financial Strategy
- Statement of Accounts

It is clear that not only is Local Government under significant pressure, the UK business and financial industry is as well. The impact of Covid, War in Ukraine, interest rates, national insurance rises and cuts to funding, international political uncertainty and poor management to name a few, are all challenges faced across the Local Government landscape. This has led to major failings in other councils widely known across the United Kingdom which presents an uncertain future.

The External Auditor is legally required to satisfy themselves that the Council has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources. They would report to the Council, and specifically the Audit and Standards Committee, if any significant matters came to their attention.

4. Managing risks and internal audit

Nuneaton and Bedworth Borough Council (NBBC) recognises that it has a responsibility to manage risks, both internal and external. It is therefore committed to maintaining robust risk management and business continuity arrangements that make a positive contribution towards the achievement of the Council's corporate aims and priorities and maximise the opportunities to achieve its vision.

The Council's aims with respect to risk management are as follows:-

- To embed risk management into the culture of the Council
- To adopt an effective and transparent corporate approach to risk management, which also applies to the Council's work with external partners and contractors
- To work with partners and stakeholders to identify and exploit opportunities that will contribute to corporate aims and priorities
- To integrate risk management into the operational and management practices of the Council
- To promote risk awareness throughout the Council and among our contractors and key partners
- To be responsive to changing social, environmental and legislative requirements, whilst effectively managing the related risks and opportunities.
- To undertake an annual review of the effectiveness of the risk management arrangements to support the Council's Annual Governance Statement.
- To promote risk awareness throughout the Council and among our contractors and key partners
- To be responsive to changing social, environmental and legislative requirements, whilst effectively managing the related risks and opportunities.
- To undertake an annual review of the effectiveness of the risk management arrangements to support the Council's Annual Governance Statement.

The Council has an adopted Risk Management Policy & Strategy which forms part of the Constitution. Central Midlands Audit Partnership (CMAP) undertakes the required annual self-assessment of the Council's Internal Audit function, against the Public Sector Internal Audit Standards. CMAP reports to the Audit and Governance Committee to approve the audit plan for each financial year, provide updates on progress against the agreed plan and to provide an assessment and opinion based upon audits undertaken. The move to CMAP was reported by the Audit and Standards Committee and approved by Cabinet to ensure resilience in the team but to also gain a wider network of public bodies to link with in terms of efficiency, best value and practice.

5. Senior Officers and Statutory Officers

The Council's management team – comprising the Chief Executive, Strategic Directors and Assistant Directors (including the three Statutory Officers) implement decisions made under the Political Management Arrangements, provides advice to Cabinet and the Council on the development of future policy and budgetary issues and lead service areas to provide services.

Please see section Governance Structure – Internal Organisation Governance below for further information.

There are regular meetings throughout the year of our three Statutory Officers otherwise known as the 'golden triangle' (the Chief Executive/ Head of Paid Service, Chief Finance Officer (otherwise known as the Section 151 Officer) and Monitoring Officer) to review and monitor governance issues. The Chief Internal Auditor also attends to provide updates from an internal audit perspective.

5. Member and Employee Code of Conduct

The Constitution includes two codes of conduct:

- a) Member Code of Conduct – designed to ensure behaviour is consistent with core principles to achieve best value for residents and maintain public confidence in the Council. The core principles include:
 - 1. Selflessness
 - 2. Integrity
 - 3. Objectivity
 - 4. Accountability
 - 5. Openness
 - 6. Honesty
 - 7. Leadership
- b) Code of Conduct for Employees – designed to sets out standards of conduct expected from all employees of the Council. Employees must conduct themselves in a way that ensures a high standard of service is provided and, the reputation of the Council is protected.



3.2. Governance Structure – Political Management Arrangements

a. Full Council – comprised of 38 Democratically Elected Members and is the principal body for determining the Council's budget and setting the Council's Policy Framework. Core duties include:

1. Approval of the budget and policy framework of the Council, as well as any application to the Secretary of State in respect of any Housing Land Transfer.
2. Approval of the Constitution.
3. Approval of the Corporate Plan.
4. Agreeing or amending the Terms of Reference for Committees, deciding on their composition and making appointments to them.

[Council | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

b. Cabinet – comprised of the Leader of the Council, Deputy Leader and four Cabinet Members. Core duties include:

1. Main decision-making body of the Council.
 2. Cabinet functions are set out in the Executive arrangements adopted by the Council. The arrangements may provide for Executive functions to be discharged by:
 - a) the Cabinet as a whole;
 - b) an individual Member of the Cabinet;
 - c) an officer;
 - d) an Area Committee;
 - e) joint arrangements; or
 - f) another Local Authority.
1. Six portfolios exist (a) **Housing**, b) **Environment & Public Services**, c) **Resources & Customer Services**, d) **Planning & Enforcement**, e) **Business & Regeneration**, f) **Leisure, Communities & Health**.)

[Cabinet | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

b. Overview and Scrutiny – comprised of four panels each politically balanced who undertake the work scrutiny work, having regard to the Council's Corporate Objectives. Each panel scrutinise, monitors and reviews performance, policy, Corporate Plan, Forward Plan, the Council's Strategic Risk Register and the development of the Council's annual budget and reviews. The four panels are as follows:

- a) Business, Regeneration and Planning Overview and Scrutiny Panel
- b) Environment and Leisure Overview and Scrutiny Panel
- c) Health and Corporate Resources Overview and Scrutiny Panel
- d) Housing and Communities Overview and Scrutiny Panel.

[Business, Regeneration and Planning Overview and Scrutiny | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

[Environment and Leisure Overview and Scrutiny Panel | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

[Health and Corporate Resources Overview and Scrutiny Panel | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

[Housing and Communities Overview and Scrutiny Panel | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

c. Audit and Standards Committee - comprised of a politically balanced committee membership. Core duties include:

1. Providing assurance to the Council on the adequacy and effectiveness of the governance, risk and control.
2. Approves annual Statement of Accounts and the Annual Governance Statement.
3. Oversees the Council's Councillor Code of Conduct and the overall standards of conduct and ethics of Members.
4. Attended by the Chief Finance Officer (otherwise known as the Section 151 Officer), Monitoring Officer and Chief Auditor.

[Audit and Standards Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

d. Planning Applications Committee - comprised of a politically balanced committee membership. The Committee consider and make decisions on functions relating to Town and Country Planning and Development Control' which cannot be discharged by Council or Cabinet. This includes planning related applications received as the statutory planning authority, unless as per the Constitution, the authority is with the Assistant Director – Planning.

[Planning Applications Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

e. Licensing Committee - comprised of a politically balanced committee membership. The Committee consider and make decisions on applications submitted under the Licensing Act 2003 and Gambling Act 2005. In addition, the Committee consider applications for Hackney Carriage and Private Hire licenses.

[Licensing Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

f. Shareholder Committee - comprised of a politically balanced committee membership. The committee is classified as a sub-committee of Cabinet. Core duties include:

1. Managing the shareholding interests in the Council's trading companies and joint ventures.
2. Appoints and removes directors to the companies, issues best practice guidance and arranges training.
3. Monitors the performance of the companies.

[Shareholder Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

g. Appeals Committee – comprised of elected members who consider the determination of an appeal against any decision made by or on behalf of the organisation with the exception of Planning, Licensing and other such regulatory matters where there is a statutory right of appeal to a body outside the Council.

[Appeals Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

h. Borough Plan Committee - comprised of a politically balanced committee membership, chaired by the Portfolio Holder for Planning & Enforcement. Where applicable, the committee make recommendations to Cabinet as to the content and progress of the local plan.

[Borough Plan Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)

i. Civic Honours Sub-Committee - comprised of a pre-defined list of Elected Members as per the Constitution and chaired by the Leader of the Council. Core duties include:

1. Inviting nominations for Civic Honour awards
2. Agreeing the criteria for awarding Civic Honours
3. Consider and make recommendations to Cabinet and Council for awards

[Civic Honours Sub-Committee | Cabinet and committees | Nuneaton and Bedworth Borough Council](#)



3.3. Governance Structure – Community Board(s)

- a) Simplification Pathfinder Board** - Nuneaton is one of a small group of local authorities invited by the Department of Levelling up Housing and Communities (DLUHC) to pilot a simplified approach to funding delivery, which includes funding from Future High Streets Fund, Towns Deal and Levelling up (round one only). Each of the local authorities involved in the simplification pathfinder pilot received funding from all three funding streams. It was agreed at Full Council that Nuneaton and Bedworth Borough Council will join DLUHCs Simplification Pathfinder Pilot at its meeting held on 6 September 2023, minute number CB39. The objective of the Fund(s) is to drive the economic regeneration of towns to deliver long term economic and productivity growth through:
- a)** Urban regeneration, planning and land use: ensuring towns are thriving places for people to live and work, including by increasing density in town centres; strengthening local economic assets including local cultural assets; site acquisition, remediation, preparation, regeneration; and making full use of planning tools to bring strategic direction and change.
 - b)** Skills and enterprise infrastructure: driving private sector investment and ensuring towns have the space to support skills and small business development.
 - c)** Connectivity: developing local transport schemes that complement regional and national networks, as well as supporting the delivery of improved digital connectivity.

[Simplification Pathfinder Board](#) | [Cabinet and committees](#) | [Nuneaton and Bedworth Borough Council](#)

3.4. Governance Structure – Internal Organisation Governance

During the 2024/2025 Financial Year, the Council updated its internal Governance Structure to align with its internal officer structure. A table has been provided below to outline the structure at the start of the Financial Year vs the end of the Financial Year.

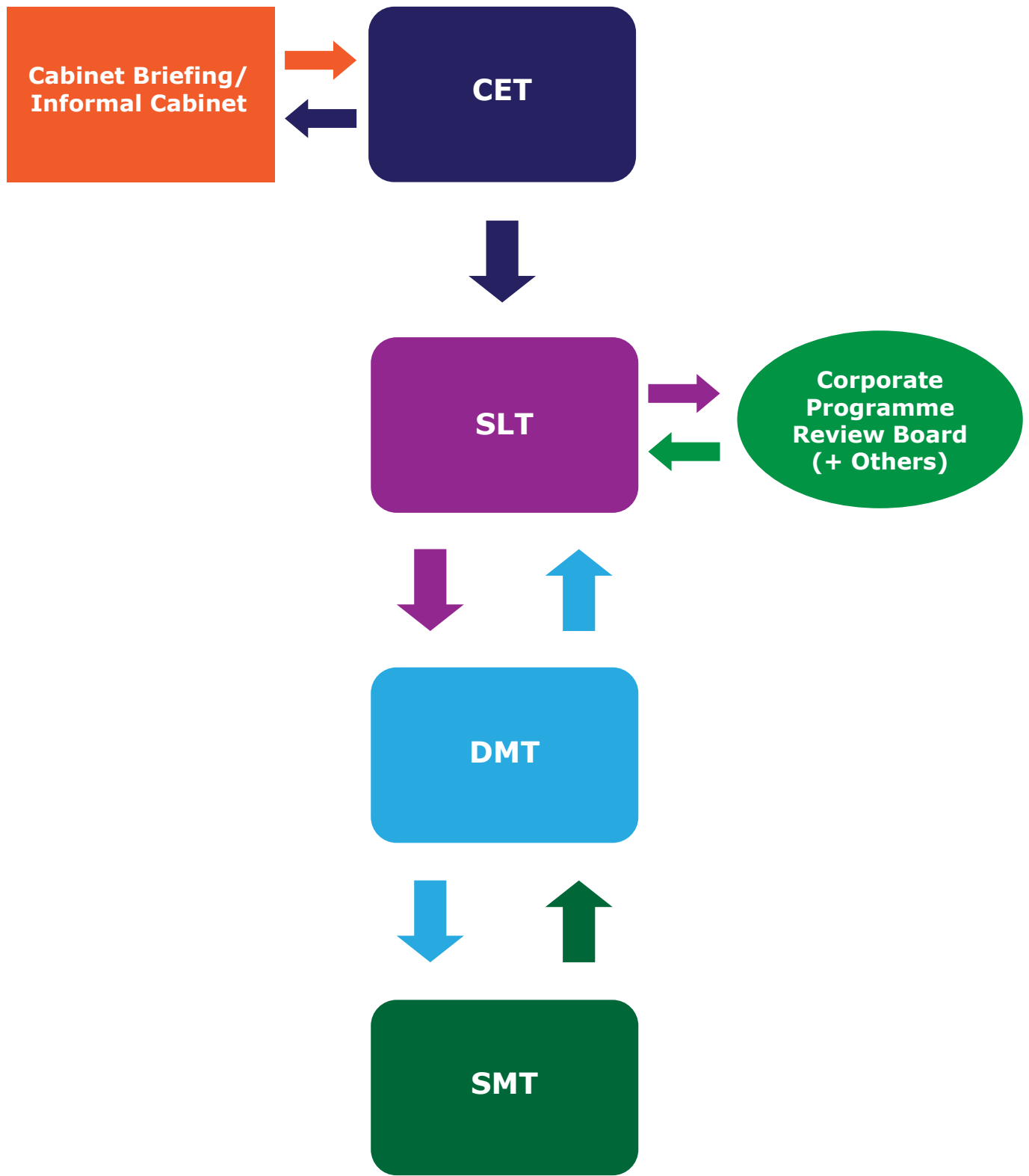
Up to end of October 2024	From November 2024
<p>Management Meetings:</p> <p>Management Team (MT) MT have corporate and strategic responsibilities for achieving the Council's visions and strategies. Membership: Chief Executive Officer, Strategic Directors (one being the Chief Finance Officer/Section 151 Officer), Monitoring Officer Administration: Corporate PA Weekly meeting except one week when EMT convened.</p> <p>Extended Management Team (EMT) MT have corporate and strategic responsibilities for achieving the Council's visions and strategies. Membership: Chief Executive Officer, Strategic Directors (one being the Chief Finance Officer/Section 151 Officer), Assistant Directors, Monitoring Officer Administration: Corporate PA Monthly meeting.</p> <p>Other meetings that took place between Strategic Directors, Assistant Directors and Service Managers took place but no formal structure.</p> <p>Informal Cabinet A meeting to facilitate discussions between MT and members of the Cabinet to discuss forthcoming matters and to provide updates on strategic and operational matters.</p> <p>Membership: Cabinet Members, Chief Executive Officer, Strategic Directors (one being the Chief Finance Officer/Section 151 Officer), Monitoring Officer Administration: Democratic Services Monthly meeting. Not a public meeting as it is not a formal Cabinet meeting and no executive decisions made. The meeting is to facilitate discussion and communication.</p>	<p>Management Meetings:</p> <p>Corporate Executive Team (CET) CET have corporate and strategic responsibilities for achieving the Council's visions and strategies. CET form the highest level non-political board for decision-making. Membership: Chief Executive Officer, Strategic Directors (one being the Chief Finance Officer/Section 151 Officer), Monitoring Officer Administration: Corporate PA Meet once per month.</p> <p>Senior Leadership Team (SLT) SLT will focus on delivery of strategic objectives as set by CET. SLT is designed to provide co-ordination across multiple directorates to ensure delivery of the Corporate Plan where work needs to cut across directorates. SLT will be the key decision-making body for operational changes within the Council, particularly where changes will affect teams across multiple directorates. The majority of business cases will be approved at SLT level. Membership: Chief Executive Officer (chair), Strategic Directors (one being the Chief Finance Officer/Section 151 Officer), Assistant Directors, Monitoring Officer Administration: Corporate PA Meet once per month.</p> <p>Directorate Management Team (DMT) DMT will focus on delivery of strategic and operational priorities within a directorate. DMT will be responsible for scrutinising performance within a directorate and communicating across teams within the directorate. DMT will serve as the first level of scrutiny for all plans ahead of submission to SLT, as well as making decisions around operational changes that will have no/little impact outside the directorate. Membership: Strategic Director and Assistant Directors (Direct Reports) Meet once per month.</p>

	<p>Senior Management Team (SMT) SMT will focus on delivery of service level plans within a single sub-directorate. SMT should provide an environment to share information both up and down the chain, helping to further develop the Council’s “sharing” culture. Membership: Assistant Directors, Service Managers (Direct Reports) Meet once per month.</p> <p>Statutory Officer Meeting *Commenced February 2025. Statutory Officer meetings</p> <p>Informal Cabinet A meeting to facilitate discussions between CET and members of the Cabinet to discuss forthcoming matters and to provide updates on strategic and operational matters. Membership: Cabinet Members, Chief Executive Officer, Strategic Directors (one being the Chief Finance Officer/Section 151 Officer), Monitoring Officer Administration: Democratic Services Monthly meeting. Not a public meeting as it is not a formal Cabinet meeting and no executive decisions made. The meeting is to facilitate discussion and communication.</p>
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<p><u>Key Boards/Officer Working Groups (excludes partnerships):</u></p> <p>Programme Management Consisted of:</p> <ul style="list-style-type: none"> - Corporate Programmes Strategic Board (CPSB) which was the decision making forum to sign off Business Cases. - Four primary programme boards each with a specific remit led by the Senior Responsible Officer to review, monitor and manage business cases pre and post approval. (Business Modernisation & ITC, Corporate Asset Management, Housing Revenue Account, Regeneration). <p>Corporate Governance Group</p> <ul style="list-style-type: none"> • To review the Local Corporate Governance Code and the Corporate Governance Framework • To examine the appropriateness of policies and procedures • To identify any gaps in corporate governance arrangements • To oversee the production of the Annual Governance Statement • Oversee the development of risk management procedures • Promote a positive risk management culture <p>Membership: Assistant Director Democracy and Governance (chair), Assistant Directors, Internal Audit Manager, Data Protection Officer, Head of People and Culture</p>	<p><u>Key Boards/Officer Working Groups (excludes partnerships):</u></p> <p>Corporate Programme Review Board (CPRB) CPRB will provide scrutiny of projects/programmes once approved by SLT. SLT is now the decision making board for business cases and any key and substantial changes. The idea of the board is to monitor performance and ensure that projects stay on track against their stated aims and plans, changes to a project or any significant concerns will be referred back to SLT. Membership: Assistant Director Finance (chair), Assistant Director Central Operations, Assistant Director Democracy & Governance, Transformation (PMO administration) Administration: Transformation</p> <p>Corporate Governance Group – No Change</p> <ul style="list-style-type: none"> • To review the Local Corporate Governance Code and the Corporate Governance Framework • To examine the appropriateness of policies and procedures • To identify any gaps in corporate governance arrangements • To oversee the production of the Annual Governance Statement • Oversee the development of risk management procedures • Promote a positive risk management culture <p>Membership: Assistant Director Democracy and Governance (chair), Assistant Directors, Internal Audit Manager, Data Protection Officer, Head of People and Culture</p>
<p>HASCOG (Health and Safety Coordinators Group) To be accountable to Management Team for all matters pertaining to the effective management of Health & Safety within NBBC.</p>	<p>HASCOG (Health and Safety Coordinators Group) – No Change To be accountable to Management Team for all matters pertaining to the effective management of Health & Safety within NBBC.</p>

For the purposes of the column from November 2024, please see below diagram which sets out a visual graphic regarding the structure and flow of Management meetings.



Statutory Officers & Senior Officers:

Statutory Officers	Senior Officers
Head of Paid Service <ul style="list-style-type: none"> • It is the role of the Chief Executive, also known as the Head of Paid Service, to ensure that all the authority's functions are properly co-ordinated as well as organising staff and appointing appropriate management. Notes: <ul style="list-style-type: none"> - Appointment of a new Chief Executive Officer approved by Full Council February 2024 and taking full responsibility from June 2024. - Appointment of a new Deputy Chief Executive Officer approved by Full Council July 2024. 	Strategic Directors <ul style="list-style-type: none"> • To have full strategic and managerial responsibility for a designated Directorate. • To work with Elected Members, the Chief Executive, other Strategic Directors, Assistant Directors and key strategic partners to develop clear and achievable strategic aims for the Council and help ensure the strategic aims are delivered to the highest possible standards to customers, both internal and external • To ensure the Directorate's activities are carried out at all times in a lawful manner and in adherence with the Council's policies and standing orders.
Section 151 Officer <ul style="list-style-type: none"> • Ensuring Lawfulness and Financial Prudence of Decision Making • Administration of Financial Affairs • Contributing to Corporate Management • Giving Financial Information Notes: <ul style="list-style-type: none"> - no change of Section 151 Officer during the Financial Year. - The Council has a Deputy S151 Officer (Assistant Director – Finance). No Changes during the Financial Year. 	Assistant Directors <ul style="list-style-type: none"> • The principal point of contact for Elected Members for the Service Unit unless business as usual in which case Member Enquiries process is used. • Work closely with the Strategic Director and relevant Cabinet Members to develop and appropriately review strategies and policies within the remit of the Service Unit. • Support the Strategic Director in developing innovative, resilient and sustainable Directorate and service wide strategic objectives, business and project plans (including those which may have wider Council application, including Corporate plans and strategy), ensuring their effective and seamless delivery.
Monitoring Officer <ul style="list-style-type: none"> • Maintaining the Constitution • Ensuring Lawfulness and Fairness of Decision-Making • Supporting the Audit and Standards Committee • Receiving Complaints about Councillor Conduct • Conducting Investigations • Advising whether Executive Decisions are within the Budget and Policy Framework Notes: <ul style="list-style-type: none"> - change of Monitoring Officer made in January 2025, approved by Full Council. - The Council has a Deputy Monitoring Officer (Election and Democratic Services Manager). No Changes during the Financial Year. 	Service Managers <ul style="list-style-type: none"> • Responsible for developing, maintaining, and implementing the Council's governance, risk, and control framework • Contribute to the effective corporate management and governance of the Council • Responsible for budgets within their control and managing employees within their service units.

Audit:

Internal Audit – led by the Central Midlands Audit Partnership following Cabinet approval in March 2024.

- Provides independent assurance and opinion on the adequacy and effectiveness of the Council's governance, risk management and control framework.
- Delivers an annual programme of risk-based audit activity, including counter fraud, investigation and assurance activity.
- Makes recommendations for improvements in the management of risk.
- Reports to the Audit and Standards Committee and provides an overall statement of assurance.

External Audit

Following the Public Sector Audit Appointments national procurement exercise which the Council opted into, Azets Audit Services are the Council's appointed external auditor. Previously, Grant Thornton LLP were the appointed Council external auditor.

- Audits / reviews and reports on the Council's financial statements (including the Annual Governance Statement)
- Provides an opinion on the accounts and use of resources, including the arrangements in place for securing economy, efficiency, and effectiveness in the use of resources (the value for money conclusion)
- Statutory duty to ensure that the Council has adequate arrangements in place for the prevention and detection of fraud, corruption & theft.



4. Preparing the Annual Governance Statement

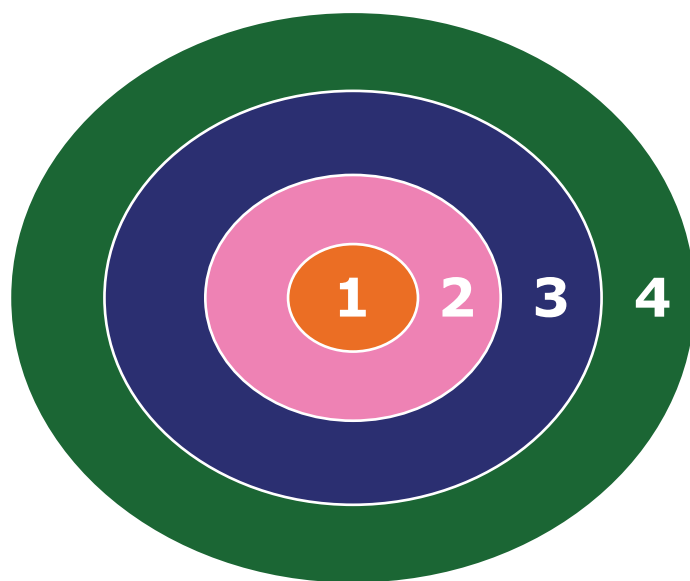
Nuneaton and Bedworth Borough Council has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control.

The review of the effectiveness of the system of internal control is informed by:

- the work of the internal auditors and the Annual Opinion Report.
- Strategic Directors and Assistant Directors within the Authority who have responsibility for the development and maintenance of the internal control environment; and
- comments made by the external auditors and other review agencies and inspectorates.

Assurance statements have been received from the Chief Executive and Strategic Directors setting out their confirmation that the control systems in place are adequate and that they are being complied with.

The review for the 2024/25 Annual Governance Statement has been carried out by Corporate Governance Group and the draft statement endorsed by Corporate Executive Team 3rd June 2025 for consideration by the Audit and Standards Committee in June 2025. It is then ratified, reviewed and scheduled for approval by the Audit and Standards Committee in September 2025.



1. Annual Governance Statement
2. Corporate Governance Group
3. Corporate Executive Team
4. Audit and Standards Committee

Where do we need assurance?

- a) Compliance
- b) Standards of conduct and behaviour
- c) Risk Management
- d) Financial Management
- e) Performance Management
- f) Service Delivery
- g) Effectiveness of internal controls

Where do we get assurance from?

- a) Constitution
- b) Political Management Arrangements (Committees and Scrutiny)
- c) Risk Management Policy & Strategy
- d) Performance Management Framework
- e) Complaints, counter fraud and whistleblowing
- f) Independent and external sources (e.g. CIPFA, Social Housing Regulator, Ministry of Housing, Communities & Local Government, external auditor).

5. Effectiveness of our governance in 2024/2025 – an Overview

a) Internal Audit – Annual Opinion

The purpose of the annual opinion is to provide an independent and objective assessment of the Council’s risk management, control and governance arrangements. It provides assurance to senior management and the Audit and Standards Committee on the overall adequacy and effectiveness of these arrangements allowing the Audit and Standards Committee to assess the Council’s internal control environment. Internal Audit’s risk-based plan must take into account the requirement to produce an annual internal audit opinion. Accordingly, the Audit Plan must incorporate sufficient work to enable the Chief Audit Executive to give an opinion on the overall adequacy and effectiveness of the organisation’s framework of governance, risk management and control.



Central Midlands Audit Partnership (CMAP) provided the following opinion for 2024/2025, as presented to the Audit and Standards Committee 9th September 2025: **Reasonable Assurance can be given that Nuneaton & Bedworth Borough Council’s framework of governance, risk management and control is adequate and effective.**

b) Statement of Accounts

During 2024/25, Central Government imposed legislative backstops in Autumn 2024 to address the outstanding unaudited accounts for financial year up to and including 2022/23 and 2023/24.

The deadline to complete external audits and approve statement of accounts for the financial years 2021/22 and 2022/23 was the **13th December 2024**. Shortly after, the backstop date of **28th February 2025** was imposed for completing the external audits in relation to the 2023/24 statement of accounts.

Please find table below key stages and timelines based on the above two deadlines:

2021/22 audit findings report was presented with an unqualified opinion in relation to the 2021/22 statement of accounts.	12th November 2024 Achieved prior to deadline (13th December 2024)
	
Audit findings report and statement of accounts for 2022/23 were presented to audit and standards committee with a disclaimed opinion due to the lack of audit work being able to be completed before the imposed backstop date.	3rd December 2024 Achieved prior to deadline (13th December 2024)
	
For the 2023/2024 financial year, a disclaimed audit opinion was approved again based on the limited amount of audit work being completed before this date. In the short term future the goal is to build back assurance working closely with our new external auditors (Azets) to get the opinions back to being unqualified.	25th February 2025 Achieved prior to deadline (28th February 2025)

c) Local Borough Council and preparation of Warwickshire County Council Elections

2024/25 was a significant year for local democracy across Nuneaton and Bedworth.

In May 2024, the Council experienced all out local elections across all wards as well as the Police and Crime Commissioner election. This was also significant because this was the first local election following the recently updated boundaries following the Local Government Boundary Commission review for the borough of Nuneaton and Bedworth. The local elections took place as planned, resulting in Labour taking control of the Council in May 2024. This resulted in a new administration, Cabinet, Mayor and Deputy Mayor, changing from a Conservative led Council. Labour held a majority until December 2024, when one Labour member deferred to the Conservative party resulting in the Council being in a position of no overall control. That said, the Council is still led by a Labour Administration, Leader and Cabinet as they hold more seats than any other party.

Shortly after the local elections in May 2024, the General Election was called taking place in July 2024. The Council undertook its duty to hold the General Election process across the borough of Nuneaton.

The remainder of the financial year then involved the closing of accounts, undertaking annual processes (such as the annual canvass) and preparing for the Warwickshire County Council elections scheduled May 2025.

d) Scrutiny (annual scrutiny report)

Each Overview and Scrutiny Panel (OSP) presented their annual report for the 2024/2025 Municipal Year to Full Council on 9th April 2025. At Full Council, each report was proposed, seconded and voted on. It was resolved that each report from each OSP be noted.

e) Social Housing Regulator new legislation, Social Housing (Regulation) Act 2023

The Social Housing (Regulation) Act 2023 strengthened the powers of the Regulator of Social Housing (RSH), and on 1st April 2024, a revised set of Consumer Standards were introduced. For Local Authority landlords, the relevant consumer standards are:

- Rent Standard
- Safety & Quality Standard
- Transparency, Influence & Accountability Standard
- Neighbourhood and Community Standard

These Standards set out the regulatory requirements for social landlords to ensure they meet the required outcomes for tenants. A further Governance and Viability Standard is applicable to non-Local Authority social housing landlords, however, Local Authority social housing landlords are expected to conform to the relevant Governance aspects of this Standard. These aspects are:

- a) Adhere to all relevant law**
- b) Comply with their governing documents and all regulatory requirements**
- c) Are accountable to the tenants, the regulator and relevant stakeholders**
- d) Have an effective risk management and internal controls assurance framework**
- e) Protect social housing assets**

Tenant Satisfaction Measures

In order to comply with requirements, the Landlord Service has:

- Reported the Tenant Satisfaction Measures to both Cabinet and Housing and Communities OSP.
- Reported a revised suite of KPI's to Housing and Communities OSP.
- Published an Annual Report to tenants and leaseholders detailing the outcomes of the Tenant Satisfaction Measures.
- Established a monthly Strategic Safety and Compliance Board to review compliance against the Quality & Safety Standard.
- Procured an external auditor who undertook an audit of our gas operations, leading to a change in management and assurance processes.

- Procured Campbell Tickell who undertook an audit of the Council's compliance against the Consumer Standards. This has resulted in the development of a Compliance Plan which is in delivery.

Policy and Strategy Development

The following policy and strategy documents have been developed as a result of the new regulatory requirements:

- Implemented Administering Medication Policy
- Implemented Compensation Remedy Policy
- Implemented Decant Policy
- Implemented Dementia & Complex Needs Policy
- Implemented Garden Assistance Policy
- Implemented Aids & Adaptations Policy
- Implemented Vulnerable Persons Policy
- Implemented Domestic Abuse Policy
- Implemented Permit to Work Policy
- Implemented Pet Policy
- Implemented Succession Policy
- Implemented Void Management Policy

f) Housing Ombudsman

The Social Housing (Regulation) Act 2023 empowered the Housing Ombudsman to issue a statutory code of practice relating to the procedures of qualifying social landlords, which came into force on 1st April 2024. It also placed a duty upon the Housing Ombudsman to monitor compliance with the Code.

The Council is required to produce a social housing Complaints Annual Performance and Service Improvement Report, which includes a self-assessment against the requirements of the Code. The Report must be presented to the Housing and Communities OSP and to the Cabinet, with both required to make comment on it. The Report was presented to the Housing and Communities OSP on 6th June 2024 and to the Cabinet on 19th June 2024.

g) Borough Plan Review

The Borough Plan Review along with its evidence base was submitted to the Planning Inspectorate on 12th February 2024. Two Planning Inspectors were appointed to lead an independent examination to determine whether the Borough Plan Review is sound and legally compliant, and whether it can be recommended for adoption.

The Planning Inspectors issued their 'Matters, Issues and Questions' on 22nd May 2024 which comprised of 181 questions. The Council were required to respond to these questions in advance of three blocks of hearing sessions. The hearing sessions took place between July and October 2024. Following these sessions, the Council received formal notification that the Plan could be found to be sound subject to Main Modifications being made as recommended by the Inspectors. The Council has been working with the Planning Inspectors to agree the Main Modifications and is due to consult on these between for 6 weeks starting in May 2025. It is expected the Borough Plan will be adopted by the Council during Autumn 2025.

Council Aim and theme: Aim 1 – Live Priority 2: Enable appropriate housing development

h) Introduced a co-mingled material recycling collection service, in line with the Material Recycling Facility (MRF) code of conduct and Resource and Waste Strategy.

The required changes to the collection service were implemented in October 2023, with a gradual transition to the use of the Sherbourne Recycling Facility for the processing of the material collected.

Council Aim and theme: Aim 1 – Live Priority – Sponsor a sustainable green approach

i) Adopt a Tenant Engagement Strategy

The Regulatory Social Housing Transparency, Influence and Accountability Standard requires social housing landlords to take tenants' views into account in their decision-making about how landlords services are delivered and communicate how tenant's views have been considered.

In response to this, the Council has drafted a new Tenant and Leaseholder Engagement Strategy to ensure our tenants and leaseholders are able to shape, scrutinise, inform and improve the services we provide. A priority within the new strategy is to become accountable to our tenants and leaseholders, and then to move towards a model of shared accountability.

To assist with this aim, the Tenant Participation Advisory Service (TPAS) has undertaken an audit of our approach to tenant engagement in preparation for application for accreditation. An action plan to achieve accreditation has been formulated and is in delivery.

Council Aim and theme: Aim 1 – Live Priority 4 – Prioritise Community Safety & Empowerment

j) National standard - ASB Service

The Council's Communities Team and the social housing ASB Team have successfully achieved the RESOLVE Standard, awarded by Resolve, a non-profit organisation that works closely with HM Government to develop best practice and national policy around ASB.

The RESOLVE Standard encompasses 6 overarching principles, these being:

- Victims and Communities
- Change
- Leadership, Culture and Resources
- Partnership
- Performance
- Professional Development

The RESOLVE Standard confirms that the Council offers a high quality ASB service and recognises the importance of making communities safer. It further confirms that the Council is committed to ensuring that victims and communities are at the centre of our approach, whilst also remaining focused upon the longer-term challenge and change of those causing ASB.

Council Aim and theme: Aim 1 – Live Priority 4 – Prioritise Community Safety & Empowerment

k) Continue the development of Bedworth Physical Activity Hub and procure a new Leisure Operator Management contract

The Bedworth Physical Activity Hub was identified as a priority project, due to its age and limited future life span for the existing facility. On 10th November 2021, Cabinet approved that RIBA Stages 4A and 4B be undertaken for the Bedworth Physical Activity Hub site, to progress to procurement stage. At cabinet on 6th September 2023 cabinet approved to take forward a revised building design that could be accommodated within the budget for the project and delegated authority was given to officers to agree RIBA Stages 5 onwards and contract terms for the delivery (with external consultants and the main contractor) of the new BPAH as per the descoped option,. The project commenced on site in early 2024 and delivery of the programme has been closely managed via the Council's appointed external Project Management team.

Alongside the delivery of the new facility, a Leisure Operator Procurement process began in October 2021 with soft market testing, a series of Member Workshops followed by the commencement of a three-stage procurement process, to appoint a Leisure operator to manage Borough Leisure facilities for up to a 15-year term, meeting the Councils key Leisure strategic outcomes, supporting residents with opportunities for improvements in their health and wellbeing. In line with the delivery timetable of the new Bedworth Physical Activity Hub the successful operator will be required to proceed with the fit out of the facility immediately following the award and appointment of the contract.

Council Aim and theme: Aim 1 – Live Priority 1 – Promote residents' health & wellbeing

l) Procurement Act 2023

For the last three years the Government has been developing a new procurement regime, reflected in the Procurement Act 2023. The legislative process was concluded earlier in 2024 and the new requirements effective February 2025. The new regime increases the transparency requirements and creates a simpler and more flexible commercial system.

The Council has been making active preparations over 2023/2024 and 2024/2025. Processes have been updated, training undertaken by key officers. The Council adopted updated Contract Procedure Rules in February 2025 in time for the go live date late February 2025. The Council is pleased to confirm it is operating under the new regime.

Council Aim and theme: Aim 2 – Work Priority 4 – Support Local Businesses

m) Ministry of Housing, Communities & Local Government – Local Funding and Investment Division – Pathfinder - Second line of defence deep dive exercise (regeneration)

The purpose of a second line of defence (deep dive) is to provide assurance on behalf of the of Housing Communities & Local Government (MHCLG) through a series of checks, that Local Authorities have effective controls and governance systems in place to manage risks, safeguard public funds and maintain transparent governance.

The outcome of the report concluded that the assurance level is satisfactory, demonstrating the Councils commitment to maintain expected standards.

Council Aim and theme: Aim 2 – Work Priority 1 – Grow a strong & inclusive economy



6. Action Plans

Annex 1 – includes update on previous action plans up to and including the 2024/2025 Annual Governance Statement

Annex 2 – Includes the Annual Governance Statement action plan for 2025/2026.

7. Conclusion

The Council has produced an accurate Annual Governance Statement for the 2024/2025 Financial Year Period, outlining the governance mechanisms that were in place during the reporting period. We confirm our commitment to implementation of actions to address issues and/or gaps in governance identified throughout the 2025/2026 financial year. Furthermore, the Council will monitor and seek assurances in response of the Action Plan and will continue to ensure suitable and sufficient governance mechanisms exist.



Annex 1

An update on the action plan for 2022/23 is shown in the table below:

Table 1

Action	Responsible Officer/ Group	Planned Completion Date	Status
Implement a Corporate Document Retention Policy	Data Protection Officer	Rolled over to 2023/24	Outstanding. Draft policy stage

An update on the action plan for 2023/24 is shown in the table below:

Table 2

Action	Responsible Officer/ Group	Planned Completion Date	Status
Implement a Corporate Document Retention Policy	Data Protection Officer	Rolled over to 2023/24	Outstanding. Draft policy stage.
Cyber essentials assessment undertaken and certified. PSN compliance obtained	*Strategic Director – Corporate Resources	Assessment completed and remedial work identified. Revised assessment to be undertaken - 2023/24 Cyber Essentials accreditation is not possible due to some legacy systems. These are in scope for change/renewal in 2024/25. Revised target 2024/2025 or 2025/2026.	Revised target 2027/2028 Progress has been made but due to the interdependences with other systems and software contracts, it has not been possible to obtain this accreditation at this point. Still in progress.
Ensure staff recruitment and retention is linked to the People Strategy and underlying policies	*Strategic Director – Corporate Resources	Linked to employment committee work. Tabled for 2022/23	Delayed. People Strategy from 2026.
Asset review, especially use of the Town Hall	*Strategic Director – Corporate Resources	Ongoing but the Council is in Negotiations to lease part of the Town Hall to a public sector partner.	In progress. Rolled over to 2024/2025.
Consider the effective and consistent use of appropriate data to inform decision making	Management Team	Ongoing	Done. New measures approved. System setup in progress. See other target further down.
Complete the development of some of the key strategies e.g. Economic Development Strategy, Town Centre Strategy	*Strategic Director – Place and Economy	December 2022 Draft documents being consulted upon. Adoption in 2023/24	In progress. Rolled over to 2024/2025.

Local Code of Corporate Governance, Anti-Fraud and Bribery Strategy and Fraud Response Plan.	*Assistant Director – Democracy and Governance, Assistant Director – Finance and Strategic Director – Corporate Resources	March 2023.	<p>Rolled over to 2024/2025</p> <p>Sickness in team caused delay, followed by transfer to CMAP.</p> <p>This is now in progress to be finalised first half of 2025/2026 Financial Year noting these require Political approval (committee/cabinet)</p>
Identify and implement a replacement for the previously titled TEN Performance Management System	*Assistant Director – Democracy and Governance	<p>Scope and Procurement – 2023/2024</p> <p>Implementation 2024/2025</p>	<p>In progress and near completion.</p> <p>Aiming end of June 2025 for full completion of entire project, including IT system setup.</p>
To update the Operational Risk Registers and bring in line with a revised format. Similarly, this will enable the Strategic Risk Register to be refined and to focus wholly on corporate strategic risks.	Corporate Governance Group	March 2025	Completed.
Fundamental review of the Performance Management data, metrics and format.	Assistant Director – Democracy and Governance, all Strategic Directors and Assistant Directors	March 2025	Completed. But please note, remaining point regarding above (ref TEN system). IT System and PowerBi in progress. Aiming for end of June 2025.
Revise the Corporate Plan as existing Corporate Plan expires March 2025	All Strategic Directors and Assistant Directors	March 2025	Completed.
Constitution to be updated to ensure that it captures changes made in the previous 12 month period.	Monitoring Officer	September 2024	Completed – March 2025.

*Change of job title from previous Action Plan due to staff changes.

Annex 2

The review of the governance framework during 2024/25 has identified the following issues to be addressed in 2025/26, notwithstanding any outstanding items from the previous action plan as per table 2 above .

Action	Responsible Officer/Group	Planned Completion Date
Implement a Corporate Document Retention Policy	Data Protection Officer	September 2025
Identify and implement a replacement for the previously titled TEN Performance Management System	Assistant Director – Democracy and Governance	June 2025
Complete the development of some of the key strategies e.g. Economic Development Strategy, Town Centre Strategy	Strategic Director – Place & Economy Assistant Director – Economy & Regeneration	March 2026
Local Code of Corporate Governance, Anti-Fraud and Bribery Strategy and Fraud Response Plan.	Strategic Director – Corporate Resources Assistant Director – Finance Assistant Director – Democracy and Governance	September 2025
Asset review, especially use of the Town Hall	Strategic Director – Place & Economy Assistant Director – Economy & Regeneration	March 2026
Review, consider and implement mitigations identified in the Commissioners report associated to Birmingham City Council as a lesson learnt for Nuneaton and Bedworth Borough Council	SLT	March 2026
A need for the Shareholder Committee to receive reports from all wholly owned and jointly owned subsidiaries to have more oversight and scrutiny of Council owned and jointly owner subsidiaries (NABCEL, Sherbourne Recycling Ltd), Grayson Place (NBBC) Limited	Shareholder Committee CET	March 2026
Statement of Accounts for 2024/2025 to be prepared and signed off	Strategic Director – Corporate Resources Assistant Director – Finance	September 2025
Implement Action Plan following assessment findings following the Regulator of Social Housing	Strategic Director – Housing & Community Safety Assistant Director – Social Housing and Community Safety Assistant Director – Strategic Housing	Ongoing

Following decision that County elections to proceed in May 2025, prepare and deliver County Elections. Prepare for Borough Elections in May 2026.	Chief Executive Officer (Returning Officer) Elections and Democratic Services Manager	May 2025 May 2026
Review and update of both the Performance Management Framework as well as the Risk Management Strategy & Framework.	Assistant Director – Democracy and Governance	October 2025
Implement revised Service Business Plans following adoption of new Corporate Plan 2025 – 2029	SLT	June 2025
Update templates and report writing guidance for committee reports, cabinet reports and delegated officers decisions to ensure reports are sufficiently detailed and accurate for decision making	Assistant Director – Democracy and Governance	June 2025
Produce and approve the Modern Slavery Statement for 2023/2024 and 2024/2025	Assistant Director – Democracy and Governance SLT	September 2025
RIPA Training for officers, authorising officers, Senior Responsible Officer (and Deputy) and co-ordinators where required.	Assistant Director – Democracy and Governance & CET	October 2025
Adoption of the Borough Plan	Strategic Director – Place and Economy Assistant Director - Planning	October 2025
Approval of a new Local Development Scheme later in 2025	Strategic Director – Place and Economy Assistant Director - Planning	December 2025
Adoption of updated Supplementary Planning Documents	Strategic Director – Place and Economy Assistant Director - Planning	March 2026
Adoption of Heritage SPD and Local List (to be taken with SPDs)	Strategic Director – Place and Economy Assistant Director - Planning	March 2026
Implementation of the Employee Rights Bill (Employment Act 2025), and updating relevant policies.	Assistant Director – Central Operations and People Services Manager	April 2026
Implementation of the new Corporate Complaints Policy and associated Compensation Policy following Local Government Social Care Ombudsman and Regulator of Social Housing changes.	SLT Data Protection Officer	September 2025

AGENDA ITEM NO. 12

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	9 th September
Subject:	RIPA 2000 and the Investigatory Powers Act 2016.
Portfolio:	Not Applicable
Responsible Officer:	Assistant Director – Democracy & Governance
Corporate Plan – Theme:	Your Council
Corporate Plan – Aim:	Strive for transparency and accountability, in all that we do. Increase public scrutiny
Ward Relevance:	Not applicable
Public or Private:	Public
Forward Plan:	Not applicable – Not a Cabinet report or a Key Decision
Subject to Call-in:	Not applicable – Not a Cabinet report or a Key Decision

1. Purpose of report

- 1.1. To provide the Audit and Standards Committee with the outcome of the usual three-yearly inspection by the Investigatory Powers Commissioner's Office (IPCO) to assess compliance with the Regulation of Investigatory Powers Act (RIPA) 2000 and the Investigatory Powers Act 2016.

2. Recommendations

- 2.1. To note the findings of the Surveillance Inspector from the Investigatory Powers Commissioner's Office (IPCO) for the 2025 inspection.
- 2.2. To endorse the updates to the policy and procedure as per 4.6 of the report for the August 2025 policy review.
- 2.3. To endorse bi-annual training as per 4.9 of the report.
- 2.4. To note the next routine inspection will be in 2028.

3. Background

- 3.1. The Regulation of Investigatory Powers Act 2000 (RIPA) provides a legal framework for surveillance and information gathering techniques undertaken by public bodies in the course of their duties. Most investigatory or enforcement activity carried out by the Council will be carried out in an open or overt manner. However, on occasion, officers may need to undertake their duties in a covert manner. Covert surveillance is surveillance, carried out so that the people being observed, or listened to, or monitored, are unaware that it is, or may be, taking place. RIPA aims to ensure that when public bodies carry out investigations:
 - 3.1.1. they respect the privacy of individuals; and
 - 3.1.2. that there is an interference with privacy only where the law permits it; and
 - 3.1.3. there is a clear public interest justification.
- 3.2. The IPCO undertake regular inspections of organisations under the Regulation of Investigatory Powers Act (RIPA) 2000 and the Investigatory Powers Act 2016.
- 3.3. The Council was last subject to an inspection in 2022. A report was considered by the Audit and Standards Committee on 10th January 2023. That report recommended the Committee note the findings of the 2022 inspection and approve the Council's policy on the use of covert surveillance.
- 3.4. The next scheduled inspection was due for 2025 as part of the three yearly cycle.

3.5. The Committee should note that the Council's IPCO annual statistics return for year ending 2023 and 2024 concluded:

3.5.1. Nil return - The total number of applications made for a covert human intelligence sources (CHIS) authorisation (including renewals and urgent cases).

3.5.2. Nil return - The total number of Directed Surveillance authorisations issued (including renewals and urgent cases).

3.6. The Council expect to be contacted late 2025 (early 2026) for its 2025 statistics return to the IPCO.

4. Body of report and reason for recommendations

4.1. The IPCO issued a letter to the Council (dated 26th February 2025), informing the Council it was due its usual three yearly inspection during 2025 to assess compliance with RIPA 2000 and the Investigatory Powers Act 2016. In the letter, it was confirmed that as part of the IPCO oversight of local authorities, they no longer routinely undertake physical inspection site visits. Instead, it would be a written exercise in the first instance and subject to the responses from the local authorities and/or where the local authorities have routine surveillance activity, the IPCO would arrange an appropriate discussion with an Inspector.

4.2. The Council participated via correspondence with the Inspector, providing the information required for the IPCO to assess the Council's compliance with RIPA 2000 and Investigatory Powers Act 2016. The Council submitted its response no later than the deadline stated by the IPCO (30th April 2025).

4.3. The return issued by the Council responded to each test required for the inspection. This included providing responses to a series of questions such as:

4.3.1. Whether the Council used covert powers in line with its policy.

4.3.2. Actions taken since the previous inspection (2022) to improve together with evidence.

4.3.3. Providing a copy of the policy in place, together with the date it was last reviewed and updated; and

4.3.4. An update on RIPA senior officer and authorising officer training.

- 4.4. The Committee should note that the policy was last reviewed and updated in 2024. The Portfolio Holder for Resources and Customer Services (at the time) approved two policy documents via an individual Cabinet Member Decision dated 6th August 2024. The two policy documents:
- 4.4.1. Regulation and Investigatory Powers Act - Guidance and Procedure; and
 - 4.4.2. Policy in Relation to Monitoring and Surveillance in the Workplace.
- 4.5. The Council received the outcome of the review from the IPCO 30th April 2025. The outcome resulted in the IPCO being satisfied that the responses and evidence given, provided assurance that ongoing compliance with RIPA 2000 and the Investigatory Powers Act 2016 will be maintained. As such, the Council will not require further inspection this year and the IPCO confirmed its next scheduled inspection. The would be in 2028.
- 4.6. Whilst the IPCO confirmed no further inspection would be required in 2025, they did raise two minor amendments to the policy in place:
- 4.6.1. *There are some references to Communications Data (CD) being authorised under RIPA. This is no longer the case and all CD data is covered by the Investigatory Powers Act 2016.*
 - 4.6.2. *The policy would benefit from some amendments within Chapter 6 – The Authorisation Process. Directed Surveillance and CHIS do have different (although similar) considerations in respect of the statutory considerations of necessity, proportionality and collateral intrusion and indeed these are covered within different Codes of Practice. It is confusing to consider these requirements together and it would make it clearer for your staff to distinguish between surveillance and CHIS requirements separately.*
- 4.7. The IPCO encouraged the Council to ensure the key compliance issues continue to receive the necessary internal governance and oversight, policy reviews, annual updates to Elected Members and ongoing training and the retention, review and destruction (RRD) of any product obtained through the use of covert powers (Records and

Product Management in accordance with the Safeguards Chapters of the relevant Codes of Practice).

4.8. The Committee should note that the Assistant Director – Governance and Democracy is due to commence a review of the policy in August 2025 as per the Democracy and Governance 2025/2026 Service Plan. This is likely to take a couple of months to allow for necessary consultation and approval, to allow the two minor amendments raised by the IPCO to be captured.

4.9. RIPA Training will also be scheduled by the Assistant Director – Democracy and Governance later this calendar year (2025) and again late 2027. This ensures the Senior Responsible Officer, their deputy, RIPA Co-ordinators, Authorising Officers and key service leads receive refreshed and updated training in the event a request is required under Regulation of Investigatory Powers Act (RIPA) 2000 and the Investigatory Powers Act 2016.

5. Consultation with the public, members, officers and associated stakeholders

5.1. Consultation occurred between the Council Officers and the Inspector at the Investigatory Powers Commissioner's Office.

5.2. The Statutory Officers (Head of Paid Service and Section 151 Officer) were also consulted.

5.3. Elected members are consulted as part of this report going to the Audit and Standards Committee. Furthermore, the Audit and Standards Committee should note the agreed work programme includes provision for reports related to external agencies regarding the standards/conduct of the Council (such as the Ombudsman, Information Commissioner's Office or Investigatory Powers Commissioner's Office).

6. Financial Implications

6.1. None directly related to this report. However, the Committee should note that failure to comply with the legislation and/or uphold standards required following an inspection, could result in nominal fines against the Council for non-compliance.

7. Legal Implications

7.1. The Council is required to uphold the standards and guidance issued by the Investigatory Powers Commissioner's Office (IPCO) and in doing so, comply with the Regulation of Investigatory Powers Act (RIPA) 2000 and the Investigatory Powers Act 2016. Failure to do so, can result in breaches which may lead to criminal charges/evidence being inadmissible as well as the financial implications in section 6 of the report.

8. Equalities implications

8.1. No specific equality implications have been identified following the completion of an equality impact assessment.

9. Health implications

9.1. No specific health implications have been identified.

10. Climate and environmental implications

10.1. No direct climate and/or environmental implications have been identified.

11. Section 17 Crime and Disorder Implications

11.1. No direct Section 17 crime and disorder implications have been identified.

12. Risk management implications

12.1. If the recommendations are approved, it'll encourage the following benefits from a risk management perspective:

- i. An updated policy following the 2025 inspection;
- ii. Training for key officers involved in the process as per the Council policy documents (Regulation and Investigatory Powers Act - Guidance and Procedure; and Policy in Relation to Monitoring and Surveillance in the Workplace); and
- iii. Routine inspections, updates and assurance provided in relation to Council activity.

13. Human resources implications

13.1. No direct human resource implications have been identified.

14. Options considered and reason for their rejection

14.1. In formulating this report and recommendations, the following other options were identified. Reasons for their rejection or why the option and recommendation proposed in section 2 of the report has been selected are outlined below.

Option Ref	Option Title	Reason for rejection or why the option and recommendation proposed in section 2 of the report has been selected
A	Do nothing	Whilst the IPCO have confirmed no further inspection for 2025, not considering the minor amendments they have recommended following the inspection would mean the Council fails to update its policy based on external advice and standards.

15. Conclusion

15.1. The Audit and Standards note the outcome of the 2025 inspection, endorse the recommendations to continually improve and align with the standards required by legislation.

16. Appendices

16.1. Please note there are no appendices attached to this report.

17. Background papers

17.1. Please note there are no appendices attached to this report.

18. Report Writer Details:

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AGENDA ITEM NO. 13

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: Audit and Standards Committee

Date of Meeting: 9th September 2025

Subject: Overview of Member Complaints

Portfolio: Not Applicable

Responsible Officer: Monitoring Officer

Corporate Plan – Theme: Your Council

Corporate Plan – Aim: Strive for transparency and accountability, in all that we do.
Increase public scrutiny

Ward Relevance: Not applicable

Public or Private: Public

Forward Plan: Not applicable (not for Cabinet)

Subject to Call-in: Not applicable (not for Cabinet)

1. Purpose of report

- 1.1. To provide the Audit and Standards Committee with an update on the overview report presented in respect of complaints against members. The purpose of the report is not to discuss specific complaints or matters.
- 1.2. Members must note that the Committee should not discuss in open session a specific case. Specific matters are discussed in a sub-assessment committee in line with the process adopted by Council on 18th May 2022 and most subsequently, 2nd July 2025. Therefore, Officers and Members of the Committee must refrain from discussing a specific matter related to an individual further to this

report. This is because under the Local Government Act 1972, paragraph 1 and 2 of Part 1 of Schedule 12A to the Local Government Act 1972 (1. Information relating to any individual. 2. Information which is likely to reveal the identity of an individual.) is classified as exempt information.

- 1.3. The report therefore provides the committee with an overview of complaints to review whether there are any trends or systematic issues with the code of conduct and compliance with the code.

2. Recommendations

- 2.1. It be noted that a total of one (1) formal complaint against elected members have been received since the last report came before the Committee (1st April 2025).

3. Background

- 3.1. As part of the performance management arrangements, reports are submitted to the Audit and Standards Committee every six months. The last report received by Committee at its meeting on 1st April 2025 and before that, 10th September 2024. This report now addresses the complaints received since the last report came before Committee.
- 3.2. Part 5A of the Constitution contains the Member Code of Conduct Complaint Process and part A9.3 outlines the role and function of the Audit and Standards Committee.

4. Body of report and reason for recommendations

- 4.1. The last report issued to the Committee (1st April 2025), confirmed one (1) complaint remained outstanding which was currently being dealt with in line with the process adopted by the Council on 18th May 2022, and the subject member. This complaint was investigated, and the Audit and Standards considered the complaint at an assessment committee 29th April 2025. The sub-assessment committee closed the case.
- 4.2. A total of one (1) formal complaint against elected members have been received since the last report came before the Committee (1st April 2025). This remains under review by the Monitoring Officer. The Monitoring Officer is

due to liaise with the Chair of the Audit and Standards Committee once a full review has undertaken and is likely to provide a report to the next Audit and Standards Committee in November 2025.

5. Consultation with the public, members, officers and associated stakeholders

5.1. No consultation has been undertaken directly linked to this report. However, Members of the Committee will note that consultation with a complainant, subject member, the Chair of the Audit and Standards Committee and the committee are consulted on specific matters regarding a complaint.

5.2. The Audit and Standards Committee note that at Council 2nd July 2025, Council approved the recommendations from the Audit and Standards Committee regarding the new members complaint process. This will duly be incorporated into the Constitution.

6. Financial Implications

6.1. None directly related to this report.

7. Legal Implications

7.1. None directly related to this report.

8. Equalities implications

8.1. Not applicable to this report.

9. Health implications

9.1. Not applicable to this report.

10. Climate and environmental implications

10.1. Not applicable to this report.

11. Section 17 Crime and Disorder Implications

11.1. Not applicable to this report.

12. Risk management implications

12.1. No direct risk management implications have been identified. However, it is noted that complaints against Elected Members, subject to the complaint, can cause reputational damage to the Council.

13. Human resources implications

13.1. No direct human resource implications have been identified.

14. Options considered and reason for their rejection

14.1. In formulating this report and recommendations, the following other options were identified. Reasons for their rejection or why the option and recommendation proposed in section 2 of the report has been selected are outlined below.

Option Ref	Option Title	Reason for rejection or why the option and recommendation proposed in section 2 of the report has been selected
A	Do nothing	The Audit and Standards Committee have an obligation to promote and maintain high standards of conduct by Members, Independent Members and any other representatives. The committee also makes assessments of misconduct allegations where required. Therefore, this 6 month report provides an update to the Committee regarding the member complaint process.

15. Conclusion

15.1. It be noted that:

15.1.1. A total of one (1) formal complaint against elected members have been received since the last report came before the Committee (1st April 2025). This is under review by the Monitoring Officer.

15.1.2. Full Council approved the recommendations from the Audit and Standards Committee on 2th July 2025 regarding the new members complaint.

16. Appendices

16.1. Please note there are no appendices attached to this report.

17. Background papers

17.1. Please note there are no appendices attached to this report.

18. Report Writer Details:

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