

Enquiries to Democratic Services
Direct Dial: 024 7637 6000
Direct Email: committee@nuneatonandbedworth.gov.uk
Date: 17th November 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, 25th November 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 9th September 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 PROGRESS REPORT – a report of the Audit Manager attached (**Page 8**)
7. AUDITOR'S ANNUAL REPORT – a report of the Strategic Director for Corporate Resources, attached (**Page 34**).
8. TREASURY MANAGEMENT UPDATE 2025-2026 - a report of the Finance Manager – Treasury, attached (**Page 76**)

9. REVIEW OF PERFORMANCE MANAGEMENT FRAMEWORK AND RISK MANAGEMENT POLICY AND STRATEGY - a report of the Governance, Risk Management and Performance Officer, attached (**Page 98**).
10. REVIEW OF THE REGISTER OF MEMBERS' INTERESTS AND THE GIFTS AND HOSPITALITY REGISTER 2024 - 2025 - a report of the Monitoring Officer, attached (**Page 161**).
11. 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

9th September 2025

A meeting of the Audit & Standards Committee was held on Tuesday, 9th September 2025 in the Council Chamber, Town Hall, Nuneaton.

Present

Councillor J. Bonner – Chair

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

Apologies: Councillors D. Brown and B. Hancox.

PART I – PUBLIC BUSINESS

ASC9 **Minutes**

RESOLVED that the minutes of the Audit and Standards Committee meeting held on 24th June 2025 be approved and signed by the Chair.

ASC10 **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](#)).

ASC11 **Internal Audit Charter and Mandate**

A Report of Audit Manager gave the Committee the opportunity to review and discuss the CMAP 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).

RESOLVED that the CMAP Internal Audit Charter and Internal Audit Mandate be approved.

ASC12 **Internal Audit Progress Report**

The Audit Manager presented a report which provided the Committee with an update on progress against the approved Internal Audit Plan. The report detailed the performance and activity of Internal Audit since the last Progress Report presented to the Audit and Standards Committee.

Public Speaker: County Councillor K. Kondakor

RESOLVED that the report be considered and issues identified be subject to a follow-up report as appropriate.

ASC13 **Internal Audit Annual Opinion Report 2024-2025**

A Report of Audit Manager provided the Committee with the Annual Internal Audit Opinion as required by the Public Sector Internal Standards, together with a

summary of the work that the Council's Internal Audit Service has undertaken during 2024-25.

The report also provided 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.

Public Speaker: County Councillor K. Kondakor

RESOLVED that the Annual Internal Audit Opinion for 2024-25 be considered and noted.

ASC14 **Treasury Management Update 2025-2026**

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 a mid-year review.

This report to the Committee set 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.

Public Speaker: County Councillor K. Kondakor

RESOLVED that **IT BE RECOMMENDED TO COUNCIL** that the Treasury Management Report for 2025/26 – Quarter 1 Review be noted.

ASC15 **LGSCO – Annual Review of Local Government Complaints for 2024-2025**

A Report of the Customer Experience and Data Protection Officer provided the Committee with the annual summary of the complaint statistics from the Local Government and Social Care Ombudsman (LGSCO) for the year ending 31 March 2025.

Public Speaker: County Councillor K. Kondakor

RESOLVED that

- a) the report be noted and information including how NBBC approaches complaints be acknowledged; and
- b) the forthcoming changes to the LGSCO complaint handling code be noted.

ASC16 **Annual Governance Statement 2024-2025**

The Assistant Director – Democracy and Governance presented a report which gave Members the opportunity to discuss and review the Annual Governance Statement 2024/2025.

Public Speaker: County Councillor K. Kondakor

RESOLVED that the Annual Governance Statement for the 2024/2025 financial year be approved.

ASC17 **RIPA 2000 and the Investigatory Powers Act 2015**

A report of the Assistant Director – Democracy and Governance provided the Committee with the outcome of the usual three-yearly inspection by the Investigatory Powers Commissioner's Officer (IPCO) to assess compliance with

the Regulation of Investigatory Powers Act (RIPA) 2000 and the Investigatory Powers Act 2016.

Public Speaker: County Councillor K. Kondakor

RESOLVED that

- a) the findings of the Surveillance Inspector from the IPCO for the 2025 inspection be noted;
- b) the updates to the policy and procedure for the August 2025 policy review be endorsed;
- c) bi-annual training be endorsed; and
- d) it be noted that the next routine inspection will take place in 2028.

ASC18 **Overview of Member Complaints**

A report of the Monitoring Officer provided the Committee with an update on the overview report presented in respect of complaints against members.

Public Speaker: County Councillor K. Kondakor

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

Chair _____

AGENDA ITEM NO. 6

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: Audit and Standards Committee

Date of Meeting: 25th November 2025

Subject: Internal Audit Progress Report

Portfolio: Not Applicable

Responsible Officer: Audit Manager

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 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. Background

- 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.

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

- 5.1. None directly related to this report.

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

11. Section 17 Crime and Disorder Implications

- 11.1. Not applicable to this report.

12. Risk management implications

12.1. This Internal Audit Progress Report provides assurance on the adequacy and effectiveness of the Council's governance, risk management and control arrangements. The findings and recommendations arising from completed audits highlight areas where controls can be strengthened to better manage identified risks. Implementation of agreed actions will support continuous improvement in the Council's overall risk management framework.

13. Human resources implications

13.1. No direct human resource implications have been identified.

14. Conclusion

14.1. This report demonstrates continued delivery of the approved Audit Plan and provides assurance that appropriate arrangements are in place to address identified risks and control weaknesses. The Audit & Standards Committee is invited to note the progress made, consider the outcomes of completed audits, and endorse the ongoing actions to strengthen the Council's governance, risk management and internal control environment.

15. Appendices

15.1. Please note the following appendix:
i. Appendix A – Internal Audit Progress Report

16. Background papers

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

17. Report Writer Details:

Officer Job Title: Audit Manager

Officer Name: Adrian Manifold

Officer Email Address: adrian.manifold@centralmidlandsaudit.co.uk



central midlands audit partnership

Nuneaton & Bedworth Borough Council – Audit Progress Report

Audit & Standards Committee: 25th November 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.

Contacts

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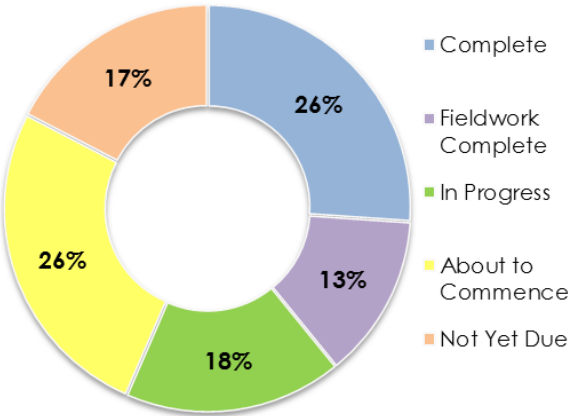
c/o Derby City Council
Council House
Corporation Street
Derby
DE1 2FS



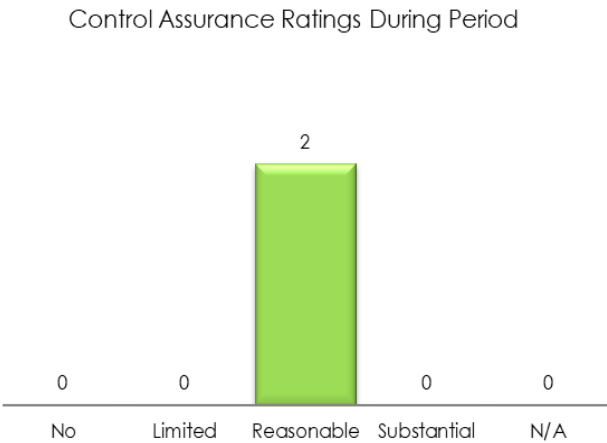
Nuneaton & Bedworth Borough Council – Audit Progress Report

AUDIT DASHBOARD

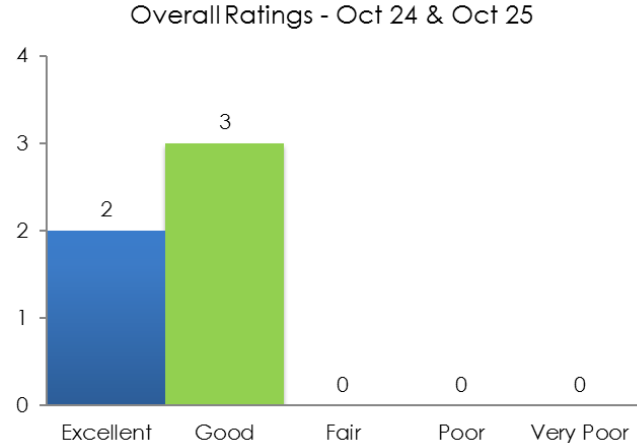
Plan Progress



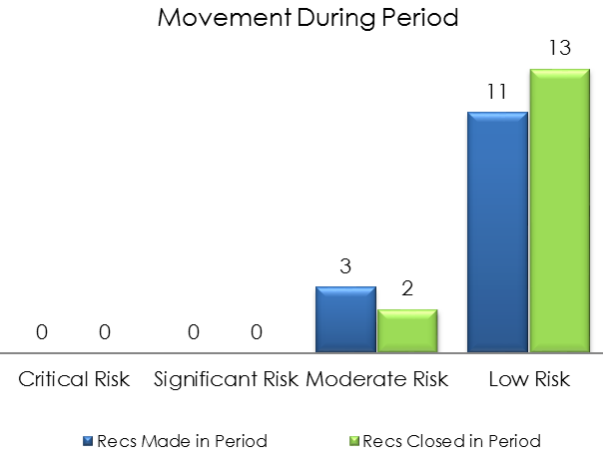
Jobs Completed in Period



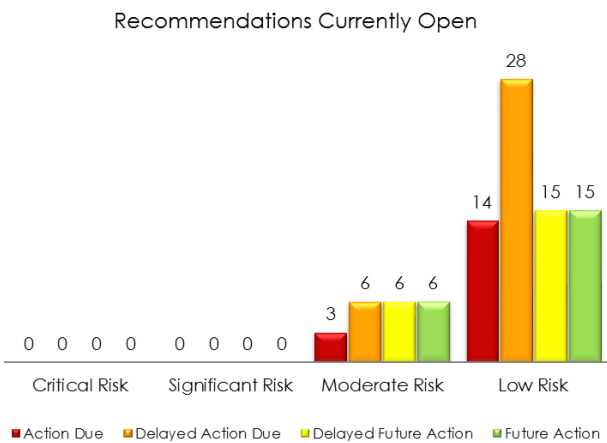
Customer Satisfaction



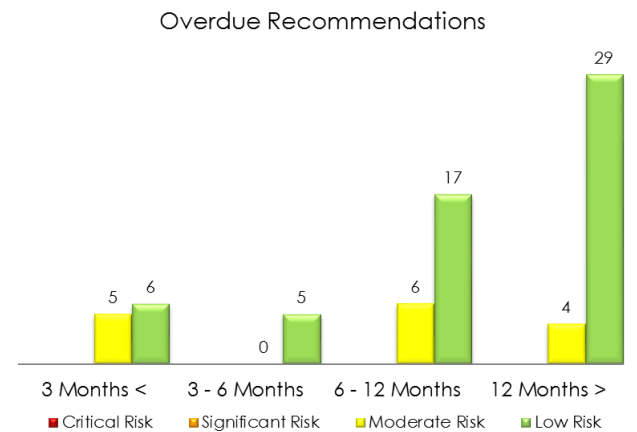
Recommendations Movement



Recommendations Open



Recommendations Overdue



Nuneaton & Bedworth Borough Council – Audit Progress Report

AUDIT PLAN

Progress on Audit Assignments

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

2025-26 Assignments	Status	% Complete	Assurance Rating
Insurance	Not Allocated	0%	
Housing Benefit & Council Tax Support	Allocated	5%	
Business Change & Transformation	Fieldwork Complete	80%	
IT Infrastructure/Applications	Allocated	5%	
Procurement (Contracts Register)	Not Allocated	0%	
Risk Management 2025-26	Final Report	100%	Reasonable
Corporate Governance 2025-26	Final Report	100%	Reasonable
Grant Certification 2025-26	In Progress	25%	
Markets & Street Trading	Not Allocated	0%	
Corporate Fire Risk Management	In Progress	10%	
Voids Management	Allocated	20%	
Capital Project Management	Allocated	5%	
Health & Safety	Not Allocated	0%	
Waste Management	Allocated	5%	
Parks & Open Spaces	Allocated	0%	

B/Fwd Assignments	Status	% Complete	Assurance Rating
Corporate Credit Cards	Fieldwork Complete	80%	
Electoral Services	Final Report	100%	Substantial
Fire Risk Management	In Progress	70%	
Fuel Cards	In Progress	20%	
Licensing	Final Report	100%	Reasonable
Food Hygiene f/u	Draft Report	95%	
Grounds Maintenance	Final Report	100%	Reasonable
Homelessness	Final Report	100%	Reasonable

Plan Changes

None.

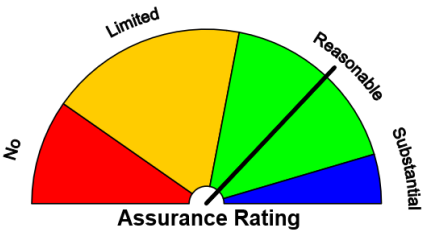
Nuneaton & Bedworth Borough Council – Audit Progress Report

AUDIT COVERAGE

Completed Audit Assignments

Between 20th August 2025 and 10th November 2025, the following audit assignments have been finalised.

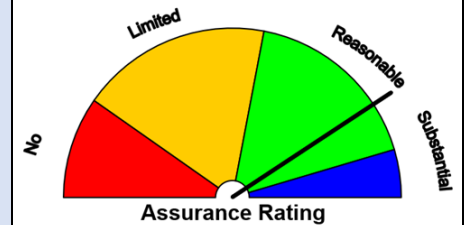
Audit Assignments Completed in Period	Assurance Rating	Recommendations Made				% Recs Closed
		Critical Risk	Significant Risk	Moderate Risk	Low Risk	
Risk Management 2025-26	Reasonable			1	10	9%
Corporate Governance 2025-26	Reasonable			2	1	0%

Risk Management 2025-26						
Control Objectives Examined		Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls	
This will look at the who and will cover things such as Reporting Lines, ToR, Roles & responsibilities etc.		3	1	2	0	
This will look at the what and will cover what is to be achieved, priorities, risk culture, appetite etc		7	4	3	0	
This will look at the how and will look at how the strategy will be achieved. For example, procedures, tools and techniques etc.		5	0	5	0	
This section will look at the reviewing of the implementation and efficacy of the Framework.		4	2	2	0	
TOTALS		19	7	12	0	
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date	
1	External Reporting procedures were not defined with in the risk management documentation provided.	Low Risk	01/04/2026	Future Action		

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2	There is a lack of clarity and testing concerning the controls and the linked documents of assurance.	Moderate Risk	01/01/2026	Future Action	
3	The policy review schedule of every two years didn't meet best practice of a minimum of an annual review.	Low Risk	n/a	Risk Accepted	
4	No corporate risk appetite had been defined within the risk management policy or statement	Low Risk	01/04/2026	Future Action	
5	The roles and responsibility section in the Council's Risk Management Policy & Strategy, lacked sufficient detail.	Low Risk	01/04/2026	Future Action	
6	The guidance in the Risk Management Policy & Strategy on how to describe a risk was not clear.	Low Risk	01/04/2026	Future Action	
7	The Risk Management Policy & Strategy did not clearly set out the difference between operational and strategic risk or how they are to be managed.	Low Risk	01/04/2026	Future Action	
8	There was no structured risk management training programme in place for Council officers.	Low Risk	01/04/2026	Future Action	
9	The reporting / monitoring element of the risk management process was not clearly defined within the risk management policy framework.	Low Risk	01/04/2026	Future Action	
10	There was no evidence to suggest that the Council's risk management culture was being formally reviewed.	Low Risk	01/04/2026	Future Action	
11	We found limited evidence of risks being subject to scrutiny and challenge.	Low Risk	01/04/2026	Future Action	

Corporate Governance 2025-26



Control Objectives Examined	Controls Evaluated	Adequate Controls	Partial Controls	Weak Controls
Behaving with Integrity, Demonstrating Ethical Values, and Respecting the Rule of Law	5	4	1	0
Ensuring Openness and Comprehensive Stakeholder Engagement	4	2	2	0
Defining Outcomes in Terms of Sustainable Economic, Social, and Environmental Benefits	3	3	0	0
Determining oversight to Improve Outcomes	2	2	0	0

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Developing the Capacity and Capability of Leadership		3	2	1	0
Risk Management		3	3	0	0
Implementing Good Practices in Transparency and Accountability		3	3	0	0
TOTALS		23	19	4	0
Rec No.	Summary of Weakness	Risk Rating	Original Action Date	Action Status	Revised Action Date
1	The requirements to regularly publish certain datasets on the Council's website under the Local Government Transparency Code 2015, was not being fully complied with.	Moderate Risk	28/02/2026	Future Action	
2	The absence of a formally approved and documented Freedom of Information policy and procedures, has contributed to the inconsistent handling of requests and failure to consistently meet statutory deadlines.	Moderate Risk	30/04/2026	Future Action	
3	The absence of a Workforce Planning Policy and related procedures means that the Council lacks a structured framework to effectively manage and align its human resources with current and future business needs.	Low Risk	31/03/2027	Future Action	

Nuneaton & Bedworth Borough Council – Audit Progress Report

RECOMMENDATION TRACKING

Final Report Date	Audit Assignments with Open Recommendations	Assurance Rating	Recommendations Open			
			Action Due	Delayed Action Due	Delayed Future Action	Future Action
02-May-19	Miscellaneous Income				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		3	1	1	
01-Mar-22	S106 Agreements			1	1	
09-Mar-22	CCTV			2		
08-Apr-22	Mobile Phones				3	
02-May-22	Emergency Planning				2	
16-Sep-22	Business Rates				1	
29-Sep-22	Council Tax 2022-23				1	
03-Mar-23	Housing Lettings			1		
16-Aug-23	Sports Development			1		
08-Sep-23	Human Resources Management			5	1	
28-Mar-24	HEART (Home Environment Assessment & Response Team)		2	1		
31-Mar-24	Payroll Follow-up			2	2	
12-Apr-24	Leaseholder Management 2023-24			3	1	
03-Jun-24	Economic Development 2023-24			5		
04-Jun-24	Treasury Management 2023-24				1	
12-Jul-24	Absence Management 2023-24				2	
29-Jul-24	Car Park Income 2023-24			2		
22-Aug-24	Customer Feedback 2023-24			2		
06-Mar-25	Commercial Rental Income	Reasonable	3			2
06-Mar-25	Housing Rental Income 2023-24	Reasonable		4	1	1
07-Apr-25	Homelessness 2023-24	Reasonable	1	2	1	
11-Jun-25	Licensing	Reasonable	4		2	2
30-Jul-25	Grounds Maintenance 2023-24	Reasonable	1			3
14-Oct-25	Risk Management 2025-26	Reasonable				10
03-Nov-25	Corporate Governance 2025-26	Reasonable				3
		TOTALS	17	34	21	21

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

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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
Miscellaneous Income												1
Land Charges				2								
Street Naming & Numbering								1				
Community Groups Funding				1				1				
Cemeteries & Crematorium Income				3			1				1	
S106 Agreements								1				1
CCTV								2				
Mobile Phones											1	2
Emergency Planning												2
Business Rates												1
Council Tax 2022-23												1
Housing Lettings								1				
Sports Development								1				
Human Resources Management							1	4			1	
HEART (Home Environment Assessment & Response Team)				2				1				
Payroll Follow-up								2				2
Leaseholder Management 2023-24								3				1
Economic Development 2023-24							2	3				
Treasury Management 2023-24											1	
Absence Management 2023-24												2
Car Park Income 2023-24							2					
Customer Feedback 2023-24								2				
Commercial Rental Income			1	2								
Housing Rental Income 2023-24								4			1	
Homelessness 2023-24				1				2			1	
Licensing			2	2								2
Grounds Maintenance 2023-24				1								
TOTALS			3	14			6	28			6	15

Nuneaton & Bedworth Borough Council – Audit Progress Report

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	31/12/2025
Recommendation Number	8	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Lack of 2.5 years rent income for Crematorium valuing approximately £362.5k due lessee's Dignity Plc. 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. 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.	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 Action Due
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.	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

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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 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.			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.
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Job Name	Mobile Phones	Original Action Date	01/09/2022
Risk Rating	Moderate 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
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.	New contract in place with BT for provision of the EE sims from 11 April 2024 - 10th April 2026. In process of setting up reporting and exception reporting to provide analysis required. Each connection is allocated to a person, but we don't currently have any information within the portal which allocates each of those people/connections to a particular team, so I think we would need to do a piece of work to set up an appropriate structure within the portal that will then allow us to group the connections into departments/teams. We can then send that information to the relevant managers for scrutiny.

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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 then inform the direction of HR policies and procedures, to ensure that agreed principles are included and embedded.	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.

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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 Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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. 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. Consequently, employee morale and staff retention could be significantly impacted if HR-specific risks are not fully identified, effectively monitored and or managed.	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.	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 Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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 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.	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.		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.

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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 Action Due
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	31/12/2025
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 completed as soon as possible, appropriately approved, and updated annually.	Agreed	Capital Strategy went to HCR OSP on 23 rd Oct 25 and will go to the next Cabinet/Council in Nov/Dec for approval.

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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 Action Due
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.

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 Action Due
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

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Job Name	Licensing	Original Action Date	31/10/2025
Risk Rating	Moderate Risk	Revised Action Date	
Recommendation Number	8	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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.	The Licensing Team Leader will run reports periodically from Flare and Civica and reconcile the two resources, to identify any gaps and take action as appropriate.	

Job Name	Licensing	Original Action Date	31/10/2025
Risk Rating	Moderate Risk	Revised Action Date	
Recommendation Number	9	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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.	Environmental Health and Licensing Manager, and Licensing Team Leader 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 25.	

Job Name	Commercial Rental Income	Original Action Date	01/09/2025
Risk Rating	Moderate Risk	Revised Action Date	
Recommendation Number	4	Recommendation Status	Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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.	Accepted issues exasperated by lack of resource in both the Legal team and in Lanad and Property. Recruitment underway in both teams.	

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Job Name	Housing Rental Income 2023-24	Original Action Date	01/09/2025
Risk Rating	Moderate Risk	Revised Action Date	01/12/2025
Recommendation Number	3	Recommendation Status	Delayed Action Due
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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.	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.	he level of 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.

Job Name	Homelessness 2023-24	Original Action Date	30/09/2025
Risk Rating	Moderate Risk	Revised Action Date	31/03/2026
Recommendation Number	13	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
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.	We recommend that Housing identifies appropriate resource to review the former/temporary tenant rent account balances, and action taken as appropriate. For example, some debts may have passed the statute of limitation and may need to be prepared for write off in accordance with the prescribed process outlined in the CPD 24.	The AD-SH and LSM will review the overall arrangement and identify what additional capacity required for administrative support to the Homelessness function, to address the various tasks highlighted by this review, that have not/are not being undertaken currently and will pull together a Business case for presenting to the relevant portfolio holder/project board for approval. Training on Abritas to be provided (by the AD-SH) internally to staff providing covers, once they have been allocated the role	Salary savings have been identified with the Finance Business Partner which can be used to recruit the resource to deal with the arrears recovery backlog. A business case is now being produced.

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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	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

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.

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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.	

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>

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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.

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 Action Due
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.

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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
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; (i) Smart cameras on Council refuse collection vehicles; (ii) Fly tipping cameras; and (iii) Body worn video (BWV) – externalised environmental enforcement service	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).	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. 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 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.

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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 HTCC 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.

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.

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Job Name	Mobile Phones	Original Action Date	01/09/2022
Risk Rating	Low Risk	Revised Action Date	31/03/2026
Recommendation Number	3	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
The ICT Code of Conduct for Employees (ICCE) policy does not clearly outline those costs incurred due to inappropriate use will be recouped by the Council. Also, the policy has not been subject to review since 2017.	The ICCE policy should be reviewed and updated as soon as possible. A clause regarding 'the use of work phone for private use may incur the costs being recharged/recouped by the Council' should be added to the policy, as this may deter/reduce unreasonable usage, though it is appreciated that it may not be cost effective to implement for low value incidences.	The ICT Client Manager will raise the review of the ICCE policy via Information Management Group.	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	Mobile Phones	Original Action Date	31/03/2022
Risk Rating	Low Risk	Revised Action Date	31/03/2026
Recommendation Number	5	Recommendation Status	Delayed Future Action
Summary of Weakness	Recommendation	Management Response/Action Details	Status Update Comments
Data usage has not been monitored by Service Managers as the expected usage reports from the provider has not been provided to them and ICT have overlooked sending a request/reminder to the Virgin/EE account manager to follow up reports. Audit's analysis of paid invoices confirmed that billing is accurate, however due to high data usage the monthly charge per connection has been increasing every quarter since May 21 from £3.00 per month to currently £4.50 per month (excluding the £1.00 line rental).	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.	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.



AGENDA ITEM NO. 7

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	25 th November 2025
Subject:	Auditor's Annual Report
Portfolio:	Not Applicable
Responsible Officer:	Strategic Director – Corporate Resources
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
Subject to Call-in:	Not Applicable

1. Purpose of report

- 1.1. To provide the Annual Auditor's Report for 2024/25.

2. Recommendations

- 2.1. That the Auditor's Annual Report is noted.

3. Background

- 3.1. The External Auditor, Azets have been working with the Council to finalise their opinion on the value for money arrangements in place for 2024/25.

4. Body of report and reason for recommendations
 - 4.1. The AAR provides detail around the Council's value for money arrangements, recommendations to improve and management's comments regarding the recommendations.
5. Consultation with the public, members, officers and associated stakeholders
 - 5.1. Statutory Officers have been consulted and have had specific meetings with the External Auditor.
6. Financial Implications
 - 6.1. None.
7. Legal Implications
 - 7.1. None.
8. Equalities implications
 - 8.1. No equalities implications have been identified.
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. Recommendations regarding weaknesses in the governance arrangements have been reviewed and risks are being mitigated..
13. Human resources implications
 - 13.1. No direct human resource implications have been identified.
14. Options considered and reason for their rejection

- 14.1. No other options considered as the report has to be presented to Audit & Standards Committee by 30th November.

15. Conclusion

- 15.1. Although weaknesses in governance arrangements have been noted, the Council is on an upward trajectory and is working with external audit closely to ensure measures are in place to mitigate and improve.

16. Appendices

- 16.1. Please note the following appendices:

- i. Appendix A – Annual Auditor's Report 2024/25

17. Background papers

- 17.1. Please note the following background papers:

- i. Statement of Accounts 2024/25

18. Report Writer Details:

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Nuneaton and Bedworth Borough Council

Auditor's Annual Report

Years ended 31 March 2024 and 31 March 2025

November 2025

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Headlines from our audit

Headlines from our audit

Purpose of this report

This Auditor’s Annual Report provides a summary of the findings and key issues arising from our audit of the Council for 2024/25. This report has been prepared in line with the requirements set out in the Code of Audit Practice and supporting guidance published by the National Audit Office and is required to be published by the Authority alongside the annual report and accounts.

Our responsibilities

Financial statements	Narrative report and Annual Governance Statement	Value for money
We provide an opinion as to whether the accounts give a true and fair view of the financial position of the Authority and of its income and expenditure during the year. We confirm whether the accounts have been prepared in line with the CIPFA/LASSAC Code of Practice in Local Authority Accounting ('the Code'). <u>2023/24</u> Due to the timing for draft accounts provided for audit, following the December 2024 backstop which resulted in the prior year audit being disclaimed, we were unable to complete sufficient work to regain assurances and support a clean opinion before the statutory backstop date of 28 February 2025. As such we disclaimed our audit report for 2023/24. <u>2024/25</u> Due to the challenges of undertaking an audit where the previous 2 years have been disclaimed because of the local authority backstop, it will not be possible for us to undertake sufficient work to support an unmodified audit opinion ahead of the backstop date of 27 February 2026. The limitations imposed from this lack of assurance on opening balances and closing balances in key areas means we are unable to form an opinion on the 2024/25 financial statements. We therefore intend to disclaim our audit report.	We assess whether the Narrative report and Annual Governance Statement is consistent with our knowledge of the Authority. <u>2023/24</u> We were unable to conclude that the other information included in the statement of accounts is consistent with our knowledge of the Council and Group and the financial statements we have audited. This is because it was not possible to undertake sufficient audit work to reach a conclusion before the statutory backstop date of 28 February 2025. <u>2024/25</u> Our audit of the 2024/25 financial statements is ongoing, and we have yet to conclude on this work.	We are required under Section 20(1)c of the Local Audit and Accountability Act 2014 to satisfy ourselves that the Council has made proper arrangements for securing economy, efficiency and effectiveness (value for money) in its use of resources and provide a summary of our findings in the commentary in this report. We are required to report if we have identified any significant weaknesses as a result of this work. We have identified one significant weakness in the arrangements at the Council. Further detail is provided in this report.

Headlines from our audit

Statutory powers

We may exercise other powers we have under the Local Audit and Accountability Act 2014. These powers include issuing a Public Interest Report, issuing statutory recommendations, issuing an Advisory Notice, applying for a judicial review, or applying to the courts to have an item of expenditure declared unlawful.

Public interest report	Statutory recommendations	Advisory notice	Judicial review	Application to the court
We may issue a Public Interest Report if we believe there are matters that should be brought to the attention of the public. If we issue a Public Interest Report, the Authority is required to consider it and to bring it to the attention of the public. <u>2023/24 and 2024/25</u> We have not issued a Public Interest Report during the periods.	We may make written recommendations to the Council under Schedule 7 of the Local Audit and Accountability Act. If we do this, the Authority must consider the matter at a general meeting and notify us of the action it intends to take (if any). We also send a copy of this recommendation to the relevant Secretary of State. <u>2023/24 and 2024/25</u> We have not made any statutory recommendations during the periods.	We may issue an advisory notice if we believe that the Council, or an officer of the Council, has, or is about to, incur an unlawful item of expenditure or has, or is about to, take a course of action which may result in a significant loss or deficiency. If we issue an advisory notice, the Authority is required to stop the course of action for 21 days, consider the notice and then notify us of the action it intends to take and why. <u>2023/24 and 2024/25</u> We have not issued an advisory notice during the periods.	We may make an application for judicial review of a decision of the Council, or of a failure to act by the Council, which it is reasonable to believe would have an effect on the accounts of that body. <u>2023/24 and 2024/25</u> We did not make an application for judicial review during the periods.	We may apply to the courts for a declaration that an item of expenditure the Authority has incurred is unlawful. <u>2023/24 and 2024/25</u> We have not applied to the courts during the periods.

Headlines from our audit

Findings and recommendations

Findings from our financial statements audit	Recommendations arising from our financial statements audit	Key recommendations arising from our value for money work	Other recommendations arising from our value for money work
Detailed findings from our audit of the financial statements, including our consideration of significant risks, are communicated in the following reports: • audit opinion on the financial statements for the year ended 31 March 2024 and 31 March 2025. • audit completion (ISA 260) report for 2023/24 and 2024/25 to Those Charged with Governance Our audit completion report for 2023/24 was reported to the Council’s Audit & Standards Committee on 25 February 2025. Our audit findings report for 2024/25 will be reported to the Council’s Audit & Standards Committee in February 2026. Requests for our audit completion (ISA 260) report should be directed to the Council.	Recommendations relating to internal controls and other matters arising from our financial statements work are contained in the audit completion (ISA 260) report. None of the recommendations we made in the 2023/24 financial statements audit work reflected significant weaknesses in the Council’s arrangements to secure economy, efficiency and effectiveness in the Council’s use of resources and, as such, are not considered key recommendations. Our financial statements audit work for 2024/25 is ongoing.	We provide a summary of our findings in respect of value for money in the commentary in this report. Where we identify significant weaknesses as part of our review of the Council’s arrangements to secure value for money, we make key, or essential, recommendations setting out the actions that should be taken by the Council. We have made one key recommendation this year.	We make other recommendations if we identify areas for improvement which do not relate to identified significant weaknesses We have made one other recommendations this year.

Value for money



Value for money 2023/24

We are required to consider whether the Council has established proper arrangements to secure economy, efficiency and effectiveness in its use of resources, as set out in the NAO Code of Practice 2024 and the requirements of Auditor Guidance Note 3 ('AGN 03').

We have completed our value for money work. Our detailed findings are reported in the following commentary in this report.

We have concluded there is a significant weaknesses in the Council's arrangements. Our auditor's report will refer to the significant weakness in arrangements we have identified.

Reporting criteria	Planning – risk of significant weakness identified?	Final – significant weakness identified?	Recommendations made		
			Statutory	Key	Other
Financial sustainability How the body plans and manages its resources to ensure it can continue to deliver its services	Yes	No- We have considered the impact of the findings for the 2023/24 arrangements, within our audit plan we had classified this as a risk relating to Financial Sustainability however, we have now concluded this risk relates to Governance.	No	No	No
Governance How the body ensures it makes informed decisions and properly manages risk	No	Yes	No	Yes	Yes
Improving economy, efficiency and effectiveness How the body uses information about its costs and performance to improve the way it manages and delivers its services	No	No	No	No	No

Value for money 2024/25

We are required to consider whether the Council has established proper arrangements to secure economy, efficiency and effectiveness in its use of resources, as set out in the NAO Code of Practice 2024 and the requirements of Auditor Guidance Note 3 ('AGN 03').

We have completed our value for money work. Our detailed findings are reported in the following commentary in this report.

We have concluded there is a significant weaknesses in the Council’s arrangements. Our auditor’s report will refer to the significant weakness in arrangements we have identified.

Reporting criteria	Planning – risk of significant weakness identified?	Final – significant weakness identified?	Recommendations made		
			Statutory	Key	Other
Financial sustainability How the body plans and manages its resources to ensure it can continue to deliver its services	No	No	No	No	No
Governance How the body ensures it makes informed decisions and properly manages risk	Yes	Yes	No	Yes	Yes
Improving economy, efficiency and effectiveness How the body uses information about its costs and performance to improve the way it manages and delivers its services	No	No	No	No	No

Value for money: significant weaknesses and key recommendations 2023/24 and 2024/25

The significant weakness we have identified and the key recommendations made are set out below. Our detailed commentary is set out in this Auditor’s Annual Report.

Significant weakness identified	Criteria	Sub criteria	Key recommendation
Governance How the body ensures it makes informed decisions and properly manages risk	Governance	How the body ensures effective processes and systems are in place to support its statutory financial reporting requirements	The Council should ensure that adequate resources and sharing of corporate knowledge are allocated within the Finance Team to effectively support the annual accounts audit process and strengthen financial governance, with the aim of rebuilding assurance to achieve a return to an unqualified audit opinion.

Value for money

Councils are responsible for putting in place proper arrangements for securing economy, efficiency and effectiveness in their use of resources. This includes managing key operational and financial risks and taking properly informed decisions so that they can deliver their objectives and safeguard public money.

As auditors, we are required to consider whether the Council has established proper arrangements to secure economy, efficiency and effectiveness in its use of resources.

We performed risk assessment procedures at the audit planning stage to identify any potential areas of significant weakness which could result in value for money not being achieved. This included considering the findings from other regulators and internal auditors, reviewing records at the Council and performing procedures to gain an understanding of the high-level arrangements in place. The resulting risk areas we identified were set out in our audit plan.

For each identified risk area, we performed further procedures during our audit to consider whether there were significant weaknesses in the processes in place at the Council to achieve value for money.

The NAO Code of Audit Practice requires us to structure our commentary on VFM arrangements under three reporting criteria: financial sustainability, governance and improving economy, efficiency and effectiveness.

We have set out on the following pages our commentary and findings on the arrangements at the Council in each area.

In addition to our financial statements work we performed a range of procedures to inform our value for money commentary, including:

- Meeting with management and regular meetings with senior officers
- Interviews as appropriate with other executive officers and management
- Review of Council and committee reports and attendance at audit committee meetings
- Reviewing reports from third parties
- Considering the findings from our audit work on the financial statements
- Review of the Council's Annual Governance Statement and Narrative Report and other publications
- Considering the work of internal audit and the counter fraud function
- Consideration of other sources of external evidence.

Value for money

Overview

Nuneaton and Bedworth Borough Council (the Council) is a borough council in Warwickshire. It works with four other district and borough councils and Warwickshire County Council (which includes Warwickshire Fire and Rescue Service). The administrative area also includes the Warwickshire Police and Crime Commissioner and Warwickshire Constabulary. The Council serves a population of circa 136,000 people. The Council provides social housing from an in-house Housing Revenue Account and has entered into a number of large capital and investment schemes to promote regeneration and attract business to the area. Some of these investment schemes carry financial risk. The Council faces, over the medium term, growing financial challenge and increasing uncertainty over its longer-term income predictions.

Like all councils and the wider local government sector, Nuneaton and Bedworth Borough Council continues to face significant challenges. The sector faces high levels of uncertainty over future levels of government funding and, for a number of years, has had to plan on the basis of single-year settlements. This makes it harder to produce comprehensive multi-year plans as part of medium-term financial planning. The government has signalled an intention to return to multi-year settlements in the future and announced a national overhaul of local government, reorganising multi-tier council areas into a series of unitary authorities with devolved powers at a regional, mayoral level. The changes proposed would impact Nuneaton and Bedworth Borough Council which, like all Boroughs, would be absorbed into a larger unitary council from 1 April 2028 according to the current planned timescales. Work is currently ongoing to present options for reorganisation in response to government requirements.

High inflation over recent years has increased cost pressures on all councils' revenue and capital expenditure, indicating reduced certainty about what the future may hold, economically. High interest rates have provided the Council with fortuitously higher than expected interest income on cash balances, but the combination of higher inflation and higher interest rates impacts local communities, including the community the Council serves in Nuneaton and Bedworth. This can lead to increases in demand for council services and impact on council income in areas such as car parking and collection rates for council tax, business rates and rents.

The Local Government Association continues to estimate that the costs to councils of delivering their services will exceed core funding in the future. Nationally, there has been an increase in the number of councils issuing s114 notices or indicating one may be likely.

Nuneaton and Bedworth Borough Council has arrangements in place to mitigate the macro-risks posed by the national context and, at present, a reasonable level of general fund reserves. However, these could be significantly depleted over the next few years if macro-economic conditions are unfavourable and the uncertainty inherent in the Council's cost and income assumptions do not crystallise in the Council's favour.

Value for money

Local government reorganisation

On 5 February 2025 the Minister for State for Local Government and English Devolution asked all councils in two-tier areas to develop unitary proposals, which will bring together upper and lower tier local government services in new unitary councils. Warwickshire is in the third wave of reorganisation. Final detailed proposals are to be submitted in November 2025, with the potential establishment of a shadow Council in May 2027 and the transition to the unitary authority in April 2028, marking the cessation of the existing councils in Warwickshire.

This means the next few years will be ones of significant change and uncertainty. Councils will need to consider the risk of the loss of key individuals and corporate memory in the lead-up to and transition into the new unitary authority. There may be an incentive for more short-term decision making in respect of the use of reserves and concerns, where reserves have been built up over previous years, either via strong management or for the implementation of a particular redevelopment scheme, that these reserves may end up being repurposed to cover an overspend incurred by a successor body. Whilst Authorities retain powers to make some spending decisions in advance of the reorganisation, it is important to make sure that proper governance arrangements remain in place, and that due consideration is given to any schemes which are likely to run beyond the date of transition to the new body.

Transition and reorganisation on this scale will require significant management time to ensure the benefits are identified and plans are in place to realise them post-transition. It may also require experience and skill-sets outside of the 'business as usual' skills and experience in place at the Council. It will be important for the Council to assess the skills it has in place, identify any gaps and take steps to mitigate those gaps to reduce risks arising during or post transition. Plans and arrangements for reorganisation will utilise increasing capacity of senior officers and this may divert attention from the realisation of savings plans or make the achievement of previously planned savings less likely. Such risks will need to be incorporated into updated medium term financial plans.

Members, and in particular audit committee members, will need to be satisfied that where earmarked reserves are being utilised, they are being utilised for their intended purpose and that reserve balances remain at an appropriate and prudent level, as well as be satisfied that balanced budgets continue to be set up to and including the Council's final period of account, in line with the statutory duties placed on key staff. Effective governance and stewardship will remain key, particularly in the operation of the audit committee, delivery of internal audit and execution of the risk management process.

Value for money: financial sustainability

This relates to how the Council plans and manages its resources to ensure it can continue to deliver its services.

We considered the following areas:

- how the Council identifies all the significant financial pressures that are relevant to its short and medium-term plans and builds these into the plans;
- how the Council plans to bridge its funding gaps and identifies achievable savings;
- how the Council plans finances to support the sustainable delivery of services in accordance with strategic and statutory priorities;
- how the Council ensures that its financial plan is consistent with workforce, capital, investment, and other operational plans, which may include working with other local public bodies as part of a wider system; and
- how the Council identifies and manages risks to financial resilience, such as unplanned changes in demand and assumptions underlying its plans.

Summary

The Council's arrangements for financial sustainability are appropriate and largely effective. Budget-setting and financial monitoring processes are transparent, and financial governance is supported by oversight through the Audit & Standards Committee. The Section 151 Officer retains statutory responsibility for sound financial management.

We have not identified any significant weaknesses in the arrangements in 2023/24 or 2024/25 in place to support financial sustainability.

Value for money: financial sustainability

Financial Performance 2023/24

The General Fund revenue net expenditure budget for 2023/24 of £16,906,464 was approved in February 2023 with a contribution expected to general reserve of £3k. The final outturn position has resulted in net expenditure of £17,755,040 with a contribution to general reserve of £265k. Although there was an increase in expenditure in 2023/24 compared to budget, there was also a greater increase in the income received, resulting in a higher contribution to reserves than originally budgeted.

The General Fund Reserve, which serves as the Council's primary buffer for unforeseen financial pressures, was £16.448m (2022/23: £14.550m), an increase of £1.898m from the prior year. This is made up of the contribution of the general fund above of £0.3m and a contribution to earmarked reserves of £1.5m. Reserve levels remain reasonable, providing resilience against short-term financial shocks.

The HRA revenue net expenditure budget for 2023/24 of £254k was approved in February 2023 with a drawdown from general reserve expected. The final outturn position has resulted in net surplus of £27k which is an underspend of £281k. Although cost pressures have been seen for utility price increases, increased expenditure related to this has been offset by other underspends. Savings have been seen in relation to property maintenance, de-carbonisation work and material costs. The main savings areas to note are within Supervision and Management and service charge income. The main areas of overspend are within Independent Living Schemes, housing system costs and reduced rental income.

The Council's capital programme covers many projects for both the General Fund and Housing Revenue Account. General Fund projects are developed in line with strategies reported to Cabinet/Council and are funded through Section 106 developer contributions, grant funding (from the Government and other external providers), internal and external borrowing plus capital receipts generated through asset sales. HRA projects are mainly for refurbishment of council houses, disabled adaptations to council housing plus new build. They are funded from HRA reserves, capital receipts from Right to Buy plus grant income. The capital budget for 2023/24 of £106,627,852 was approved in February 2023 at Council with an updated budget requirement reported of £111,917,651 to Cabinet in July 2023 after the final 2022/23 outturn was reported. £86,070,151 was general fund expenditure and £25,847,500 was HRA expenditure. The programme for the General Fund underspent by £61.5m in year. This is mainly due to an underspend of £39.2m in Business and Regeneration due to phases 1 and 2 of Grayson Place and the Council's Bridge to Living project, with Grayson Place phase 2 being finalised with construction partners and Bridge of Living options being finalised due to the rising costs. In addition to this, there was an underspend of £21.9m in Public Services mainly attributable to the delay in construction for the Bedworth Physical Activity Hub which was deferred due to discussions over the rise in costs since the project was agreed, and amendments to the original plan as a result of this. The programme for the HRA underspent by £8.5m in year but a large proportion of this underspend is due to structure/ concrete repairs.

Value for money: financial sustainability

Financial Performance 2024/25

The General Fund revenue net expenditure budget for 2024/25, totalling £19.131 million, was approved in February 2024, with an anticipated contribution to the General Reserve of £2k. The final outturn position shows net expenditure of £21.153 million, resulting in a contribution to the General Reserve of £0.251 million. During the year, the Council experienced a range of cost and income pressures, which were regularly reported through the quarterly monitoring process. Despite these challenges, savings and additional income were also realised. Overall, the Council achieved a favourable variance of £2.586 million on the provision of services, outperforming its original financial plan.

The General Fund Reserve, which serves as the Council's principal safeguard against unforeseen financial pressures, closed at £21.373 million, representing an increase of £4.925 million from the previous year (2023/24: £16.448 million). The reserve position remains robust, providing resilience against short-term financial shocks.

The HRA revenue net expenditure budget for 2024/25 of £0 was approved in February 2024 with a contribution from general reserve expected of £5k. The final outturn position has resulted in net surplus of £409k which is an underspend of £409k. Although cost pressures were expected for utility price increases, expenditure was not at the levels initially anticipated and other underspends have offset increased depreciation costs which are utilised to fund the capital programme. Savings have been seen in relation to salaries due to vacancies, transport costs and grounds maintenance costs. The main savings areas to note are within rental income and service charge income. The main areas of overspend are within repairs and maintenance and disrepair claims.

The 2024/25 capital budget of £76.093 million was approved in February 2024, with subsequent in-year updates resulting in a final approved budget of £77.395 million. During the year, the capital budget profile was revised to a three-year plan to provide greater stability and reduce the scale of in-year budget adjustments. The General Fund capital programme recorded an underspend of £19.406 million, largely due to the timing of regeneration projects and the construction of the new Bedworth Physical Activity Hub. The HRA capital programme also reported an underspend of £5.262 million, mainly related to the delivery of new housing developments and the New Street project.

The financial arrangements in place during 2023/24 and 2024/25 have seen the Council contribute to general fund reserves and underspend on HRA and Capital budgets. The expenditure has been higher than budgeted in both years, which may indicate challenges with financial planning, but these have been offset by increases in income to result in a net surplus position. Overall, the arrangements are deemed effective.

Minimum Revenue Provision

In 2024/25 the Council's MRP as a % of total borrowing for general fund debt was 5.2%. The percentage of 5.2% is above our recommended 3% benchmark at 2024/25 year end. This indicates the council have a prudent provision set aside to repay general fund debt.

Value for money: financial sustainability

Medium Term Financial Strategy

The Council presented their General Revenue Budget for 2025/26 to the February 2025 Cabinet Committee and approved by the Council in February 2025.

The following budget for 2025/26 was

	2025/26
Deficit to fund	£874,000
Councillor Funding Decisions	(£884,000)
Total Deficit/ (Surplus)	(£10,000)

The Councillor funding decisions included an increase in Council Tax of 2.99%, an increase in fees and charges of 3% across all areas except planning, licensing, car parks and green waste and an increase in a transformational savings target of £100k.

The medium term financial plan (MTFP) was also presented to the February 2025 Council meeting.

	2025/26	2026/27	2027/28	2028/29
	£'000	£'000	£'000	£'000
Net Expenditure	20,784	22,245	24,134	25,154
Additional Pressures/ Opportunities	0	-1,855	-2,125	-2,250
Total Funding	-20,784	-18,314	-17,646	-18,206
Deficit	0	2,076	4,363	4,698

Value for money: financial sustainability

The Council have based the MTFP with the assumptions that they still have an uncertainty over how the Government will look to fund local authorities into the future but it has been suggested that a multiyear settlement is due in December 2025. This will provide a greater level of certainty regarding funding and any resulting expenditure pressures.

A summary of assumptions included within the MTFP is listed below:

- 3.0% salary increase in 2026/27, reducing to 2.5% salary from 2027/28 onwards
- Inflation but only where contractual obligations exist
- Council Tax referendums will remain at 2.99% on a Band D and this is built in going forwards
- A 1% tax base increase per annum on Council Tax
- NNDR is assumed to face a reset in 2026/27, but transitional support has been built in
- New Homes Bonus will cease from 2026/27
- Planning fee income is assumed to remain at the same level as included for 2024/25 but planning performance agreements and pre-application income are likely to generate higher levels of income than currently forecast

A level of reserves is still set to be drawn down in 2025/26 with contributions also being made for future capital and strategy works. The Council currently has no detailed saving plans in place but there is a budgeted saving of £500k per annum on vacancies. A Transformation Strategy is currently underway and will be reported prior to April 2026. Due to the multiyear settlement, the Council will have more certainty in 2026/27 over funding of services and therefore a formal transformation approach and known savings targets will enable a plan. There are risk earmarked reserves in place although the Council do not plan to rely on these reserves to initially bridge any deficits.

Value for money: financial sustainability

HRA Budget

The 2025/26 HRA budget was approved by the Council in February 2025. The Council presented a balanced budget which detailed expenditure of £32.070 million.

The budget was prepared with the following assumptions:

- A pay award provision of 4% for 2025/26
- An increase to contracted costs due to inflation
- Rental income has been increased at 2.7%
- Treasury budgets are in line with interest rate forecasts and borrowing expectations

A contribution from earmarked reserves of £200k has been included to fund the implementation of the new housing system following a tendering exercise.

Significant underspends have been seen in recent years which has helped contribute to reserve balances but where planned works haven't been completed, this poses further risk to the cost base into the future.

Value for money: financial sustainability

Capital Plans

The Council is undertaking significant capital projects and capital expenditure in recent years. The Council approved the commencement of a large regeneration programme in Nuneaton and Bedworth towns in 2017 and significant levels of grant funding have been secured to support delivery.

The Hampton by Hilton hotel opened in September 2024 as part of Grayson Place phase 1, and phase 2 of the programme is progressing well after both internal and external review to ensure a sustainable programme is delivered. The Bedworth Physical Activity Hub was also reviewed and cost engineered to a reduced budget of £30.6m (from £34m) due to cost inflations and interest rate increases that was not originally in the forecast cost of the project. This project is due to open in spring 2026.

The Council approved the three year General Fund capital plan at the February 2025 meeting. The 2025/26 HRA capital plan was also approved at this meeting. Details are shown below:

	2025/26	2026/27	2027/28
	£'000	£'000	£'000
Business & Regeneration	9,783	0	0
Resources and Customer Services	100	100	100
Housing	8,899	11,069	6,499
Planning and Enforcement	0	0	0
Leisure, Communities and Health	22,217	4,803	750
Capital: General	50	50	50
General Fund Capital	41,049	16,022	7,399

Value for money: governance

This relates to the arrangements in place for overseeing the Council's performance, identifying risks to achievement of its objectives and taking key decisions.

We considered the following areas:

- how the Council monitors and assesses risk and gains assurance over the effective operation of internal controls, including arrangements to prevent and detect fraud;
- how the Council approaches and carries out its annual budget setting process;
- how the Council ensures effective processes and systems are in place to ensure budgetary control; to communicate relevant, accurate and timely management information (including non-financial information where appropriate); supports its statutory financial reporting requirements; and ensures corrective action is taken where needed, including in relation to significant partnerships;
- how the Council ensures it makes properly informed decisions, supported by appropriate evidence and allowing for challenge and transparency. This includes arrangements for effective challenge from those charged with governance/audit committee; and
- how the Council monitors and ensures appropriate standards, such as meeting legislative/regulatory requirements and standards in terms of officer or member behaviour (such as gifts and hospitality or declarations/conflicts of interests) and for example where it procures or commissions services.

Summary

We have identified a significant weaknesses in the Council's arrangements in 2023/24 and 2024/25 in relation to the finance team capacity and knowledge to support the annual financial statement audit process.

The Council has effective arrangements in place for overseeing the Council's performance, identifying risks to the achievement of its objectives, the proper management of its risks and taking key decisions.

Value for money: governance

Internal Audit

A detailed risk register is reported quarterly to scrutiny panels and are RAG rated. Management team discuss the risks quarterly and update for any known changes prior to reporting. Internal Audit has been outsourced to the Central Midland Audit Partnership (CMAP) in 2024/25 but prior to this, in 2023/24 the Internal Audit Function was resourced internally and the team worked directly for the Council. An audit plan is produced annually and reported to Audit and Standards Committee and an update is presented to this Committee in November. The Council also has a dedicated Fraud Officer.

The Public Sector Internal Audit Standards require that the Internal Audit Plan is developed by taking into account the organisation's risk management framework and based upon a risk assessment process undertaken with the Leadership Team and the Audit and Standards Committee. The Internal Audit Plan for 2024-25 was approved by the Audit and Standards Committee on 14th March 2024. The results of the Internal Audit team's work are discussed at the Audit and standards Committee, which allows management and Those Charged With Governance to actively manage the risks.

The Internal Audit Opinion for 2024/25 was presented to the September 2025 Audit and Standards Committee.

The opinion noted that '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'.

The opinion for 2024/25 concluded that 'reasonable assurance can be given that the Council's framework of governance, risk management and control is adequate and effective'. However, this opinion was given with caveats around the amount of testing based on unforeseen circumstances. Work has been undertaken around risk management and corporate governance as part of the 2025-26 assignments and per the latest Internal Audit Report which was presented to the September 2025 Audit and Standards Committee, these were in progress.

The 2023/24 Internal Audit Opinion noted that approximately 65% of the work set out in the 2023/24 Internal Audit Plan was completed. The opinion also gave 'satisfactory assurance on the overall adequacy and effectiveness of the Council's framework of governance, risk management and control'. Of the sixteen audit opinions given in the year, five were given limited assurance opinions and three of these related to work planned in 2022/23 but carried into the 2023/24 Internal Audit work. The limited assurance opinions for work planned in 2023/24 related to economic developments and treasury management.

Per the Internal Audit progress report presented to the September 2025 Audit and Standards Committee, 94 recommendations remain open. Of these, 20 are assessed as moderate risk and the remainder as low risk, with no critical or significant risk recommendations outstanding. While the number of open recommendations appears high, this position is largely attributable to changes made to the Internal Audit follow-up process during 2025, as well as the unexpected passing of the former Chief Internal Auditor in 2024/25. Under the revised approach, follow-up audits are no longer undertaken after an initial review. Instead, once a recommendation is accepted, managers are required to upload evidence of implementation to a central portal for review and sign-off. This has replaced the previous process in which recommendations could remain unverified until the next audit cycle, which in some cases occurred several years later. The shift in process has therefore resulted in a backlog of historic recommendations becoming visible, rather than indicating that recommendations have been disregarded. Management have confirmed that significant work has taken place during 2025 to address this backlog and embed the new system, and progress is now being made to bring the position up to date. We have raised a recommendation to support continued monitoring of the new process and to ensure that open audit recommendations are followed up and implemented in a timely manner.

Value for money: governance

Council Arrangements

Monthly monitoring meetings are undertaken by finance with service managers and assistant directors with any risks highlighted to the S151. The S151 updates the senior leadership team in a scheduled meeting and cabinet informally on a monthly basis on financial performance. Quarterly reports on both capital and revenue budget performance are taken to cabinet. Treasury is reported quarterly to Audit & Standards (A&S) Committee in line with the Council's constitution with the annual strategy reported to A&S and Council. Training of members is also undertaken for treasury and budgeting annually.

All statutory officers are included on the regular management team meeting and remain for the whole meeting. From Feb 2025, an additional meeting including just the Monitoring Officer, Section 151 Officer, Head of Paid Service and Chief Internal Auditor will take place monthly to strengthen governance arrangements.

Formal reporting takes place on a quarterly basis to the Finance and Public Services Overview and Scrutiny Panel - to the meeting closest to the quarter end as possible, individual portfolio dashboards are presented to Chief officers for each service area which outlines service performance as well financial performance for scrutiny, review and challenge.

The council have a corporate governance group (Assistant Directors and MO) that is chaired by the Assistant Director - Governance & Democracy that meets every 6 weeks to review policies and procedures, legislative changes and data protection. Any issues or potential risks are then reported to the management team for consideration. A policy is in place for gifts and hospitality and members and officers follow a process for reporting declarations of interest.

Corporate Peer Review

The Council was part of a Corporate Peer Review in October 2025. The Council will receive the results and any recommendations once this work has been concluded.

Local Government Ombudsman (LGO)

As part of our commentary, we considered the number of complaints upheld and rectified by the Council (covering the period 1 April 2023 to 31 March 2025) to identify any potential concerns or need for improvement.

In 2023/24, per annual letter from ombudsman there were 9 upheld decisions, 100% of cases were complied with ombudsman recommendations and 1 satisfactory remedy decision was provided by the organisation.

Between 1 April 2024 to 31 March 2025, the Ombudsman dealt with 24 complaints. Of these, 7 were not for or not ready for the Ombudsman to investigate and the Ombudsman assessed and closed 15 complaints. Two complaints were investigated and upheld. In both cases the Ombudsman was satisfied with the actions taken and there was 100% compliance rate with recommendations.

Value for money: governance

Timeliness of preparation and publication of the Statement of Accounts

2023/24 Arrangements

The predecessor auditor identified a key recommendation to the Council to “*ensure that its finance team is sufficiently resourced, with the appropriate skills, to ensure that the issues that have delayed completion of the 2021/22 financial statements are resolved. The Council needs to prepare high quality financial statements for 2022/23 and later years which are supported by appropriate reports and working papers to enable audits to proceed with minimal issues*”. As part of our 2023/24 audit we identified that the council was behind by two financial years on the publication of its accounts due to issues in retaining key finance team members resulting in a lack of capacity within the finance team. We made a key recommendation that “*the council should ensure it has sufficient resource within its finance team in order to ensure it complies with statutory publication deadlines for the annual accounts as well as providing capacity to support the annual audit process*”.

2024/25 Arrangements

In 2024/25, the unaudited Statement of Accounts for the year ended 31 March 2025 was issued for inspection ahead of the statutory deadline of 30 June 2025, representing a positive achievement for the Council and demonstrating continued progress in meeting its financial reporting obligations. However, during the audit process, unforeseen circumstances within the Finance Team affected the Council’s ability to provide timely responses to audit queries. The reliance on a single point of contact for managing audit requests has further impacted the pace of progress, resulting in delays to the audit timetable. While the Council has already taken steps to address capacity constraints within the Finance Team, further work is required to strengthen resilience and ensure continuity during periods of staff absence or competing priorities. It is recommended that the Council continues to build on this progress by implementing a structured approach to training and knowledge sharing across the team. This will enable a broader range of staff to respond effectively to audit requests and reduce dependency on individual team members.

Overall, the Council’s achievement in publishing the unaudited accounts by the statutory deadline reflects strong commitment to financial governance and compliance. Continued focus on developing internal capacity will enhance the Council’s ability to maintain timely and effective engagement with external audit processes in future years. However, we continue to recognise a significant weakness in relation to the finance teams capacity and knowledge to support the annual financial statement audit process. **We recommend that the Council should ensure that adequate resources and sharing of corporate knowledge are allocated within the Finance Team to effectively support the annual accounts audit process and strengthen financial governance, with the aim of rebuilding assurance to achieve a return to an unqualified audit opinion.**

Value for money: improving economy, efficiency and effectiveness

This relates to how the Council seeks to improve its systems so that it can deliver more for the resources that are available to it.

We considered the following areas:

- how financial and performance information has been used to assess performance and identify areas for improvement;
- how the Council evaluates service quality to assess performance and identify areas for improvement;
- how the Council ensures it delivers its role within significant partnerships and engages with stakeholders it has identified, to assess whether it is meeting its objectives; and
- where the Council commissions or procures services, how it assesses whether it is realising the expected benefits.

Summary

We have not identified any significant weaknesses in the Council's arrangements relating to improving economy, efficiency and effectiveness in 2023/24 or 2024/25. The Council has effective arrangements in place for using financial and performance information to make informed decisions for improving the way it manages and delivers services and working with partnerships effectively.

Value for money: improving economy, efficiency and effectiveness

Performance Reporting Arrangements

In 2023/24 and 2024/25 the Council had a Corporate Plan which outlined the Council's strategic plan, themes, and priorities. 2024/25 was the last full year of the Council's previous Corporate Plan, Building a Better Borough.

Under this plan, quarterly performance reports were presented to four overview and scrutiny panels, with each panel scrutinising performance related to a specific area. These panels were Business, Regeneration and Planning Overview and Scrutiny Panel, Environment and Leisure Overview and Scrutiny Panel, Health and Corporate Resources Overview and Scrutiny Panel and Housing and Communities Overview and Scrutiny Panel. Panels receive specific quarterly finance and performance reports for the services falling within their remit. Both Management Team and the OSP review performance and reasons for any significant variances to targets, with actions or mitigations considered and agreed where appropriate.

Delivering our Future Plan outlines the Council's strategic plan, themes, and priorities. The indicators are monitored regularly and are reported to Management Team, Cabinet and Overview and Scrutiny Panels.

Changes to Procurement Act

The Council has updated their Procurement Policy in line with the changes in Procurement Act 2023. The key changes that the Council made to comply with this act were reported to the February 2025 Audit and Standards Committee.

Value for money: improving economy, efficiency and effectiveness

Performance Reporting Arrangements

The Council has four Overview and Scrutiny Committees which report into Cabinet Committee. These committees receive Q4 performance updates at the June meeting of each committee. Below is a summary of the trends in the performance indicators compared to the prior year for both 2023/24 and 2024/25. The Council measures performance based on comparing the in-year performance to the prior year performance.

Committee	2023/24	2024/25
Business, Regeneration and Planning Overview and Scrutiny Panel	Improved – 2 Same – 3 Declined – 2	Improved – 1 Same – 2 Declined – 4
Environment and Leisure Overview and Scrutiny Panel	Improved – 0 Same – 4 Declined – 2	Improved – 2 Same – 2 Declined – 2
Housing and Communities Overview and Scrutiny Panel	Improved – 3 Same – 3 Declined – 1 No trend – 1	Improved – 2 Same – 2 Declined – 2 No trend – 1
Health and Corporate Resources Overview and Scrutiny Panel	Improved – 2 Same – 4 Declined – 0	Improved – 3 Same – 1 Declined – 3

Overall, the Council have a number of indicators that have declined in 2024/25 compared to 2023/24. These are mainly in relation to Business, Regeneration and Planning and Health and Corporate Resources and indicated that the Council’s performance has overall declined in 2024/25. It is important the council reflect on the reasons for the decline in performance indicators and consider a plan of action to improve performance indicators for future years.

Value for money: improving economy, efficiency and effectiveness

Partnerships

The Council has strategic partnerships in a number of areas and works closely with neighbouring authorities to deliver these partnerships.

The HEART partnership is a partnership that NBBC are the lead authority for with the whole of Warwickshire being members of. The Council is also involved in the Sherbourne Recycling Ltd alongside seven other local authorities.

The Shareholder Panel receives quarterly reports in relation to the Council's companies and shareholdings.

Budgeting for both capital and revenue, performance of the team and measurement against targets set by the partnership board are reported quarterly.

The HEART partnership is a shared service. Budgeting for both capital and revenue, performance of the team and measurement against targets set by the partnership board are reported quarterly. Performance is reported to the OSP's of all participating authorities and the Warwickshire Housing Board which is a subgroup of the Warwickshire Health & Wellbeing Board.

Group

The Council has two wholly owned subsidiaries – NABCEL and Grayson Place Limited (established in 2024/25). NABCEL Shareholder Committee meetings were in place where financial monitoring reports and business performance reports were issued and discussed to enable review and scrutiny of performance. A business plan update for 2021-2025 was also reported at the January 2024 shareholder committee meeting.

The last shareholder committee meeting was held in January 2024 and the managing director of NABCEL has recently left, the council are currently looking to fill this vacancy. A former non-executive director of the company is currently filling this position in the interim.

Grayson Place Ltd has been established in 2024/25. The Council financially supported the subsidiary in 2024/25. The Council monitor the performance of Grayson Place Ltd through monthly updates from the hotel, which are analysed by finance and a deep dive is undertaken quarterly. Reports are also presented to a shareholder panel which allows challenge and scrutiny.

Value for money: improving economy, efficiency and effectiveness

New Corporate Plan

The Council have introduced a new Corporate Plan, which was approved by the Council in April 2025. The new plan 'Building Communities 2025-2029' focuses on four areas:

- Place and Prosperity
- Housing, Health and Communities
- Green Spaces and Environment
- Your Council

The 2025-2029 plan is supported by a 1-year delivery plan. The expectation is that the Delivery Plan will sit underneath the Corporate Plan and will be approved by Cabinet each year to ensure the Delivery Plan accommodates any changes required whether that be due to legislation, new and/or emerging projects and/or strategic aims to be achieved.

The Council also undertake a number of different measures to monitor performance. These include:

- Comparing the Council performance to National targets
- External bodies such as external and internal audit
- Deep dives
- LGA peer review
- Power BI performance monitoring and presenting this to committees. The Council are planning to implement a dashboard which details performance and can be presented and monitored centrally using Power BI. The Council intend to implement this by the end of 2026.
- A dashboard presented to the Corporate Executive Team (CET), dashboard published for Overview and Scrutiny Panels (OSP) and the Council are looking to implement a dashboard that is presented to the Senior Leadership Team (SLT)
- Monitoring Officer gives SLT a dashboard in power BI for projects, introduced as part of this year

Recommendations



Value for money: significant weaknesses and key recommendations 2023/24 and 2024/25

The significant weakness we have identified and the key recommendations made are set out below. Our detailed commentary is set out in this Auditor’s Annual Report.

Significant weakness identified	Criteria	Sub criteria	Key recommendation
Governance How the body ensures it makes informed decisions and properly manages risk	Governance	How the body ensures effective processes and systems are in place support its statutory financial reporting requirements	The Council should ensure that adequate resources and sharing of corporate knowledge are allocated within the Finance Team to effectively support the annual accounts audit process and strengthen financial governance, with the aim of rebuilding assurance to achieve a return to an unqualified audit opinion.

Value for money: other recommendations

Criteria	Observation	Other recommendation	Management Comments
Governance	Internal Audit Recommendations Per the Internal Audit progress report presented to the September 2025 Audit and Standards Committee, there are currently 94 recommendations open. 20 of these are moderate risk and the remainder are low risk, with no recommendations being critical or significant risk.	The Council should look to ensure open audit recommendations are addressed and resolved in a more timely manner.	Recommendation is accepted. The management team have been working with the Internal Audit team to review older recommendations after a process change was implemented when the Council joined CMAP. Audits are now expected to have evidence uploaded to a central portal when recommendations have been actioned. Previously, a follow up audit would be undertaken which could mean recommendations are not revisited by the auditors for several years. This old process has resulted in a long list of recommendations outstanding, but it should be noted that the majority of these are likely to have been actioned just not updated by the audit team.

Value for money: follow up of prior recommendations

The recommendations we made in previous years are set out below, together with actions taken by the Authority in 2023/24 and 2024/25 to address them. Our detailed commentary is set out in this Auditor’s Annual Report.

Observation previously reported	Criteria	Recommendation previously made (2022/23)	Auditor update 2023/24 and 2024/25
Governance How the body ensures it makes informed decisions and properly manages risk	Governance	The Council needs to ensure that its finance team is sufficiently resourced, with the appropriate skills, to ensure that the issues that have delayed completion of the 2021/22 financial statements are resolved. The Council needs to prepare high quality financial statements for 2022/23 and later years which are supported by appropriate reports and working papers to enable audits to proceed with minimal issues.	During 2023/24 the council was behind by two financial years on the publication of its accounts due to issues in retaining key finance team members resulting in a lack of capacity within the finance team. In 2024/25 the Council published their accounts in line with the statutory deadline, however we recognise the fact that capacity and knowledge sharing of the finance team to support the external audit process requires improvement. Recommendation remains open.

Value for money: follow up of prior recommendations

The recommendations we made in previous years are set out below, together with actions taken by the Authority in 2023/24 and 2024/25 to address them. Our detailed commentary is set out in this Auditor’s Annual Report.

Observation previously reported	Criteria	Recommendation previously made (2022/23)	Auditor update 2023/24 and 2024/25
Governance How the body ensures it makes informed decisions and properly manages risk	Governance	To comply with its Constitution, the Council should submit quarterly budget monitoring reports to Cabinet, along with any requests for approval to vire budgets. We note that this did not take place in 2021/22, before being re-introduced in 2022/23. Although the immediate weakness in arrangements has now been resolved, in future officers and members must make sure that members are provided with sufficiently regular financial information to enable them to effectively monitor the Council's financial position and that members hold officers to account where this is not the case.	Quarterly monitoring is presented to the Cabinet Committee. In addition, financial updates are presented to the Council's management team monthly and informally to Cabinet members monthly. Satisfied recommendation is closed.

Value for money: follow up of prior recommendations

The recommendations we made in previous years are set out below, together with actions taken by the Authority in 2023/24 and 2024/25 to address them. Our detailed commentary is set out in this Auditor's Annual Report.

Observation previously reported	Criteria	Recommendation previously made (2022/23)	Auditor update 2023/24 and 2024/25
Financial sustainability How the body plans and manages its resources to ensure it can continue to deliver its services	Financial sustainability	Refine existing arrangements for identifying and monitoring MTFP saving plans to ensure planned savings are fully delivered. Where circumstances change to affect delivery, these are clearly reported, especially for those in relation to early intervention and demand management.	In 2023/24, the Council added a vacancy savings target into budget and put a recruitment freeze in place so that no recruitment is undertaken with sign off from S151. In 2024/25 the savings targets in place currently are on vacancies and progress against this is reported quarterly to Cabinet as part of the monitoring reports. Greater savings are likely to be needed in future years, especially in light of funding reform changes but a new Assistant Director has been recruited (starting Dec 2025) to push forward transformation of services. Recommendation remains open.
Financial sustainability How the body plans and manages its resources to ensure it can continue to deliver its services	Financial sustainability	The Council should continue to acknowledge the importance of seeking ways other than use of reserves to manage the financial budget gap in the medium term, given the finite nature of reserves. The Council should develop a longer-term reserves strategy to focus on building up funds for investment as well as mitigating short-term budget pressures.	In 2023/24 surpluses have been made due to prudent budget management and the General Fund balance is now just over 10% of net expenditure which is a significant improvement. Earmarked reserves have been contributed to and although there is budgeted drawdowns annually, these are a worst case for specific services. Nothing is drawdown unless absolutely necessary. Recommendation closed.

Value for money: follow up of prior recommendations

The recommendations we made in previous years are set out below, together with actions taken by the Authority in 2023/24 and 2024/25 to address them. Our detailed commentary is set out in this Auditor’s Annual Report.

Observation previously reported	Criteria	Recommendation previously made (2022/23)	Auditor update 2023/24 and 2024/25
Governance How the body ensures it makes informed decisions and properly manages risk	Governance	The Council must ensure that their internal audit function has the appropriate skill mix and capacity to deliver the full approved IA Audit Plan.	2023/24 The internal audit function was resourced by the Council internally. 2024/25 Internal Audit was outsourced to the Central Midlands Audit Partnership in April 2024 to address this concern. There are now a broad range of experienced auditors including IT specific experts available that work on the control audits for the Council. However, the 2024/25 plan was not delivered in full within the timeframes. Recommendation remains open.

Value for money: follow up of prior recommendations

The recommendations we made in previous years are set out below, together with actions taken by the Authority in 2023/24 and 2024/25 to address them. Our detailed commentary is set out in this Auditor’s Annual Report.

Observation previously reported	Criteria	Recommendation previously made (2022/23)	Auditor update 2023/24 and 2024/25
Improving economy, efficiency and effectiveness How the body uses information about its costs and performance to improve the way it manages and delivers its services	Improving economy, efficiency and effectiveness	The Council should ensure it is taking full advantage of the benchmarking information it has available.	2023/24 and 2024/25 The Council have noted they use benchmarking for certain services such as the Landlord Service, which uses Housemark to benchmark its services. In addition, LA Landlords are also required to collect and publish a set of Tenant Satisfaction Measures. The Regulator of Social Housing publishes these statistics which further allows us to consider our performance against others. Satisfied recommendation is closed.

Value for money: follow up of prior recommendations

The recommendations we made in previous years are set out below, together with actions taken by the Authority in 2023/24 and 2024/25 to address them. Our detailed commentary is set out in this Auditor’s Annual Report.

Observation previously reported	Criteria	Recommendation previously made (2022/23)	Auditor update 2023/24 and 2024/25
Governance How the body ensures it makes informed decisions and properly manages risk	Governance	Ensure that a Register of Interest and Gifts/Hospitality is maintained and regularly updated for all Directors, Assistant Directors and Senior Managers.	In 2024/25 the Register was updated when declarations are received. Last report of gifts and hospitality went to November 2024 Audit and Standards Committee, next one is due in November 2025. The MO schedules regular emails to update staff of their responsibilities to declare, the last one sent in August 2025. Recommendation closed.



AGENDA ITEM NO. 8

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	25 th November 2025
Subject:	Treasury Management Update 2025/26
Portfolio:	Not Applicable
Responsible Officer:	Assistant Director - Finance
Corporate Plan – Theme:	Your Council
Corporate Plan – Aim:	Deliver continued forward financial planning to safeguard the finances of the Council. Strive for transparency and accountability, in all that we do.
Ward Relevance:	All
Public or Private:	Public
Subject:	Treasury Management 2025/26 – Mid-year Review
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 September 2025 and therefore any decisions made after this date are not reflected in this report.

2. Recommendations

2.1. To recommend to Council that the Treasury Management Report for 2025/26 – Mid-Year Report be noted.

2.2. To recommend to Council that the update to Treasury Management Practice (TMP) 5 be approved.

3. Background

3.1. Capital Strategy

3.1.1. In December 2021, the Chartered Institute of Public Finance and Accountancy, (CIPFA), issued revised Prudential and Treasury Management Codes. These require all local authorities to prepare a Capital Strategy which is to provide the following: -

- a high-level overview of how capital expenditure, capital financing and treasury management activity contribute to the provision of services;
- an overview of how the associated risk is managed;
- the implications for future financial sustainability.

3.1.2. CIPFA is currently consulting local authorities in respect of potential changes to the Codes. Currently, the focus seems to be on the Non-Treasury investment aspects of local authority activity. An update on any material developments/changes will be provided to Council in due course

3.2. Treasury management

3.2.1. The Council operates a balanced budget, which broadly means cash raised during the year will meet its cash expenditure. Part of the treasury management operations ensure this cash flow is adequately planned, with surplus monies being invested in low-risk counterparties, providing adequate liquidity initially before considering optimising investment return.

3.2.2. The second main function of the treasury management service is the funding of the Authority's capital plans. These capital plans provide a guide to the borrowing need of the Authority, essentially the longer-term cash flow planning to ensure the Authority 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 Authority risk or cost objectives.

3.2.3. Accordingly, treasury management is defined 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.”

Introduction

3.3. This report has been written in accordance with the requirements of the Chartered Institute of Public Finance and Accountancy’s (CIPFA) Code of Practice on Treasury Management (revised 2021).

The primary requirements of the Code are as follows:

3.4. Creation and maintenance of a Treasury Management Policy Statement which sets out the policies and objectives of the Council’s treasury management activities.

3.5. Creation and maintenance of Treasury Management Practices which set out the manner in which the Council will seek to achieve those policies and objectives.

3.6. 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. Quarterly reports are also required for the periods ending April to June and October to December and are submitted to Cabinet for approval.

3.7. 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.

3.8. Delegation by the Council of the role of scrutiny of treasury management strategy and policies to a specific named body. For this Authority, the delegated body is Audit and Standards Committee:

3.9. This mid-year report has been prepared in compliance with CIPFA’s Code of Practice on Treasury Management, and covers the following:

- An economic update for the first half of the 2025/26 financial year;
- A review of the Treasury Management Strategy Statement and Annual Investment Strategy;
- The Authority’s capital expenditure, as set out in the Capital Strategy, and prudential indicators;
- A review of the Authority’s investment portfolio for 2025/26;
- A review of the Authority’s borrowing strategy for 2025/26;
- A review of any debt rescheduling undertaken during 2025/26;
- A review of compliance with Treasury and Prudential Limits for 2025/26.

4. An economic update for the first half of the 2025/26 financial year

4.1. Economics and Interest Rates

The Council's Treasury advisers MUFG Group have provided the following update on the economy.

Economics Update

- The first half of the financial year saw:
 - A 0.3% pick up in GDP for the period April to June 2025. More recently, the economy flatlined in July, with higher taxes for businesses restraining growth.
 - A fall in the average wage growth (excluding bonuses) as the headline 3myy rate fell from 5.5% to 4.8% in July;
 - CPI inflation rose and fell and ended September at 3.8% with core inflation at 3.6%
 - 10-year gilt yields changing between 4.4% and 4.8%, ending at 4.70% at the end of September.
- The economy started weaker in April due to front-loading the effects of the US tariffs. An unexpected reaction to the upsides of the tariffs meant that GDP rose by 0.3% on the quarter, however a month-on-month stagnation of real GDP July of 0.0% was a cause for some concern. The reasons for this are varied but an increase in taxes for businesses in April is seen to be part of the cause. Looking ahead, the expected rise in taxes in the Autumn Budget on the 26th November is likely to cause a drag on growth of the UK's GDP for some time, with the expected 2025 GDP growth to be 1.3%.
- The 0.5% m/m rise in retail sales in August was the third increase in a row and was caused by an increase in all sales areas except fuel. The sales may have been helped by the warmer than usual weather.
- The Public Finance position looks weak with Net Public Borrowing £18.0bn in August (meaning borrowing is already £11.4bn higher than the April OBR forecast). This is partly due to lower income than expected, and higher expenditure.
- The labour market is starting to loosen with May having the largest fall in PAYE employees since records began (excluding the Pandemic). The 3myy growth rate of average earnings fell from 5.5% in April to 4.8% in July. The private sector rate dropped from 5.5 to 4.7% putting it closer to the Bank of England's forecast of 4.6% in Q3.
- CPI inflation fell from 3.5% in April to 3.4% in May. More recently inflation pressures have returned and CPI in August stayed around 3.8%. Core Inflation easing from 3.8% to 3.6%.
- Looking at gilt movements in the first half of 2025/26, and the 10-year gilt yield rose from 4.46% to 4.60% in early July over the risk of future fiscal

issues with the current UK Budget. Although the rise was short-lived, it does show the current volatility of the market. By the end of September, 10-year gilts have risen to 4.70%, partly due to inflation, but also partly due to Pension and Insurance firms leaving the longer length gilt markets reducing demand.

- Gilts rates affect the amount of interest the Council receives on its investments, and a reduction in the gilt rate will reduce the amount of interest the Council receives. This reduction can be caused directly when the Council invests in Treasury Bills or Money Market Funds (which use Treasury Bills as part of their investment portfolio), or indirectly by changing the rate of PWLB borrowing. If PWLB borrowing becomes cheaper, other Councils will borrow from the PWLB rather than us.
- The reduction in gilt rates will reduce the amount of interest on any new PWLB loans the Council takes out, but only if the loans are taken out after the gilt rate drops. Loans with the market are indirectly affected by Gilt rates, and reductions in the gilt rate should reduce other sources of borrowing as well.

MPC meetings: 8 May, 19 June, 7 August, 18 September 2025

- On 8 May, the Bank of England's Monetary Policy Committee (MPC) voted to cut Bank Rate at from 4.50% to 4.25%. There were three votes for an immediate cut to 4.00%. The June meeting, however, kept the rate at 4.25%.
- At the August meeting, there was a 5-4 vote in place for rates to be cut by 25bps to 4.00%. This was the closest vote as technically it was 4 votes for keeping the rate at 4.25%, 4 for a drop to 4.00% and 1 for a drop to 3.75%. After a second vote, the decision was to lower the rate to 4.00%.
- In September there was a 7-2 vote to keep the rate at 4.00% (with the other two requesting another rate drop by 0.25%. Our advisors now forecast that the next Bank Rate drop will be next year unless the financial market changes in the meantime.

4.2. Interest Rates

- 4.2.1. The Council has appointed MUFG Group as its treasury advisors and part of their service is to assist the Council to formulate a view on interest rates.
- 4.2.2. The PWLB rate forecasts below are based on the Certainty Rate (the standard rate minus 20 bps) which has been accessible to most authorities since 1 November 2012.
- 4.2.3. MUFG's latest forecast was created on 11th August and sets out a view that short, medium and long-dated interest rates will fall back over the next year or two. This is a forecast, and will depend on gilt rates, and what the economy actually does and when the Bank of England's Base Rate reduces compared to MUFG's forecast.

4.2.4. MUFG's PWLB rate forecasts below are based on the Certainty Rate (the standard rate minus 20 bps, calculated as gilts plus 80bps). The HRA currently gets another 60 bps reduction on the Certainty Rate, but this can only be used for borrowing towards new builds (or externalising the debt for previous builds).

MUFG Corporate Markets Interest Rate View 11.08.25													
	Sep-25	Dec-25	Mar-26	Jun-26	Sep-26	Dec-26	Mar-27	Jun-27	Sep-27	Dec-27	Mar-28	Jun-28	Sep-28
BANK RATE	4.00	4.00	3.75	3.75	3.50	3.50	3.50	3.50	3.25	3.25	3.25	3.25	3.25
3 month ave earnings	4.00	4.00	3.80	3.80	3.50	3.50	3.50	3.50	3.30	3.30	3.30	3.30	3.30
6 month ave earnings	4.00	3.90	3.70	3.70	3.50	3.50	3.50	3.50	3.30	3.30	3.40	3.40	3.40
12 month ave earnings	4.00	3.90	3.70	3.70	3.50	3.50	3.50	3.50	3.30	3.40	3.50	3.60	3.60
5 yr PWLB	4.80	4.70	4.50	4.40	4.30	4.30	4.30	4.20	4.20	4.20	4.20	4.10	4.10
10 yr PWLB	5.30	5.20	5.00	4.90	4.80	4.80	4.80	4.70	4.70	4.70	4.70	4.60	4.60
25 yr PWLB	6.10	5.90	5.70	5.70	5.50	5.50	5.50	5.40	5.40	5.30	5.30	5.30	5.20
50 yr PWLB	5.80	5.60	5.40	5.40	5.30	5.30	5.30	5.20	5.20	5.10	5.10	5.00	5.00

5. Review of the Treasury Strategy & Budgetary Framework

5.1. The Treasury Management and Budgetary Framework was approved by Audit and Standards Committee on 4th February 2025 and recommended to Council later on 19th February 2025. Having reviewed the strategies there are no recommended policy changes to the Framework at this point in the year.

5.2. There is however a recommended change to the Treasury Management Practices. This is to ensure there are enough dealers to manage the Council's investments and debts. This is a change to TMP 5, and the details are attached at the end of this report.

6. The Council's Capital Expenditure (Prudential Indicators)

6.1. This part of the report is structured to update:

- The Authority's capital expenditure plans;
- How these plans are being financed;
- The impact of the changes in the capital expenditure plans on the prudential indicators and the underlying need to borrow; and
- Compliance with the limits in place for borrowing activity.

6.2. The Council's Capital Expenditure Plans (Estimate of Capital Expenditure Prudential indicator)

6.2.1. This table shows the revised estimates for capital expenditure and the changes since the capital programme was agreed at the Budget. There have been a number of approved changes to the Capital Budget as of 30/09/2025.

Capital Expenditure by Portfolio	2025/26 Original Budget £m	2025/26 Revised Budget £m	Increase/ (Decrease) in Budget £m
Business & Regeneration	9.783	18.138	8.355
Resources & Central Services	0.100	0.348	0.248
Housing	8.899	8.899	0.000
Planning & Enforcement	0.000	0.000	0.000
Leisure, Communities & Health	22.217	23.453	1.236
Miscellaneous Services	0.050	0.050	0.000
Housing Revenue Account	15.870	18.040	2.170
Total Capital Expenditure	56.919	68.928	12.009

6.3. Changes to the Prudential Indicators for the Capital Financing Requirement (CFR), External Debt and the Operational Boundary

6.3.1. The table below shows the CFR, which is the underlying external need to incur borrowing for a capital purpose. It also shows the expected debt position over the period, which is termed the Operational Boundary. Changes in the CFR occur as part of capital financing transactions:

- Increases when Prudential Borrowing is used to fund the capital programme.
- Increases/decreases where land/property is transferred between the General Fund and the Housing Revenue Account
- Decreases when funds are applied to outstanding debt. There is a statutory requirement for the General Fund to charge a Minimum Revenue Provision to its revenue account, however, there is no requirement for the HRA to be charged with such a charge but if a charge is made it is classed as a Voluntary Revenue Provision for the repayment of principal.

Financing of capital expenditure £m	2023/24 Actual £m	2024/25 Estimate £m	2025/26 Estimate £m	2026/27 Estimate £m	2027/28 Estimate £m
Capital Receipts	0.11	0.10	0.00	0.00	0.00
Capital Grants	17.37	28.73	22.05	5.13	5.13
Capital Reserves	8.72	1.76	1.69	0.29	0.29
Revenue	3.89	21.08	13.16	12.56	12.51
Total Non-Borrowing	30.09	51.67	36.90	17.98	17.93
Net Financing need for the year	11.50	8.90	32.03	4.00	0.00
Total Capital Programme	41.59	60.57	68.93	21.98	17.93

7. The Operational Boundary is approximately set to the Capital Financing Requirement to allow the externalisation of the internal borrowing position should the economic situation suggest that the optimum time is during the remainder of this financial year.

8. Review of Limits to Borrowing

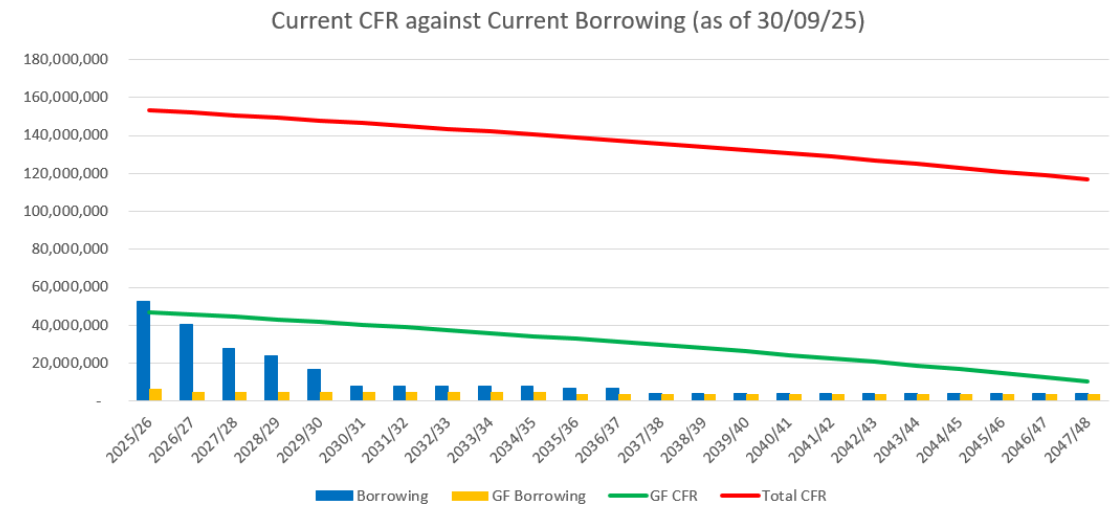
8.1. Prudential Indicator – Capital Financing Requirement

8.1.1. The below figures are the current estimates of the CFR for the Council and HRA. During 2024/25, the Council made an adjustment for ongoing leases that make up part of the CFR under IFRS16. The Figures for 2024/25 are still recorded as an estimate as the Accounts are currently being audited and may slightly change during this process.

£m	2023/24 Actual	2024/25 Estimate	2025/26 Estimate	2026/27 Estimate	2027/28 Estimate
Capital Financing Requirement					
Non-HRA	23.27	30.54	44.53	47.70	46.51
Housing	85.72	88.14	106.18	106.18	106.18
Total CFR	108.99	118.68	150.71	153.88	152.69
Movement in CFR	10.85	9.70	32.03	3.17	(1.87)

Movement in CFR Represented by					
Net Financing need for the Year	11.50	9.51	32.51	4.00	0.00
Less MRP and other financing movements	(0.65)	(0.46)	(0.48)	(0.83)	(1.87)
IFRS 16 Adjustment	0	0.65	0	0	0
Movement in CFR	10.85	9.70	32.03	3.17	(1.87)

8.1.2. The below chart shows the CFR against the current Borrowing. As the CFR line is higher than the borrowing total, this means the Council is under-borrowed. This means that the CFR has not been fully funded with external debt as internal cash balances have been used temporarily to finance the capital programme. In foregoing lost investment income, the Council benefits by saving on the current high interest rates.



8.1.3. The Chart also shows that there is considerable room for extra loans to be taken to fund the current capital programme as well as any future projects. The Council will need to manage these loans to ensure that we don't enter an overborrowing position, but spreading out the repayment dates as well as having a continuing capital programme will ensure the council isn't expected to enter this position.

8.1.4. The CFR figure is based on completed Capital projects, so if we complete more projects, the CFR figure will increase to represent the amount the council should payback each year. The graph has split out the GF and the total CFR for this report to make it easier to work out where extra borrowing for the General fund can be undertaken and when. The HRA CFR does not need to reduce under the current financial regulations.

8.2. Limits to Borrowing Activity

8.2.1. The first key control over the treasury activity is a prudential indicator to ensure that over the medium term, net borrowing (borrowings less investments) will only be for a capital purpose.

8.2.2. Gross external borrowing should not, except in the short term, exceed the total of CFR in the preceding year plus the estimates of any additional CFR for 2025/26 and next two financial years.

8.2.3. This allows some flexibility for limited early borrowing for future years. The Council has approved a policy for borrowing in advance of need which will be adhered to if this proves prudent.

8.2.4. The long-term liabilities figure below is the calculated liability due to long-term leases as per IFRS16.

	2025/26 Original Estimate £m	Current Position at of 30 September 2025 £m	2025/26 Forecast Estimate for 31 March 2026 £m
Borrowing	97.22	60.21	87.51
Other Long-Term Liabilities	-	0.65	0.64
Total Debt	97.22	60.86	88.15
CFR (End year position)	132.46	149.98	149.98

8.2.5. The amount that Council Officers are allowed to borrow is limited by the Authorised Limit which is set and revised by Members. This represents the limit beyond which borrowing is prohibited. The limit reflects the level of borrowing which, while not desired, could be afforded in the short term, but is not sustainable in the longer term. The limit is based on the expected maximum borrowing need with some headroom for unexpected movements.

8.2.6. This is the statutory limit determined under section 3 (1) of the Local Government Act 2003.

Authorised Limit for External Debt	2025/2026 Original Indicator £m
Borrowing	156.00
Other Long-Term Liabilities	4.00
Total	160.00
Operational Limit for External Debt	
Borrowing	125.00
Other Long-Term Liabilities	2.00
Total	127.00

8.2.7. No changes to the current Authorised Limit or Operation Limit for External Debt are required.

9. The Council's Investment Portfolio as at 30th September 2025

9.1. The Treasury Management Strategy Statement (TMSS) for 2025/26, which includes the Annual Investment Strategy, was approved by the Council on 19th February 2025. In accordance with the CIPFA Treasury Management Code of Practice, it sets out the Authority's investment priorities as being:

- Security of capital
- Liquidity
- Yield

9.2. The Council aims to achieve the optimum return (yield) on its investments commensurate with proper levels of security and liquidity and with the Council's risk appetite. In the current economic climate, it is considered appropriate to keep investments short term to cover cash flow needs, but also to seek out value available in periods up to 12 months with high credit quality financial institutions, using the MUFG Group's suggested creditworthiness approach, including a minimum sovereign credit rating and Credit Default Swap (CDS) overlay information.

9.3. Creditworthiness.

9.4. The UK's sovereign rating has proven robust through the first half of 2025/26. The Labour Government is expected to outline in detail its future fiscal proposals in the Budget scheduled for 26 November 2025.

9.5. CDS prices

9.6. It is noted that sentiment in the current economic climate can easily shift, so it remains important to undertake continual monitoring of all aspects of risk and return in the current circumstances.

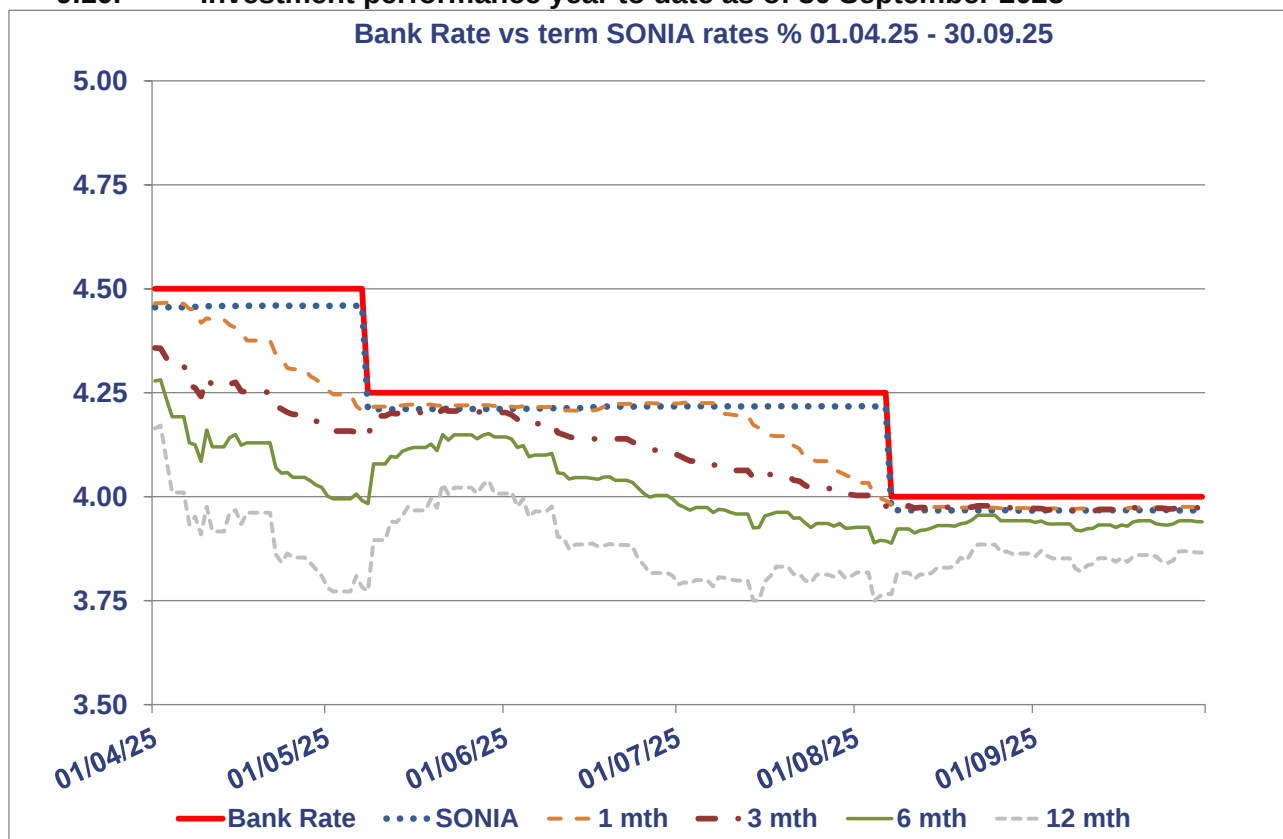
9.7. A list of all investments held as at 30th September 2025 is shown below:

Counterparty	Amount Invested	Deposit Period	Maturity Date	Interest Rate
Fixed Term Deposit:				
Total Fixed Term Deposits	£0.0m			N/A
Notice Accounts:				
Total Notice Accounts	£0.0m			N/A
Property Funds				
CCLA Local Authority Property Fund	£2.0m	N/A	N/A	3.91%
Total Property Funds	£2.0m			3.91%
Money Market Funds:				
Federated Prime Rate	£10.0m	N/A	N/A	4.04%
Goldman Sachs	£1.0m	N/A	N/A	4.02%
Total Money Market Funds	£11.0m			4.04%
Instant Access/Call Accounts				
Lloyds Bank (Current Account)	£2.99m	Overnight	N/A	3.90%
Total Instant Access	£2.99m			3.90%
Total Investments	£15.99m			4.00%

9.8. Investment Counterparty criteria

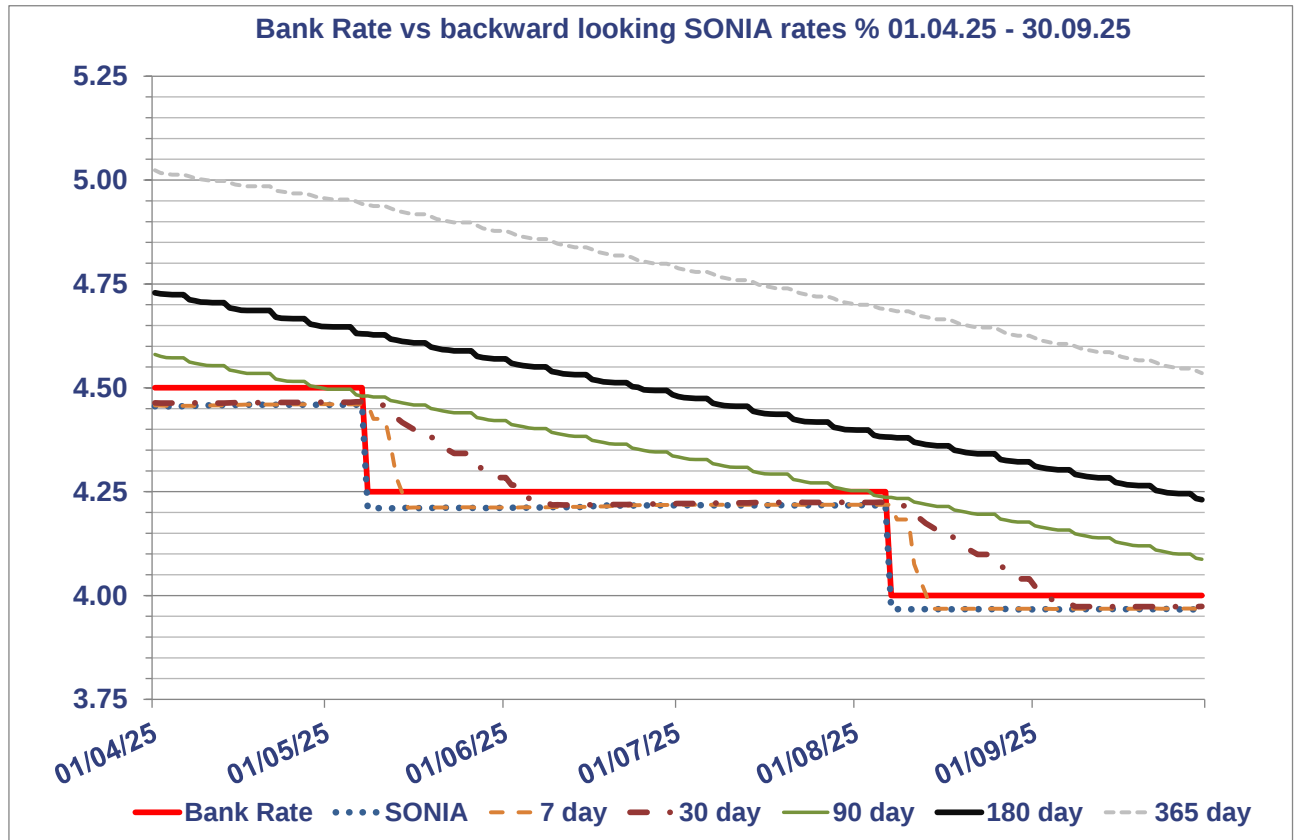
9.9. The current investment counterparty criteria selection approved in the TMSS is meeting the requirement of the treasury management function, and no in year changes are required.

9.10. Investment performance year to date as of 30 September 2025



	Bank Rate	SONIA	1 mth	3 mth	6 mth	12 mth
High	4.50	4.46	4.47	4.36	4.28	4.17
High Date	01/04/2025	07/05/2025	03/04/2025	01/04/2025	02/04/2025	02/04/2025
Low	4.00	3.97	3.97	3.96	3.89	3.75
Low Date	07/08/2025	29/08/2025	16/09/2025	08/09/2025	07/08/2025	04/08/2025
Average	4.23	4.19	4.16	4.10	4.01	3.88
Spread	0.50	0.49	0.50	0.39	0.39	0.42

* The table above covers the first half of 2025/26.



	Bank Rate	SONIA	7 day	30 day	90 day	180 day	365 day
High	4.50	4.46	4.46	4.47	4.58	4.73	5.02
High Date	01/04/2025	07/05/2025	28/04/2025	06/05/2025	01/04/2025	01/04/2025	01/04/2025
Low	4.00	3.97	3.97	3.97	4.09	4.23	4.54
Low Date	07/08/2025	29/08/2025	04/09/2025	10/09/2025	30/09/2025	30/09/2025	30/09/2025
Average	4.23	4.19	4.20	4.24	4.34	4.48	4.79
Spread	0.50	0.49	0.49	0.49	0.49	0.50	0.49

*The table above covers the first half of 2025/26.

9.11. Investment performance year to date as of 30 September 2025

7 Day SONIA Benchmark Return	NBBC Performance	Investment Interest Earned
4.20%	4.26%	£457,356

9.12. As shown, the Council is outperforming the 7 Day Benchmark by 14 Basis Points. The 7 Day Benchmark was chosen as the average length of investments for the Council is around 7 days. The above investment interest earned includes both GF and HRA investment interest earned.

9.13. The Council's budgeted investment return for 2025/26 is £741k, and we currently forecasting a return of around £678k for both the GF and HRA. Whilst the split between the HRA and GF is calculated at year end based on borrowing and Capital Financial Requirement (CFR) for both the GF and HRA, we can estimate the GF investment interest to be around £470k based on current forecasts. This variance between the original budget and forecast is due partly to lower than expected interest rates, and there was an expectation that borrowing would have been higher in 24/25 (after the budget was set) meaning there would have been more money to invest and therefore higher interest received. By not undertaking this borrowing, we have reduced the Council's potential interest received but also the amount of interest the Council was due to pay.

10. The Council's Debt Position as at 30th September 2025

10.1. The Council's borrowing activity for the second quarter of the financial year can be summarised as follows:

- No new loans were taken out
- £2.5m of debt matured in Q2 for a total of £2.5m of debt repaid in 25/26.
- £62.205m of debt is outstanding as at 30th September 2024 at an average rate of 3.67%. There is £9.5m of debt due to be repaid in 25/26 in Q3 and Q4.

10.2. Due to the high interest rates, the Treasury Team is minimalizing 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 requiring externalising the Council's debt.

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

Borrowing	2025/26 Opening Balance £m	Balance as of 30th Sept 2024 £m	2025/26 Closing Forecast £m
General Fund			
PWLB (Public Works Loan Board)	6.75	6.75	33.48
Market LOBO	2.00	2.00	2.00
HRA			
PWLB	53.96	51.45	63.96
Total	62.71	60.21	98.57

11. Debt Rescheduling

11.1. 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.

11.2. 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.

11.3. 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.

11.4. The Council is expecting to use external borrowing later this year, however borrowing may still be short-term with an expectation to refinance the loan long-term to minimise the effect of high interest rates.

Total Debt Maturity Profile				
Debt Maturity within	£m	% of Total Debt	% of Running Total Debt	% for Lower and Upper Limit of Debt
Under 6 months	9.5	15.8%	15.8%	0%-35%
Up to 2 Years	10.0	16.6%	32.4%	0%-40%
Up to 5 Years	24.2	40.2%	61.7%	0%-50%
Up to 10 Years	8.5	14.1%	86.7%	0%-60%
Up to 20 Years	4.0	6.6%	93.4%	0%-70%
Up to 30 Years	0.0	0.0%	93.4%	0%-80%
Up to 40 Years	2.0	3.3%	96.7%	0%-90%
Over 40 Years	2.0	12.8%	100.0%	0%-100%
Total Debt	60.2	100.0%	100.0%	

11.5. If we look at just the General Fund Debt, there is one breach of the Debt Maturity limits in the under 2 year period. Due to the small amount of General Fund Borrowing, any extra borrowing will change the Maturity profile drastically.

General Fund Maturity Profile				
Debt Maturity within	£m	% of Total Debt	% of Running Total Debt	% for Lower and Upper Limit of Debt
Under 6 months	2.0	22.7%	22.7%	0%-35%
Up to 2 Years	1.8	20.5%	43.2%	0%-40%
Up to 5 Years	0.0	0.0%	43.2%	0%-50%
Up to 10 Years	1.0	11.4%	54.5%	0%-60%
Up to 20 Years	0.0	0.0%	54.5%	0%-70%
Up to 30 Years	0.0	0.0%	54.6%	0%-80%
Up to 40 Years	2.0	22.7%	77.3%	0%-90%
Over 40 Years	2.0	22.7%	100.0%	0%-100%
Total Debt	60.2	100.0%	100.0%	

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

12.1. None directly related to this report.

13. Financial Implications

13.1. Contained within the report.

14. Legal Implications

14.1. None directly related to this report.

15. Equalities implications

15.1. Not applicable to this report.

16. Health implications

16.1. Not applicable to this report.

17. Climate and environmental implications

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

18. Section 17 Crime and Disorder Implications

18.1. Not applicable to this report.

19. Risk management implications

- 19.1. This Treasury Management 2025/26 – Mid Year Report provides transparency on the adequacy and effectiveness of the Council's Treasury Processes. The report shows the outcome of the previous Treasury investment and Borrowing decisions and the economic climate that affects their results.
- 19.2. The update to TMP 5 reduces the risk of failing to manage the Council's investments and borrowings due to lack of staff availability. By increasing the number of potential dealers, this mitigates the risk whilst still keeping limited control over who can perform certain tasks.

20. Human resources implications

- 20.1. No direct human resource implications have been identified.

21. Conclusion

- 21.1. This report demonstrates the Council's commitment to providing transparency on its investments and borrowing. The Audit & Standards Committee is invited to note the Treasury Management 2025/26 – Mid Year Review.
- 21.2. The Treasury Management Practices are the Council's rules on what the Council's staff are allowed to do with regards the Council's Treasury Function. Due to staffing changes, the Audit & Standards Committee is invited to agree the update to TMP 5.

22. Appendices

- 22.1. Appendix A – Updated TMP 5

23. Background papers

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

24. Report Writer Details:

25. Officer Job Title: Finance Manager - Treasury

26. Officer Name: Andrew Pillow

27. Officer Email Address: andrew.pillow@nuneatonandbedworth.gov.uk

Appendix A

TMP 5 Organisation, Clarity and Segregation of Responsibilities, and Dealing Arrangements

5.1 Allocation of responsibilities

(i) Full council

- receiving and reviewing reports on treasury management policies, practices and activities
- approval of annual treasury management strategy
- approval of capital strategy

(ii) Cabinet

- approval of amendments to the organisation's adopted clauses, treasury management policy statement and treasury management practices
- budget consideration and approval
- approval of the division of responsibilities
- receiving and reviewing regular monitoring reports and acting on recommendations
- approving the selection of external service providers and agreeing terms of appointment.

(iii) Audit and Standards Committee

- reviewing the treasury management policy and procedures and making recommendations to the responsible body.

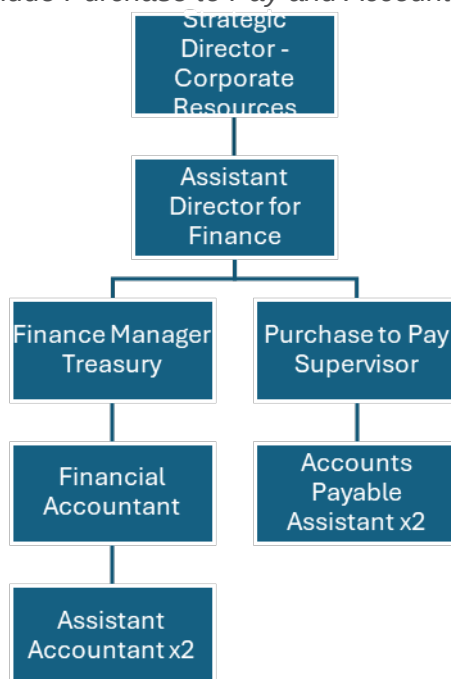
5.2 Principles and Practices Concerning Segregation of Duties

5.2.1 The following duties must be undertaken by separate officers: -

Dealing	Negotiation and approval of deal. Receipt and checking of brokers confirmation note against loans diary. Reconciliation of cash control account. Bank reconciliation
Accounting Entry	Production of transfer note. Processing of accounting entry
Authorisation/Payment of Deal	Entry onto system. Approval and payment.

5.3 Treasury Management Organisation Chart

Table is updated to include Purchase to Pay and Accounts Payable Assistants



5.4 Statement of the treasury management duties/responsibilities of each treasury post

5.4.1. The responsible officer

The responsible officer is the person charged with professional responsibility for the treasury management function and in this Council is the Strategic Director – Corporate Resources. This person will carry out the following duties: -

- a) recommending clauses, treasury management policy/practices for approval, reviewing the same regularly, and monitoring compliance
- b) submitting regular treasury management policy reports
- c) submitting budgets and budget variations
- d) receiving and reviewing management information reports
- e) reviewing the performance of the treasury management function
- f) ensuring the adequacy of treasury management resources and skills, and the effective division of responsibilities within the treasury management function
- g) ensuring the adequacy of internal audit, and liaising with external audit
- h) recommending the appointment of external service providers.
- i) The responsible officer has delegated powers through this policy to take the most appropriate form of borrowing from the approved sources, and to make the most appropriate form of investments in approved instruments.
- j) The responsible officer may delegate his power to borrow and invest to members of his staff. The Treasury Team must conduct all dealing transactions, or staff authorised by the responsible officer to act as temporary cover for leave/sickness. All transactions must be authorised by at least two of the officers in the Treasury Management Organisation Chart.

- k) The responsible officer will ensure that treasury management policy is adhered to, and if not will bring the matter to the attention of elected members as soon as possible.
- l) Prior to entering into any capital financing, lending or investment transaction, it is the responsibility of the responsible officer to be satisfied, by reference to the Council's legal department and external advisors as appropriate, that the proposed transaction does not breach any statute, external regulation or the Council's Financial Regulations
- m) It is also the responsibility of the responsible officer to ensure that the Council complies with the requirements of The UK Money Markets Code (formerly known as the Non-Investment Products Code) for principals and broking firms in the wholesale markets.

5.4.2. The Treasury Management Team

The responsibilities of the Assistant Director of Corporate Resources is to act as the deputy responsible officer for the council when the responsible officer is unavailable. If the Responsible officer is available to undertake their duties, the Assistant Director of Finance will have the same level of responsibility (with regards to Treasury Management) as the Finance Manager – Treasury (see below).

The responsibilities of the Finance Manager - Treasury will be: -

- a) execution of transactions
- b) adherence to agreed policies and practices on a day-to-day basis
- c) maintaining relationships with counterparties and external service providers
- d) supervising treasury management staff
- e) monitoring performance on a day-to-day basis
- f) submitting management information reports to the responsible officer
- g) identifying and recommending opportunities for improved practices
- h) opportunities for improved practices

The Finance Manager – Treasury requires at least 1 year of professional experience in Financial Markets (including knowledge of transactions or services envisaged). If they do not have this experience, they will need advice from Treasury Advisors before undertaking any new investments or supervision from a member of the Treasury Management Organisational Chart who has the relevant experience.

The treasury management team additionally includes the following persons: -

Financial Accountant/ Procure to Pay Supervisor

The Financial Accountant/Purchase to Pay Supervisor have the same limits on investments as the Finance Manager – Treasury, and will require authorisation from a more senior role to undertake new debt arrangements. They will also require at least 1 year of professional experience in Financial Markets, or supervision from another member of the Treasury Management Organisational Chart which has the relevant experience.

Assistant Accountant(s)/Accounts Payable Assistants

The Assistant Accountants and Accounts Payable Assistants can process investments with the deals being authorised by the Financial Accountant/Purchase to

Pay Supervisor or more senior member of staff within the Treasury Management Organisation Chart above.

5.4.3. The Head of the Paid Service – the Chief Executive

The responsibilities of this post will be: -

- a) Ensuring that the system is specified and implemented
- b) Ensuring that the responsible officer reports regularly to the Cabinet on treasury policy, activity and performance.

5.4.4. The Monitoring Officer

The responsibilities of this post will be: -

- a) Ensuring compliance by the responsible officer with the treasury management policy statement and treasury management practices and that they comply with the law.
- b) Being satisfied that any proposal to vary treasury policy or practice complies with law or any code of practice.
- c) Giving advice to the responsible officer when advice is sought.

5.4.5. Internal Audit

The responsibilities of Internal Audit will be: -

- a) Reviewing compliance with approved policy and treasury management practices.
- b) Reviewing division of duties and operational practice.
- c) Assessing value for money from treasury activities.
- d) Undertaking probity audit of treasury function.

5.5 Absence Cover Arrangements

In the case of the Finance Manager – Treasury, the Financial Accountant and Purchase to Pay Supervisor all being unavailable, the Strategic Director – Corporate Resource and Assistant Director for Finance can deal for the Council. If secondary approval is needed, other Strategic Directors or the Chief Executive can provide this approval.

5.6 Dealing Limits

There is no specific dealing limit by post, but limits on dealing is within the TMSS.

5.7 List of Approved Brokers

A list of approved brokers is maintained within the Treasury Team and a record of all transactions recorded against them. See TMP 11.1.2.

5.8 Policy on Brokers' Services

It is this Council's policy to rotate business between brokers.

5.9 Policy on Taping of Conversations

It is not this Council's policy to tape brokers conversations.

5.10 Direct Dealing Practices

The Council will consider dealing direct with counterparties if it is appropriate and the Council believes that better terms will be available. At present, most deals are arranged through brokers. There are certain types of accounts and facilities, however, where direct dealing is required, as follows;

- Business Reserve Accounts:

- Call Accounts:
- Money Market Funds.

5.11 Settlement Transmission Procedures

A formal letter signed by an agreed cheque signatory setting out each transaction must be sent to the local authority's bankers where preliminary instructions have been given by telephone. For payments a transfer will be made through the Online Banking system to be completed by 5pm on the day of transfer.

5.12 Documentation Requirements

For each deal undertaken a record should be prepared giving details of dealer, amount, period, counterparty, interest rate, dealing date, payment date(s), broker.

5.13 Arrangements Concerning the Management of Third-Party Funds.

The Council holds a number of trust funds. The cash in respect of these funds is held in the Council's bank account but transactions are separately coded. Interest is given on credit balances at the average rate for internal balances for the year.

AGENDA ITEM NO. 9

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	25 th November 2025
Subject:	Review of Performance Management Framework and Risk Management Policy and Strategy
Portfolio:	Resources and Central Services
Responsible Officer:	Governance, Risk Management and Performance Officer
Corporate Plan – Theme:	Your Council
Corporate Plan – Aim:	Delivering Services Effectively
Ward Relevance:	None
Public or Private:	Public
Forward Plan:	Yes
Subject to Call-in:	Yes

1. Purpose of report

- 1.1. To provide the Audit and Standards Committee with the reviewed Performance Management Framework and Risk Management Policy and Strategy documents for consideration, approval and referral to Full Council for adoption.

2. Recommendation

- 2.1. That the revised Performance Management Framework and Risk Management Policy and Strategy documents are endorsed; and
- 2.2. It be recommended to Full Council to approve and update the Constitution accordingly.

3. Background

- 3.1. The Performance Management Framework (current version October 2023) and Risk Management Policy and Strategy (current version October 2023) are subject to scheduled review every two years, unless significant changes are identified in the interim period. Approval of reviews are required by the Audit and Standards Committee if significant changes are identified.

4. Report

4.1 **Review Process**

- 4.1.1. The Performance Management Framework and Risk Management Policy and Strategy documents have been reviewed in consultation with Senior Leadership Team. The Risk Management Policy and Strategy review also takes account of agreed findings of a recent risk audit by Central Midlands Audit Partnership (CMAP).

4.2. **Summary of Key Changes**

4.2.1. Performance Management Framework

- Council logo updated
- Current dates applied for document control purposes
- Corporate Executive Team (CET) / Senior Leadership Team (SLT) references added
- Clarified performance reporting to CET / SLT / Overview and Scrutiny Panels (OSP) – section 3.2
- Generic references to Corporate Plan Delivery Plan replacing branded versions (ie. “Building a Better Borough”)
- Removed financial data from Integrated Performance Report to Overview and Scrutiny panels
- Appendix C Performance Management Cycle – Performance Indicators /Measures now reflects OSP meetings three times per year

4.2.2. Risk Management Policy and Strategy

- Council logo updated
- Current dates applied for document control purposes
- Clarified risk appetite linked to the risk matrix (Definitions section 2.2)
- Clarified Strategic / Operational risk and risk issue (Definitions sections 2.4 – 2.6)
- Expanded on Identification of Risk (section 3.1)

- Clarified the overall assessment of the Strategic Risk Register based on the number of risks satisfactorily managed (section 3.4)
- Revised the Responsibilities at section 4 including Strategic / Assistant Directors, Health and Safety Manager, Employees, Officer Groups, Elected Members, Central Midlands Audit Partnership (CMAP) and sampling of sources of assurance during scheduled risk register reviews
- Transparency section added relating to the current policy and strategy being available to view on the Council's website and Audit and Standards Committee reporting to check and challenge at least annually and Scrutiny panels process clarified (section 5)
- Training section added relating to Elected Members and designated officers (section 6)

STEVE GORE

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

5.1 Senior Leadership Team (as referenced at 4.1 of the report).

6. Financial Implications

6.1 .No direct financial implications have been identified.

7. Legal Implications

7.1 No direct legal implications have been identified.

8. Equalities implications

8.1 Not applicable to this report.

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 No direct risk management implications have been identified.

13. Human resources implications

3.1 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	The Performance Management Framework and Risk Management Policy and Strategy documents form part of the Council's Constitution. Furthermore, the existing policy refers to a 2 yearly review which has prompted this review. In addition, recommendations raised as part of a recent CMAP audit (as per 4.1.1) have been captured to improve the policy and strategy documents.

15. **Appendices**

Please note the following appendices:

- APPENDIX A1 - Performance Management Framework (clean revised version)
- APPENDIX A2 - Performance Management Framework (track changes version)
- APPENDIX B1 - Risk Management Policy and Strategy (clean revised version)
- APPENDIX B2 - Risk Management Policy and Strategy (track changes version)

16. **Background papers**

None.

17. **Report Writer Details:**

Officer Job Title: Governance, Risk Management and Performance Officer

Officer Name: Steve Gore

Officer Email Address: steve.gore@nuneatonandbedworth.gov.uk



Nuneaton and Bedworth Borough Council

Performance Management Framework

October 2025

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- 2. Priorities**
- 3. Managing Performance**
- 4. Data Quality**
- 5. Risk Management**

Appendices

- A. Determining Our Priorities – Systematic Approach**
- B. Performance Management Cycle – Overview**
- C. Performance Management Cycle – Performance Indicators**
- D. Action Plan from 2023 Performance Management framework Review**

1. Introduction

- 1.1 The purpose of this performance management framework is to improve performance management arrangements across the Council and service delivery for the communities of Nuneaton and Bedworth.
- 1.2 Good performance management is essential to achieve the Council's aims and objectives, based on a clear vision with realistic targets to support the achievement of these goals.
- 1.3 This vision needs to be clearly communicated to all Elected Members and employees in order that individuals have a good understanding of their work priorities and can see how these contribute to broader corporate targets and priorities.
- 1.4 Performance Management requires clarity about who is responsible for delivering particular objectives. The Council needs to ensure that these individuals have the required resources and support and are empowered to do the necessary work to achieve goals. The resulting outcomes need to be clearly communicated to residents to gauge how well the Council is performing on their behalf.
- 1.5 Key elements of performance include: a clear organisational vision, values, customer-focused objectives, target setting process (where appropriate), benchmarking, regular assessment and review and performance-related annual (employee) development review.
- 1.6 Benefits of an effective Performance Management Framework include:
 - Improved service delivery and outcomes for customers.
 - Demonstrating success or failure.
 - Effective use of resources.
 - Identifying potential improvements / cost savings.
 - Improved audit / inspection results.
 - Linking financial / non-financial data to provide a balanced picture of the organisation.
 - Informing the debate on future priorities.
 - More effective partnership working.

2. Themes and Priorities

2.1 Determining Our Aims and Priorities

The Council aims to have the top priorities established in the Corporate Plan translated into priorities at individual level using the systematic approach detailed at Appendix A.

2.2 The Council's long-term aims and priorities have been drawn from a variety of sources including:

- National data
- Strategic Assessment for community safety
- General indices of multiple deprivation
- Borough Plan
- Economic, housing and social data

2.3 Service Priorities

Each Strategic Director applies the aims and priorities from Corporate Plan to set out their part in their delivery. They are supplemented by service-specific priorities based on service demand, performance and response to changes in service/ operational environment. This is the mechanism through which the Council's long-term vision and aims will be progressed and achieved through annual targets and milestones. This is measured by Corporate Plan Delivery Plans (annual plans which are monitored on a quarterly basis and reviewed annually) - these show clear links to service activities.

2.4 Individual Priorities

Completing the performance management cycle includes the Council's Annual Development Review / one to one scheme that reinforces the organisation's values as well as the importance of performance and achievement. Documentation formalises the review discussion. The review process is consistently applied to focus on outcomes, and all employees have an action plan which identifies performance measures, targets and service improvements against which they will be appraised. The Council recognises that individuals (Members and employees) may need training and support to achieve their full potential. The training plan included as part of the review process is geared towards meeting Council objectives by improving individual skills and knowledge.

2.5 Corporate Employee Values

The Council's employee values support the effective delivery of performance outcomes. They are:

- **SERVICE FOR OUR CUSTOMERS** – We put our customers first in everything we do
- **INTEGRITY IN OUR ACTIONS** – We are open, honest and fair, communicate accurately and keep our promises. We act within the law and the Council's Constitution and policies
- **ACCOUNTABILITY FOR OUR PERFORMANCE** – We accept personal responsibility, not seeking to blame others and apologise if we get things wrong
- **CO-OPERATION WITH COUNCILLORS, COLLEAGUES AND PARTNERS** – We share ideas, knowledge and resources, we are friendly towards, listen to and respect each other, and work in teams to deliver excellence
- **OBJECTIVITY IN OUR DECISIONS** – We base our decisions on evidence, welcome challenge and take account of alternative opinions and the wider picture
- **EFFICIENCY TO KEEP OVERALL COSTS DOWN** – We constantly improve our value for money, learning from good practice, eliminating waste, and making the most of our assets
- **CONFIDENCE TO TRY THINGS OUT** – We give our people encouragement, authority and support to be creative and flexible in how they deliver services, learning from things that go wrong when we experiment

3. Managing Performance (see Appendices B and C)

3.1 Targets / Measures

Once priorities are identified, targets for performance indicators are set or measures established (no target) which are monitored and reported according to importance. Targets are set by reference to current performance, organisational aims / capacity and benchmarking data. Meeting the priorities set at various levels involves the achievement of a target / milestone, completion of a task or measurable improvements in performance.

As services go through system reviews, traditional targets may be replaced by a measure of improvement. This will show as: green (improved), amber (stayed the same) or red (declined) for reporting purposes.

3.2 Measurement / Reporting

Monitoring progress in relation to performance takes place at several levels:

- Performance Reporting to Corporate Executive Team (CET) and Senior Leadership Team (SLT) monthly. This relates to measures identified by Assistant Directors as meaningful and appropriate for review at each forum.
- An integrated performance management report linking, performance and risk data is produced quarterly for Overview and Scrutiny Panel(s) with progress updates on service improvement plans reported at half year. The format links performance / risk data within the remit of each panel. Further development is on-going to establish any available comparative (benchmarking) data on good practice / performance to enhance the scrutiny process (see also Appendix D action plan).
- Service objectives and targets are set out within service areas. These include performance indicators / measures and are used to plan and monitor the work within service areas to meet the requirements of the Corporate Plan Delivery Plan.
- Reporting by exception is the general rule applied to advising CET / SLT / Cabinet of under-performance in key areas (see also 3.3).

3.3 Under- performance and Remedial Action

Managers are responsible for monitoring performance and taking appropriate action to address issues affecting results in their service area. Management Team may seek information and assurances from an Assistant Director at any time. However, there may be instances where an indicator is below target or a measure declines in performance for two consecutive periods (month or quarter) and management corrective actions taken have not improved the situation. In such cases, the relevant Strategic Director will review and, if necessary, take to CET / SLT.

Where a Strategic Director escalates a performance issue, CET / SLT will:

- Review issues contributing to the under-performance of the indicator / measure.
- Address the failure of remedial action(s).
- Reallocate resources, if necessary.
- Propose alternative solutions, if appropriate.

- Instigate monitoring of the effectiveness of any further corrective actions taken.
- Record details / outcome(s) in Management Team meeting minutes.

Scrutiny Panel Reporting

Integrated Performance Reports to Overview and Scrutiny Panel(s) include appropriate comments on under-performance for Elected Members to explain issues and / or corrective action(s) instigated. However, the panel may still request that the appropriate Portfolio Holder and / or officer attend the panel meeting to provide further clarification / information.

3.4 Improvement

The need to improve is fundamental to the Council's approach to managing performance. This will be achieved by:

- sharing and comparing information with other authorities, partners and agencies with a view to establishing better ways of delivering services;
- liaising with other performance managers / sharing resources and ideas to become more effective, as appropriate.
- Regular review (every two years, unless significant changes occur in the interim period) of this Performance Management Framework

4. Data Quality

We recognise that reliable data quality is key to all aspects of the provision of services. It is important to ensure that accurate information is available to enable informed decision making and to assure the integrity of published data. Clear audit trails must be in place. We are therefore committed to provide data quality of a consistently high standard within available resources.

4.1 Data should be:

- **Accurate** – sufficiently accurate for its intended purpose.
- **Valid** – collected in compliance with agreed requirements / definitions.
- **Reliable** – reflecting consistent collection processes and time periods.
- **Relevant** – to the purposes for which it is used.

- **Complete** – incomplete or invalid records can indicate poor data quality and / or problems with recording processes.

An annual internal audit sample review is carried out to test data quality.

4.2 Responsibilities

CET / SLT – overall strategic responsibility for promoting and co-ordinating data quality management.

Assistant Directors / Managers – operational responsibility for ensuring data quality in their service area including provision of training and regular sampling of information processed. Responsible for ensuring that definitions are in place for all indicators / measures and officers responsible for collating data comply with the definition.

Employees – data quality is the responsibility of every employee entering, extracting or analysing information from any of the Council's information systems. All employees share a responsibility for ensuring that information they produce, receive, act upon or process is accurate. This should be emphasised in training provided, along with how lapses can have an adverse effect on the integrity of the data provided and, consequently, the Council's reputation.

5. Risk Management

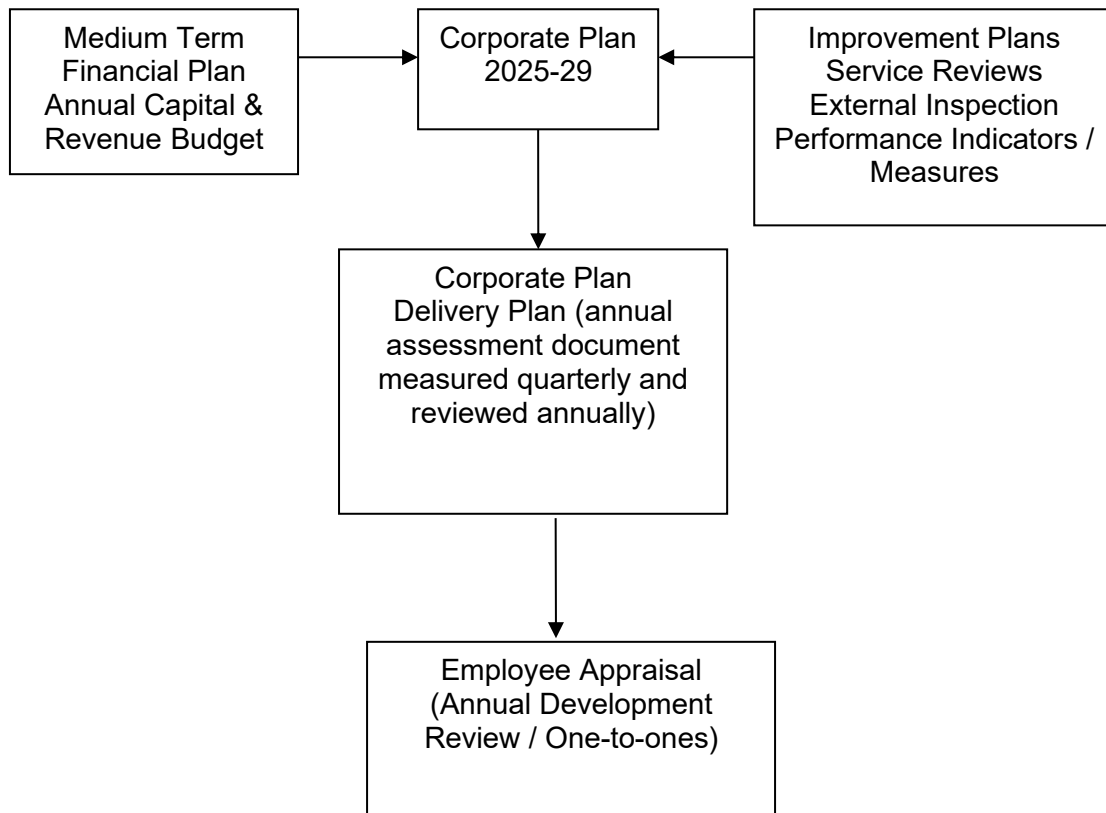
In line with the Council's obligations to ensure that strategic and operational risks are fully assessed and managed, risk management is also an important element of the Performance Management Framework. A review of both corporate and operational risks is incorporated into the performance management cycle. All managers will assess and take account of the key risks to be managed in delivering their objectives and targets. Overview and Scrutiny Panel(s) will receive a current summary status of the Strategic Risk Register with the latest version of risks within the remit of each panel.

6. Action Plan

An action plan relating to areas identified from the latest review of this framework is shown at Appendix D.

Appendix A

Determining Our Priorities – Systematic Approach



Performance Management Cycle – Overview

January	Quarterly review of Strategic Risk Register Quarterly assessment of Corporate Plan Delivery Plan
January- December	Annual Development / one to one Review process Operational Risk Registers reviewed by Corporate Governance Group during the year
March	Review of indicators and measures
April	Quarterly review of Strategic Risk Register Quarterly assessment of Corporate Plan Delivery Plan
July	Quarterly review of Strategic Risk Register Quarterly assessment of Corporate Plan Delivery Plan
October	Quarterly review of Strategic Risk Register Quarterly assessment of Corporate Plan Delivery Plan
October - February	Budgets - establish allocation of resources for the forthcoming year against identified priorities in the BaBB
December - March	Annual review of Corporate Plan Delivery Plan

Performance Management Cycle – Performance Indicators /Measures

January	Monthly Performance Reporting Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of Corporate Plan Delivery Plan
	Quarterly Integrated Performance/Risk Report (second quarter) to Overview and Scrutiny Panel(s) including Strategic Risk Register
February	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)
March	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)
April	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of Corporate Plan Delivery Plan
May	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)
June	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)
	Quarterly Integrated Performance/Risk Report (third and fourth quarters) to Overview and Scrutiny Panel(s) including Strategic Risk Register
July	Monthly Performance Reporting Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of Corporate Plan Delivery Plan
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September	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT) Quarterly Integrated Performance/Risk Report (first quarter) to Overview and Scrutiny Panel(s) including Strategic Risk Register
October	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of Corporate Plan Delivery Plan
	Quarterly Integrated Performance/Risk Report (first quarter) to Overview and Scrutiny Panel(s) including Strategic Risk Register
November	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)
December	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)

**Areas for Improvement – Action Plan from 2025 Performance
Management Framework Review**

REF.	ACTION	OFFICER RESPONSIBLE	WHEN
1	Establish any comparative (benchmarking) data on good practice / performance to enhance scrutiny panel reporting	Governance, Risk Management and Performance Officer / Assistant Directors	On-going
2.	Annual review of indicators	Governance, Risk Management and Performance Officer	Annually in March
3.	Carry out audit to test data quality	Governance, Risk Management and Performance Officer	Annually in January



Nuneaton and Bedworth Borough Council

Performance Management Framework

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1. Introduction

- 1.1 The purpose of this performance management framework is to improve performance management arrangements across the Council and service delivery for the communities of Nuneaton and Bedworth.
- 1.2 Good performance management is essential to achieve the Council's aims and objectives, based on a clear vision with realistic targets to support the achievement of these goals.
- 1.3 This vision needs to be clearly communicated to all Elected Members and employees in order that individuals have a good understanding of their work priorities and can see how these contribute to broader corporate targets and priorities.
- 1.4 Performance Management requires clarity about who is responsible for delivering particular objectives. The Council needs to ensure that these individuals have the required resources and support and are empowered to do the necessary work to achieve goals. The resulting outcomes need to be clearly communicated to residents to gauge how well the Council is performing on their behalf.
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- 1.6 Benefits of an effective Performance Management Framework include:
 - Improved service delivery and outcomes for customers.
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 - More effective partnership working.

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2. Themes and Priorities

2.1 Determining Our Aims and Priorities

The Council aims to have the top priorities established in the [Building a Better Borough \(BaBB\) 2022-34 \(formerly the Corporate Plan\) Corporate Plan](#) translated into priorities at individual level using the systematic approach detailed at Appendix A.

2.2 The Council's long-term aims and priorities have been drawn from a variety of sources including:

- National data
- Strategic Assessment for community safety
- General indices of multiple deprivation
- Borough Plan
- Economic, housing and social data

2.3 Service Priorities

Each Strategic Director applies the aims and priorities from [the BaBB 2022-34 Corporate Plan](#) to set out their part in their delivery. They are supplemented by service-specific priorities based on service demand, performance and response to changes in service/ operational environment. This is the mechanism through which the Council's long-term vision and aims will be progressed and achieved through annual targets and milestones. This is measured by [BaBB Corporate Plan Delivery Plans \(3-year annual plans which are monitored on a quarterly basis and reviewed annually\)](#) - these show clear links to service activities.

2.4 Individual Priorities

Completing the performance management cycle [is includes](#) the Council's Annual Development Review / [one to one](#) scheme that reinforces the organisation's values as well as the importance of performance and achievement. Documentation formalises the review discussion. The review process is consistently applied to focus on outcomes, and all employees have an action plan which identifies performance measures, targets and service improvements against which they will be appraised. The Council recognises that individuals (Members and employees) may need training and support to achieve their full potential. The training plan included as part of the review process is geared towards meeting Council objectives by improving individual skills and knowledge.

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The Council's employee values support the effective delivery of performance outcomes. They are:

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3. Managing Performance (see Appendices B and C)

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Once priorities are identified, targets for performance indicators are set or measures established (no target) which are monitored and reported according to importance. Targets are set by reference to current performance, organisational aims / capacity and benchmarking data. Meeting the priorities set at various levels involves the achievement of a target / milestone, completion of a task or measurable improvements in performance.

As services go through system reviews, traditional targets may be replaced by a measure of improvement. This will show as: green (improved), amber (stayed the same) or red (declined) for reporting purposes. ~~A rolling mean for end-to-end times will be used to measure improvements.~~

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3.2 Measurement / Reporting

Monitoring progress in relation to performance takes place at several levels:

- ~~Strategic~~ Performance Reporting to Corporate Executive Team (CET) and Senior Leadership Team (SLT) monthly, and Overview and Scrutiny Panels (quarterly basis). This is an overview of the Council's position relating to: Finance, People and Service Delivery, Processes and Improvement. This relates to measures identified by Assistant Directors as meaningful and appropriate for review at each forum.
- An integrated performance management report linking finance, performance and risk data is produced quarterly for Overview and Scrutiny Panel(s) with progress updates on service improvement plans reported at half year. The format links finance / performance / risk data on the key service areas based on expenditure / income within the remit of each panel. Details on performance of smaller service areas within the remit of the panel are reported by exception (ie. if there is adverse performance). Further development is on-going to establish any available comparative (benchmarking) data on good practice / performance to enhance the scrutiny process (see also Appendix D action plan).
- Service objectives and targets are set out within service areas. These include performance indicators / measures and are used to plan and monitor the work within service areas to meet the requirements of the BaBB Corporate Plan Delivery Plan.
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Where a Strategic Director escalates a performance issue,

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Management Team-CET / SLT will:

- Review issues contributing to the under-performance of the indicator / measure.
- Address the failure of remedial action(s).
- Reallocate resources, if necessary.
- Propose alternative solutions, if appropriate.
- Instigate monitoring of the effectiveness of any further corrective actions taken.
- Record details / outcome(s) in Management Team meeting minutes.

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The need to improve is fundamental to the Council's approach to managing performance. This will be achieved by:

- sharing and comparing information with other authorities, partners and agencies with a view to establishing better ways of delivering services;
- liaising with other performance managers / sharing resources and ideas to become more effective, as appropriate.
- —Regular review (every two years, unless significant changes occur in the interim period) of this Performance Management Framework

4. Data Quality

We recognise that reliable data quality is key to all aspects of the provision of services. It is important to ensure that accurate information is available to enable informed decision making and to assure the integrity of published data. Clear audit trails must be in place. We are therefore committed to provide data quality of a consistently high standard within available resources.

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4.1 Data should be:

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- **Relevant** – to the purposes for which it is used.
- **Complete** – incomplete or invalid records can indicate poor data quality and / or problems with recording processes.

An annual internal audit sample review is carried out to test data quality.

4.2 Responsibilities

Management Team ~~CET~~ / ~~SLT~~ – overall strategic responsibility for promoting and co-ordinating data quality management.

Assistant Directors / Managers – operational responsibility for ensuring data quality in their service area including provision of training and regular sampling of information processed. Responsible for ensuring that definitions are in place for all indicators / measures and officers responsible for collating data comply with the definition.

Employees – data quality is the responsibility of every employee entering, extracting or analysing information from any of the Council's information systems. All employees share a responsibility for ensuring that information they produce, receive, act upon or process is accurate. This should be emphasised in training provided, along with how lapses can have an adverse effect on the integrity of the data provided and, consequently, the Council's reputation.

5. Risk Management

In line with the Council's obligations to ensure that strategic and operational risks are fully assessed and managed, risk management is also an important element of the Performance Management Framework. A review of both corporate and operational risks is incorporated into the performance management cycle. All managers will assess and take account of the key risks to be managed in delivering their objectives and targets. Overview and Scrutiny Panel(s) will receive a current summary status of the Strategic Risk Register with the latest version of risks within the remit of each panel.

6. Action Plan

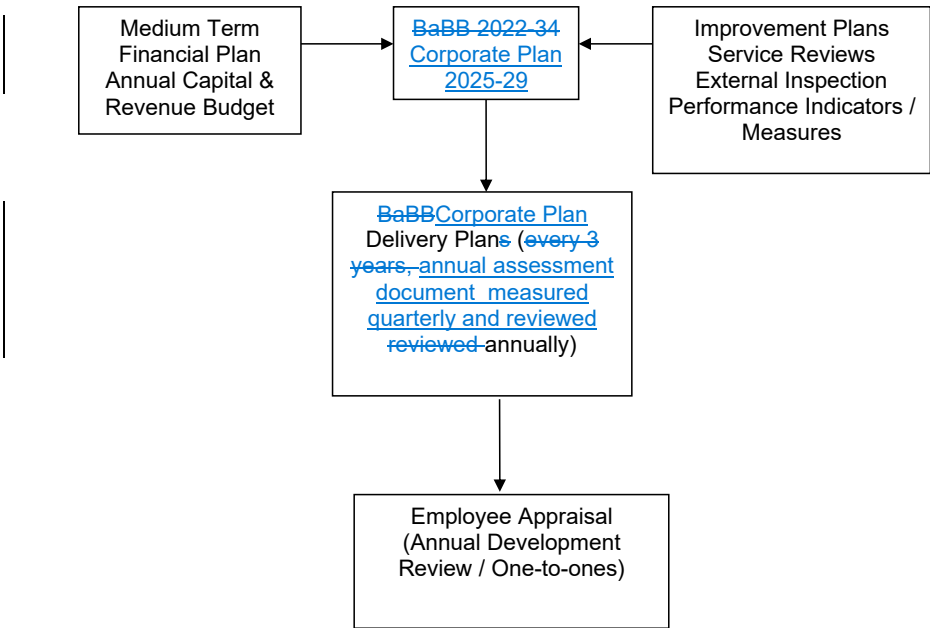
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An action plan relating to areas identified from the latest review of this framework is shown at Appendix D.

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Appendix A

Determining Our Priorities – Systematic Approach



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Appendix B

Performance Management Cycle – Overview

January	Quarterly review of Strategic Risk Register Quarterly assessment of Building a Better Borough (BaBB) Corporate Plan Delivery Plan
January-December	Annual Development / one to one Review process Operational Risk Registers reviewed by Corporate Governance Group during the year
March	Review of indicators and measures
April	Quarterly review of Strategic Risk Register Quarterly assessment of BaBB Corporate Plan Delivery Plan
July	Quarterly review of Strategic Risk Register Quarterly assessment of BaBB Corporate Plan Delivery Plan
October	Quarterly review of Strategic Risk Register Quarterly assessment of BaBB Corporate Plan Delivery Plan
October - February	Budgets - establish allocation of resources for the forthcoming year against identified priorities in the BaBB
December - March	Annual review of BaBB Corporate Plan Delivery Plan

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Appendix C

Performance Management Cycle – Performance Indicators /Measures

January	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of BaBB Corporate Plan Delivery Plan Quarterly Integrated Performance/Risk Report (second quarter) to Overview and Scrutiny Panel(s) including Strategic Risk Register	Formatted Table
February	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT)	
March	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT)	
April	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of BaBB Corporate Plan Delivery Plan	
May	Monthly Performance Reporting to Corporate Management Team (CET) / Senior Leadership Team (SLT)	
June	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT) Quarterly Integrated Performance/Risk Report (third and fourth quarters) to Overview and Scrutiny Panel(s) including Strategic Risk Register	
July	Monthly Performance Reporting Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of Corporate Plan Delivery Plan	
August	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT)	Formatted Table
September	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT) Quarterly Integrated Performance/Risk Report (first quarter) to Overview and Scrutiny Panel(s) including Strategic Risk Register	
October	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT) - Including quarterly assessment of BaBB Corporate Plan Delivery Plan Quarterly Integrated Finance/ Performance/Risk Report (second quarter) to Overview and Scrutiny Panel(s) including Strategic Performance Report and Strategic Risk Register	
November	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT)	
December	Monthly Strategic Performance Reporting to Management Team Corporate Management Team (CET) / Senior Leadership Team (SLT)	

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Appendix D

Areas for Improvement – Action Plan from ~~2023-2025~~ Performance Management Framework Review

REF.	ACTION	OFFICER RESPONSIBLE	WHEN
1	Establish any comparative (benchmarking) data on good practice / performance to enhance scrutiny panel reporting	Governance, Risk Management and Performance Officer / Assistant Directors	On-going
2.	Annual review of indicators	Governance, Risk Management and Performance Officer	Annually in March
3.	Carry out audit to test data quality	Governance, Risk Management and Performance Officer	Annually in January

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Risk Management Policy and Strategy

October 2025

Document Control

DOC16/75813

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Risk Management Policy and Strategy

Organisation	Nuneaton and Bedworth Borough Council
Title	Risk Management Policy and Strategy
Filename	DOC16/75813
Owner	Governance, Risk Management and Performance Officer
Subject	Risk Management Policy and Strategy
Next Review Date	October 2027

Revision History

Revision Date	Reviser	Previous Version	Description of Revision
07/04/2017	Steve Gore	V4.0	Risk descriptors update.
27/08/2019	Steve Gore	V5.0	New organisational structure.
October 2021	Steve Gore	V6.0	Scheduled review.
November 2022	Steve Gore	V7.0	Organisational structure / clarification of reporting lines.
October 2023	Steve Gore	V8.0	Scheduled review.
October 2025	Steve Gore	V9.0	Scheduled review / Audit (CMAF) Recommendations.

Document Approvals

This document requires the following approvals

Name	Date
Audit and Standards Committee	9/1/24
Audit and Standards Committee	25/11/25

Risk Management Policy

1. 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.
2. It is good business practice that risk management processes should be:
 - Supportive rather than unduly restrictive.
 - Embedded in the Council's culture and in its decision-making, planning and management functions; and
 - Embraced by all Members and employees.
3. 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
4. These aims will be achieved through the Council's Risk Management Strategy, which details the roles, responsibilities and actions necessary for successful implementation.

Risk Management Strategy

1. Introduction

- 1.1 This strategy sets out the processes to ensure that risks to the Council's services, objectives, employees, assets, contractors and partnerships are identified, recorded, assessed, prioritised and then mitigated, transferred or eliminated, to achieve an acceptable level of exposure.
- 1.2 The Risk Management Framework states how the Council manages risks and maximises opportunities in achieving its aims and priorities and this strategy forms part of that process.

2. Definitions

2.1 Corporate Governance

Corporate governance is the framework of accountability to users, stakeholders, and the wider community, within which organisations take decisions and lead and control their functions to achieve their objectives. The effectiveness of corporate governance arrangements has a significant impact on how well an organisation meets its aims. Its purpose is to ensure that the right thing is done, in the right way, by the right people, in an open, honest, and timely manner.

2.2 Risk and Risk Appetite

"Risk" can be defined as "The possibility that an event will occur and adversely affect achievement of objectives".

The amount and type of risk that we are willing to seek or accept in the pursuit of agreed strategic objectives and key priorities is the "risk appetite". This correlates to the likelihood / impact risk matrix. Generally, the Council will mitigate risk as far as reasonable possible and acknowledges where risk cannot be wholly removed or mitigated, in some cases, a level of risk will be accepted and managed accordingly.

2.3 Partnership

A partnership is an agreement between the Council and one or more independent legal bodies, organisations, or individuals to work collectively to achieve a common purpose with specified aims and objectives. More detailed guidance on managing partnerships and the associated risks is available in the Council's Partnership Framework document.

2.4 Strategic Risk - a risk that can adversely affect the Council's long-term objectives

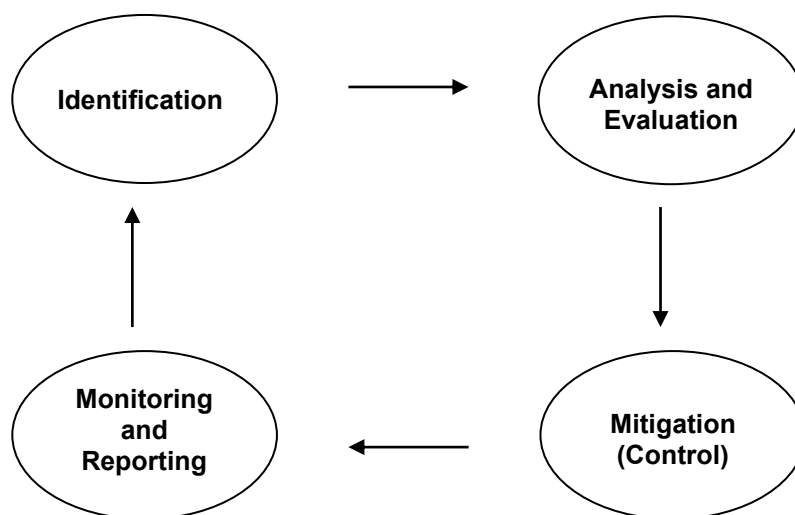
2.5 Operational Risk - the risk of loss because of ineffective or failed internal processes, people, systems, or external events that can disrupt the flow of the Council's operations

2.6 Risk Issue - a risk with nearly 100% probability, or one that has already happened

3. Risk Management Process

Risk management involves the following four processes: -

- Identification of risk
- Analysis and evaluation
- Mitigation
- Monitoring and reporting



3.1 Step 1 - Identification of Risk

A systematic approach needs to be applied if all significant risks are to be identified and managed effectively. By identifying areas of risk before an event or loss occurs, steps can be taken to reduce the likelihood of occurrences and/or to minimise the cost to the Council if they do happen. Reacting to events only after they have occurred can be very costly.

Risks can be identified in a number of ways, for example: -

- Through discussions with colleagues, stakeholders, Members, contractors, partners, insurance brokers, insurers, risk advisers and external auditors.
- Looking at trends, accident reports, complaints, new agendas, legislation and regulations.

To ensure clarity and effective management, each risk should be articulated using the following structure:

- **Cause** – the source or driver of the risk; the underlying condition or circumstance that may lead to an event occurring.
- **Event** – the specific uncertain occurrence or situation that, if it happens, could affect objectives.
- **Impact** – the consequence(s) or effect(s) on objectives if the event occurs.

Risk Management Policy and Strategy

The table below lists some categories of risk which may have an impact on aims and priorities: -

Risk Category	Examples of issues to consider
Political	Local and national political issues. Stability of the political situation.
Economic	State of the local economy. Interest rates, inflation and related key assumptions. Labour market effects on recruitment and retention.
Social and Employee-Related	Demographic profile of the workforce and population. The consequent effect on demand for services and/or stakeholder expectations.
Technological and Information-Related	Capacity to respond to technological changes or opportunities arising from technological developments. Current use of or reliance on technology. Quality and security of information. Accessibility of key documents. Resilience and IT/Communications recovery capacity.
Legislative /Regulatory	Preparedness for new legislation and regulations, e.g health and safety, planning or employment law.
Environmental	Use, acquisition &/or disposal of land &/or premises. Waste, disposal and recycling arrangements.
Competitive	Competitiveness of service delivery in terms of cost and quality. Ability to deliver value for money.
Customer/ Citizen	Extent, nature and effectiveness of consultation and involvement with the community. Ability to meet current and future needs. Service delivery feedback. Reputation.
Professional	Organisational and individual competency levels and capacity to deliver objectives. Staff recruitment and retention. Skill and knowledge levels. Opportunities for networking and continuing professional development.
Financial	Level of reserves. Adequacy of funding. Financial planning and control. Fraud.
Legal	Possible legal challenges and claims.
Partnership/ Contractual	Key strategic partners. Procurement arrangements. Contractual arrangements. Partners' governance arrangements.
Physical	Security and protection of assets. Maintenance practices. Protection, security, health, safety and wellbeing of the workforce and population.

There are two key elements to each risk description – **cause and consequence**. To effectively manage risks, both of these elements need to be identified. An example is as follows: -

The reason for NBBC's failure to maintain a sound budgetary and financial control environment (**cause**), resulting in the Council having insufficient financial resources to achieve the key priorities (**consequence**).

When identified, significant risks should be recorded in a risk register. NBBC have both strategic and operational risk registers (including some which are specific to individual projects or partnerships). The Strategic Register addresses cross-cutting corporate risks. Operational registers address risks that could impact upon service delivery.

Risk Management Policy and Strategy

The Strategic Risk Register records the following information for each risk: -

- A risk reference number
- The risk description (in terms of cause and consequence)
- A gross risk score (the score before effective mitigation controls are in place)
- The mitigation controls (identifying whether 'existing' / 'ongoing' or 'planned')
- The mitigation owner(s). These could be different for each control
- The net risk status – red, amber or green (after effective mitigation controls are in place)
- Sources of assurance i.e., how the risk is monitored / relevant documents with sample evidence to be requested and provided; and
- The risk owner / portfolio holder / relevant overview and scrutiny panel

3.2 Step 2 - Analysis of Risk

Having identified the risks, they need to be analysed. This process requires managers to assess: -

- The probability (likelihood) of a risk occurring; and
- The severity (impact) of the consequences should it do so.

The matrix below indicates risk levels

Likelihood	4	4	8	12	16
	3	3	6	9	12
	2	2	4	6	8
	1	1	2	3	4
		1	2	3	4
		Impact			

Key

	Green (acceptable)
	Amber (tolerable)
	Red (unacceptable)

The Council's likelihood and impact descriptors are as follows: -

Likelihood

4: **Very High** – occurrence is most likely or has already happened and will do so again if control measures are not introduced

3: **High** – occurrence is anticipated within the next 12 months

2: **Significant** – occurrence is probable in the next 3 years

1: **Low** – foreseeable but not probable in the next 3 years

Risk Management Policy and Strategy

	Level of Impact	Service Delivery	Financial / Legal	Reputation / Community
4	Major	• A service delivery failure causes significant hardship to people for a period of 3 to 4 weeks or more or 1 week for anyone that is vulnerable, or failure to meet a nationally mandated deadline • Loss of major stakeholder/partner. • Adverse outcome of a serious regulatory enquiry	• Financial loss over £400,000. • Serious risk of legal challenge	• Sustained adverse TV/radio coverage • Borough wide loss of public confidence • Major damage to local environment, health and economy • Multiple loss of life
3	Serious	• A service delivery failure causes significant hardship for a period of 2 to 3 weeks or 3 to 7 calendar days for vulnerable people • Formal regulatory inquiry • Loss of a key partner or other partners	• Financial loss between £200K and £399K • High risk of successful legal challenge	• Significant adverse coverage in national press or equivalent low national TV coverage • Serious damage to local environment, health and economy • Extensive or multiple injuries &/or a fatality
2	Moderate	• A service delivery failure causes significant hardship for 1 to 2 weeks or 1 -2 calendar days for vulnerable people • Loss of a significant non-key partner • Legal concerns raised • Loss of employees has moderate effect on service provision	• Financial loss between £50K and £199K • Informal regulatory enquiry	• Significant adverse coverage in local press or regional TV • Large number of customer complaints. • Moderate damage to local environment, health and economy • Moderate injuries to an individual
1	Low	• Disruption to services for up to 1 week • Minor legal implications • Loss of employees not significantly affecting service provision	• Financial loss up to £49K	• Minor adverse media coverage. • Minor environmental, health and economy damage • Minor increase in number of customer complaints • One or more minor injuries to an individual

3.3 Step 3 - Control of Risks

Having identified and prioritised the risks, each one needs to be assessed to determine the appropriate action required for it to be mitigated. There are four options: -

Terminate	Stop the activity or remove the physical cause
Transfer	As far as possible, pass the risk on to another party, e.g. contractually or by insuring it
Treat	Set up control (mitigation) measures &/or improve existing ones. Examples: • Use of password, barrier, temperature or other controls. • Installation or upgrade of alarms. • Implement new or revised procedures, requirements &/or management arrangements
Tolerate	Do nothing, live with the risk as it stands

The mitigation owner also needs to be identified, this being the individual specified as responsible for putting the stated control(s) into action &/or ensuring it remains in operation. Ownership of a control measure should rest with a single individual, even if more than one person is needed to carry it out.

The level of risk remaining after the internal control measure is in place is the residual or net risk. This should be at a level which is within NBBC's risk appetite. That is (except for any risk identified as "Outside the Council's control because of external factors"), the level of residual risk is acceptable to the authority.

3.4 Step 4 - Monitoring and Review of Risks

As key management tools, Risk Registers must be used effectively to ensure that:

- They comprehensively address all recognised significant risks
- Mitigation measures/controls are adequate to minimise the likelihood and/or impact of each risk
- Any significant risks identified and remedial actions are sufficiently monitored

To establish whether they are being adequately managed, the following criteria will be used:

Red – Less than 60% of the identified risks are being satisfactorily managed

Amber – 60%-80% of the identified risks are being satisfactorily managed

Green – Over 80% of the identified risks are being satisfactorily managed

Overall assessment of the status of the register relates to the number of risks that are net green and net amber divided by the total number of risks in the register expressed as a percentage– for example, 12 net green + 6 net amber / 20 = 90% satisfactorily managed

4. Roles and Responsibilities

4.1. Officer Roles and Responsibilities

4.1.1. Strategic / Assistant Directors

- To adopt the Risk Management Policy and Strategy
- To ensure that all significant risks are identified and are effectively controlled through the process of risk assessment and mitigation within their respective services (maintain effective directorate Operational Risk Register)
- To proactively lead, manage and be fully accountable for health, safety and welfare across their directorate and service area. This includes ensuring all strategic decisions, new policies and initiatives thoroughly consider and address health and safety implications
- To establish, promote, and play a visible role in influencing and fostering a positive health and safety culture within the Council and their individual service area. They must ensure effective management of health and safety within their directorate.
- To develop and maintain a current business continuity plan (including updated contact information), ensuring appropriate officers understand their respective roles in relation to it
- Strategic Directors generally have responsibility for the Strategic Risk Register
- Assistant Directors generally have responsibility for their Operational Risk Register
- Where a Strategic Risk needs to be escalated, the relevant Directors should raise at Management Team or Corporate Governance Group accordingly for review and a decision as to how to mitigate the risk

4.1.2. The Governance, Risk Management and Performance Officer

- To provide risk management information & advice, both proactively & reactively in relation to strategic, operational and partnership risks
- To work with the owners of operational risks as required to identify and manage those risks and to maximise opportunities
- Liaising with Chief Executive / Strategic Directors to review and update all risks in the Strategic Risk Register on a quarterly basis Including sampling sources of assurance
- To provide quarterly Strategic Risk Register reports to Management Team (CET / SLT) / Cabinet / Overview and Scrutiny panels, identifying what proportion of the risks are being satisfactorily managed (Clause 3.4 of this document refers)
- To review and propose changes as required to the Risk Management Policy & Strategy, to risk registers and to other corporate risk management related documents
- To review the Risk Management Policy & Strategy at least bi-annually and to update it as required.
- Issue an annual report to Management Team which summarises:
 - i. Strategic Risk Register update and monitoring
 - ii. Operational Risk Registers update and monitoring
 - iii. Training of staff

- iv. Outcomes following OSP and Audit and Standards review of strategic risk register
- v. Consideration of any external support and/or routine audit of risk management
- This officer at the time of the October 2025 review, reports directly to the Assistant Director – Democracy and Governance.

4.1.3. Health & Safety Manager

- To align the health and safety strategy with the council's overall corporate objectives, plans and risk appetite
- To develop, implement and maintain a comprehensive health & safety policy that comply with all current legal and regulatory standards
- To provide competent advice and guidance on health and safety matters and promote an effective, healthy and safe organisational culture

4.1.4. Senior Information Risk Owner (SIRO) and Deputy SIRO (Assistant Director – Digital and Business Change / Corporate Support and Data Compliance Manager)

- To oversee the development of an Information Risk Policy, and a Strategy for implementing the policy within the existing Information Governance Framework
- To take ownership of the risk assessment process for information risk, including review of the annual information risk assessment to support and inform the Annual Governance Statement
- To review and agree an action plan in respect of identified information risks
- To ensure that the Council's approach to information risk is effective in terms of resource, commitment and execution and that this is communicated to all staff
- To provide a focal point for the resolution and/or discussion of information risk issues
- To ensure the Corporate Information Governance Group (CIGG) is adequately briefed on information risk issues
- To advise the Chief Executive and the CIGG on information risk management strategies and provide periodic reports and briefings on programme progress

4.1.5. Employees (including agency and casual)

- To comply fully with the risk control measures, safe working procedures, health and safety policies and training relevant to their role and work activities
- To take ownership of their legal duty of care for the health, safety, and welfare of themselves and any other person who may be affected by their actions or omissions
- To participate constructively in risk management processes, including safety meetings, training sessions and the implementation of recommended improvement
- To report, at the earliest opportunity, all incidents, near misses, accidents and dangerous occurrences resulting from work including those involving third parties to their line manager

4.2. Officer Groups - Roles and Responsibilities

4.2.1. Management Team (CET / SLT)

- To ensure the Council adopts an effective risk management strategy and that risks are fully considered in all strategic decision-making processes
- To monitor current and planned expenditure and income and to highlight any emerging issues that could have an impact on the Council's finances
- Responsible for health and safety in relation to Council activities, for establishing a positive health and safety culture and for actively encouraging ownership and accountability at all levels
- To ensure that effective business continuity plans are maintained and are regularly tested
- To regularly monitor the Strategic Risk Register

4.2.2. The Corporate Governance Group (CGG)

- To develop and co-ordinate excellent governance arrangements across the Council, including those relating to risk management
- To fulfil the role of the Corporate Information Governance Group (CIGG) on behalf of the Council providing strategic advice and assurance to the Authority on all matters concerning information management and governance
- To report to Management Team any issues that require its attention.
- To review directorate Operational Risk Registers on an annual basis (one Directorate per quarter).

4.2.3. The Information Management Group (IMG)

- To monitor and appraise the information and data needs of the Council and ensure that the Council delivers quality customer interaction and delivers services efficiently
- To facilitate information audits within each functional area and review them on a regular basis
- To aid the Information Asset Owners, (IAO) in carrying out their duties
- To monitor and appraise the outstanding FOI/DP cases. To identify any outstanding actions, liaise and co-ordinate with the relevant service areas to ensure that the requests are completed within the relevant timescales. If necessary, escalating the requests to the CIGG
- To promote and raise awareness of retention and disposal policies and procedures for all documents and records
- To ensure that information and data is treated as a corporate asset, shared by all. Develop any relevant policies and procedures to be presented to CIGG for approval, ensuring that NBBC is complying with relevant legislation
- To promote Information Management as a key corporate activity, essential to the provision of excellent customer interaction and efficiently delivered, high quality services

4.3.3. Central Midlands Audit Partnership (CMAP)

- To support the Council and its services in the effective development, implementation, monitoring and review of the Council's risk management policy, strategy and process

Risk Management Policy and Strategy

- To promote risk management and the process of business risk assessment throughout the Council and in relation to the Council's partnerships.
- To develop and implement Audit Plans using a risk-based approach.
- To support and promote risk management guidance and training for employees, contractors and members and to encourage the sharing of good practice
- To report to the Audit and Standards Committee on risk management activities and any issues arising
- To ensure that strategic, operational and partnership risks are suitably reflected within risk registers and that appropriate mitigating controls are in place and are adequately monitored and controlled
- To report to the Corporate Governance Group on risk management activities and any issues arising

4.3. Elected Members - Roles and Responsibilities

4.3.1. Audit and Standards Committee (based on risk reports and reviews provided by officers):

- To monitor the effective development and operation of risk management and corporate governance across the Council
- To seek and obtain assurance that appropriate action has been taken on risk related issues identified by internal and/or external audit
- To ensure that the Council's assurance statements, including the Annual Governance Statement, properly reflect the risk environment and any actions required to improve it
- To review the Strategic Risk Register alongside the draft annual internal audit plan and recommend changes to address any highlighted concerns
- To consider and approve the Risk Management Policy and Strategy following bi-annual review if significant changes are identified or if significant changes are necessary in the interim period between scheduled reviews.

4.3.2. Members

- To oversee the effective management of risk by the Council's officers, particularly when considering reports and proposals from officers. This includes scrutiny, challenge and recommendations at the Audit and Standards Committee, Overview and Scrutiny Panel(s) and amongst members of Cabinet.

5. Transparency

- The current policy and strategy will be available to view on the Council's website
- The Audit and Standards Committee shall at least annually, receive a report regarding the Strategic Risk Register to check, challenge and ensure positive scrutiny and oversight of the register
- Each Overview and Scrutiny Panel shall also receive information associated with the Strategic Risk Register for oversight and scrutiny purposes

6. Training

- Elected Members – annual training will be provided as part of the Corporate Governance training programme
- Designated Officers – training will be available for Strategic Directors, Assistant Directors and where applicable Service Managers during the 2026/2027 Financial Year and will be refreshed thereafter on a programme basis



Risk Management Policy and Strategy

October ~~2023~~2025

Risk Management Policy and Strategy

Document Control

Organisation	Nuneaton and Bedworth Borough Council
Title	Risk Management Policy and Strategy
Filename	DOC16/75813
Owner	Governance, Risk Management and Performance Officer
Subject	Risk Management Policy and Strategy
Next Review Date	October 2025 October 2027

Revision History

Revision Date	Reviser	Previous Version	Description of Revision
07/04/2017	Steve Gore	V4.0	Risk descriptors update.
27/08/2019	Steve Gore	V5.0	New organisational structure.
October 2021	Steve Gore	V6.0	Scheduled review.
November 2022	Steve Gore	V7.0	Organisational structure / clarification of reporting lines.
October 2023	Steve Gore	V8.0	Scheduled review.
October 2025	Steve Gore	V9.0	Scheduled review / Audit (CMAF) Recommendations.

Document Approvals

This document requires the following approvals

Name	Date
Audit and Standards Committee	9/1/24
Audit and Standards Committee	25/11/25

Risk Management Policy and Strategy

Risk Management Policy

1. 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.
2. It is good business practice that risk management processes should be:
 - Supportive rather than unduly restrictive.
 - Embedded in the Council's culture and in its decision-making, planning and management functions; and
 - Embraced by all Members and employees.
3. 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
4. These aims will be achieved through the Council's Risk Management Strategy, which details the roles, responsibilities and actions necessary for successful implementation.

Risk Management Policy and Strategy

Risk Management Strategy

1. Introduction

- 1.1 This strategy sets out the processes to ensure that risks to the Council's services, objectives, employees, assets, contractors and partnerships are identified, recorded, assessed, prioritised and then mitigated, transferred or eliminated, to achieve an acceptable level of exposure.
- 1.2 The Risk Management Framework states how the Council manages risks and maximises opportunities in achieving its aims and priorities and this strategy forms part of that process.

2. Definitions

2.1 Corporate Governance

Corporate governance is the framework of accountability to users, stakeholders, and the wider community, within which organisations take decisions and lead and control their functions to achieve their objectives. The effectiveness of corporate governance arrangements has a significant impact on how well an organisation meets its aims. Its purpose is to ensure that the right thing is done, in the right way, by the right people, in an open, honest, and timely manner.

2.2 Risk and Risk Appetite

"Risk" can be defined as "The possibility that an event will occur and adversely affect achievement of objectives".

~~Therefore, "risk management" is the process by which risks are identified, analysed, controlled, and monitored. Resources for managing risk are finite, therefore risks are prioritised in accordance with an evaluation system.~~

~~The level of risk tolerated is the "risk appetite". The amount and type of risk that we are willing to seek or accept in the pursuit of agreed strategic objectives and key priorities is the "risk appetite". This correlates to the likelihood / impact risk matrix.~~

~~Generally, the Council will mitigate risk as far as reasonable possible and acknowledges where risk cannot be wholly removed or mitigated, in some cases, a level of risk will be accepted and managed accordingly.~~

Commented [MW1]: As per recommendation 4

2.3 Partnership

A partnership is an agreement between the Council and one or more independent legal bodies, organisations, or individuals to work collectively to achieve a common purpose with specified aims and objectives. More detailed guidance on managing partnerships and the associated risks is available in the Council's Partnership Framework document.

2.4 Strategic Risk - a risk that can adversely affect the Council's long-term objectives

2.5 Operational Risk - the risk of loss because of ineffective or failed internal processes, people, systems, or external events that can disrupt the flow of the Council's operations

2.6 **Risk Issue** - a risk with nearly 100% probability, or one that has already happened

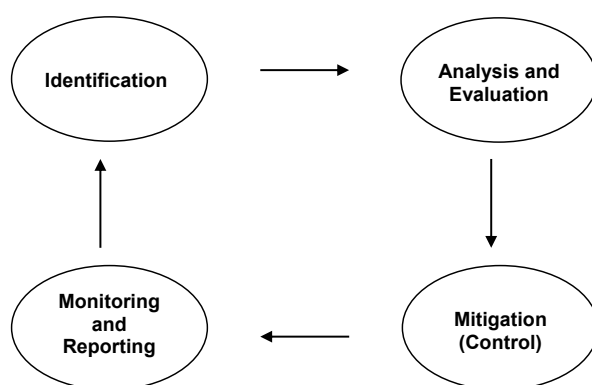
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3. Risk Management Process

Risk management involves the following four processes: -

- Identification of risk
- Analysis and evaluation
- Mitigation
- Monitoring and reporting



3.1 Step 1 - Identification of Risk

A systematic approach needs to be applied if all significant risks are to be identified and managed effectively. By identifying areas of risk before an event or loss occurs, steps can be taken to reduce the likelihood of occurrences and/or to minimise the cost to the Council if they do happen. Reacting to events only after they have occurred can be very costly.

Risks can be identified in a number of ways, for example: -

- Through discussions with colleagues, stakeholders, Members, contractors, partners, insurance brokers, insurers, risk advisers and external auditors.
- Looking at trends, accident reports, complaints, new agendas, legislation and regulations.

To ensure clarity and effective management, each risk should be articulated using the following structure:

- **Cause** – the source or driver of the risk; the underlying condition or circumstance that may lead to an event occurring.

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Risk Management Policy and Strategy

- **Event** – the specific uncertain occurrence or situation that, if it happens, could affect objectives.
- **Impact** – the consequence(s) or effect(s) on objectives if the event occurs.

The table below lists some categories of risk which may have an impact on aims and priorities: -

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Physical	Security and protection of assets. Maintenance practices. Protection, security, health, safety and wellbeing of the workforce and population.

There are two key elements to each risk description – **cause and consequence**. To effectively manage risks, both of these elements need to be identified. An example is as follows: -

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Risk Management Policy and Strategy

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- The net risk status – red, amber or green (after effective mitigation controls are in place)
- Sources of assurance i.e., how the risk is monitored / relevant documents [with sample evidence to be requested and provided](#); and
- The risk owner / portfolio holder / relevant overview and scrutiny panel

Commented [MW2]: As per recommendation 2

3.2 Step 2 - Analysis of Risk

Having identified the risks, they need to be analysed. This process requires managers to assess: -

- The probability (likelihood) of a risk occurring; and
- The severity (impact) of the consequences should it do so.

The matrix below indicates risk levels

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	2	2	4	6	8
	1	1	2	3	4
		1	2	3	4
		Impact			

Key

DOC16/75813

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Risk Management Policy and Strategy

	Green (acceptable)
	Amber (tolerable)
	Red (unacceptable)

The Council's likelihood and impact descriptors are as follows: -

Likelihood

4: **Very High** – occurrence is most likely or has already happened and will do so again if control measures are not introduced

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Risk Management Policy and Strategy

	Level of Impact	Service Delivery	Financial / Legal	Reputation / Community
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Risk Management Policy and Strategy

3.3 Step 3 - Control of Risks

Having identified and prioritised the risks, each one needs to be assessed to determine the appropriate action required for it to be mitigated. There are four options: -

Terminate	Stop the activity or remove the physical cause
Transfer	As far as possible, pass the risk on to another party, e.g. contractually or by insuring it
Treat	Set up control (mitigation) measures &/or improve existing ones. Examples: • Use of password, barrier, temperature or other controls. • Installation or upgrade of alarms. • Implement new or revised procedures, requirements &/or management arrangements
Tolerate	Do nothing, live with the risk as it stands

The mitigation owner also needs to be identified, this being the individual specified as responsible for putting the stated control(s) into action &/or ensuring it remains in operation. Ownership of a control measure should rest with a single individual, even if more than one person is needed to carry it out.

The level of risk remaining after the internal control measure is in place is the residual or net risk. This should be at a level which is within NBBC's risk appetite. That is (except for any risk identified as "Outside the Council's control because of external factors"), the level of residual risk is acceptable to the authority.

3.4 Step 4 - Monitoring and Review of Risks

As key management tools, Risk Registers must be used effectively to ensure that:

- They comprehensively address all recognised significant risks
- Mitigation measures/controls are adequate to minimise the likelihood and/or impact of each risk
- Any significant risks identified and remedial actions are sufficiently monitored

To establish whether they are being adequately managed, the following criteria will be used:

Red – Less than 60% of the identified risks are being satisfactorily managed

Amber – 60%-80% of the identified risks are being satisfactorily managed

Green – Over 80% of the identified risks are being satisfactorily managed

~~Percentages relate to the proportion of the identified risks that are not green.~~

Risk Management Policy and Strategy

Overall assessment of the status of the register relates to the number of risks that are net green and net amber divided by the total number of risks in the register expressed as a percentage— for example, 12 net green + 6 net amber / 20 = 90% satisfactorily managed

4. Roles and Responsibilities

4.1. Management Team (CET / SLT)

Officer Roles and Responsibilities

- ~~— To ensure the Council adopts an effective risk management strategy and that risks are fully considered in all strategic decision making processes~~
- ~~• To monitor current and planned expenditure and income and to highlight any emerging issues that could have an impact on the Council's finances~~
- ~~• Responsible for health and safety in relation to Council activities, for establishing a positive health and safety culture and for actively encouraging ownership and accountability at all levels~~
- ~~• To ensure that effective business continuity plans are maintained and are regularly tested~~

To regularly monitor the Strategic Risk Register

4.1.1. Strategic / Assistant Directors

- ~~• To adopt the Risk Management Policy and Strategy~~
- ~~• To ensure that all significant risks are identified and are effectively controlled through the process of risk assessment and mitigation within their respective services (maintain effective directorate Operational Risk Register)~~
- ~~• To proactively lead, manage and be fully accountable for health, safety and welfare across their directorate and service area. This includes ensuring all strategic decisions, new policies and initiatives thoroughly consider and address health and safety implications~~
- ~~• To establish a positive health and safety culture within their service units and actively encourage ownership and accountability at all levels~~
- ~~• To establish, promote, and play a visible role in influencing and fostering a positive health and safety culture within the Council and their individual service area. They must ensure effective management of health and safety within their directorate.~~
- ~~• To develop and maintain a current business continuity plan (including updated contact information), ensuring appropriate officers understand their respective roles in relation to it.~~
- ~~• Strategic Directors generally have responsibility for the Strategic Risk Register.~~
- ~~• Assistant Directors generally have responsibility for their Operational Risk Register.~~
- ~~• Where a Strategic Risk needs to be escalated, the relevant Directors should raise at Management Team or Corporate Governance Group accordingly for review and a decision as to how to mitigate the risk.~~

4.1.2. The Governance, Risk Management and Performance Officer

- ~~• To provide risk management information & advice, both proactively & reactively in relation to strategic, operational and partnership risks~~
- ~~• To work with the owners of operational risks as required to identify and manage those risks and to maximise opportunities~~

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Risk Management Policy and Strategy

- Liaising with Chief Executive / Strategic Directors to review and update all risks in the Strategic Risk Register on a quarterly basis- Including sampling sources of assurance
- To provide quarterly Strategic Risk Register reports to Management Team (CET / SLT) / Cabinet / Overview and Scrutiny panels, identifying what proportion of the risks are being satisfactorily managed (Clause 3.4 of this document refers)
- To review and propose changes as required to the Risk Management Policy & Strategy, to risk registers and to other corporate risk management related documents
- To review the Risk Management Policy & Strategy at least bi-annually and to update it as required.
- Issue an annual report to Management Team which summarises:
 - i. Strategic Risk Register update and monitoring
 - ii. Operational Risk Registers update and monitoring
 - iii. Training of staff
 - iv. Outcomes following OSP and Audit and Standards review of strategic risk register
 - v. Consideration of any external support and/or routine audit of risk management
- This officer at the time of the October 2025 review, reports directly to the Assistant Director – Democracy and Governance.

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4.1.3. Health & Safety Manager

- To align the health and safety strategy with the council's overall corporate objectives, plans and risk appetite. To promote an effective, healthy and safe organisational culture by developing, implementing and monitoring health & safety policies and procedures
- To develop, implement and maintain a comprehensive health & safety policy that comply with all current legal and regulatory standards.
- To provide competent advice and guidance on health and safety matters and promote an effective, healthy and safe organisational culture.

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4.1.4. Senior Information Risk Owner (SIRO) and Deputy SIRO

- To oversee the development of an Information Risk Policy, and a Strategy for implementing the policy within the existing Information Governance Framework
- To take ownership of the risk assessment process for information risk, including review of the annual information risk assessment to support and inform the Annual Governance Statement
- To review and agree an action plan in respect of identified information risks
- To ensure that the Council's approach to information risk is effective in terms of resource, commitment and execution and that this is communicated to all staff
- To provide a focal point for the resolution and/or discussion of information risk issues
- To ensure the Corporate Information Governance Group (CIGG) is adequately briefed on information risk issues

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Risk Management Policy and Strategy

- To advise the Chief Executive and the CIGG on information risk management strategies and provide periodic reports and briefings on programme progress

4.1.5. Employees (including agency and casual)

- To comply fully with the risk control measures, safe working procedures, health and safety policies and training relevant to their role and work activities. To maintain an awareness of risks in their own areas of work and contribute to the control process as appropriate
- To take ownership of their legal duty of care for the health, safety, and welfare of themselves and any other person who may be affected by their actions or omissions. To recognise their legal responsibility for the health, safety and welfare of themselves and others who may be affected by their work activities
- To participate constructively in risk management processes, including safety meetings, training sessions and the implementation of recommended improvement.
- To report, at the earliest opportunity, all incidents, near misses, accidents and dangerous occurrences resulting from work including those involving third parties to their line manager.
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4.2. Officer Groups - Roles and Responsibilities

4.2.1. Management Team (CET / SLT)

- To ensure the Council adopts an effective risk management strategy and that risks are fully considered in all strategic decision making processes
- To monitor current and planned expenditure and income and to highlight any emerging issues that could have an impact on the Council's finances
- Responsible for health and safety in relation to Council activities, for establishing a positive health and safety culture and for actively encouraging ownership and accountability at all levels
- To ensure that effective business continuity plans are maintained and are regularly tested
- To regularly monitor the Strategic Risk Register

4.2.2. The Corporate Governance Group (CGG)

- To develop and co-ordinate excellent governance arrangements across the Council, including those relating to risk management
- To fulfil the role of the Corporate Information Governance Group (CIGG) on behalf of the Council providing strategic advice and assurance to the Authority on all matters concerning information management and governance
- To report to Management Team any issues that require its attention.
- To review directorate Operational Risk Registers on an annual basis (one Directorate per quarter).

Risk Management Policy and Strategy

4.2.3. The Information Management Group (IMG)

- To monitor and appraise the information and data needs of the Council and ensure that the Council delivers quality customer interaction and delivers services efficiently
- To facilitate information audits within each functional area and review them on a regular basis
- To aid the Information Asset Owners, (IAO) in carrying out their duties
- To monitor and appraise the outstanding FOI/DP cases. To identify any outstanding actions, liaise and co-ordinate with the relevant service areas to ensure that the requests are completed within the relevant timescales. If necessary, escalating the requests to the CIGG
- To promote and raise awareness of retention and disposal policies and procedures for all documents and records
- To ensure that information and data is treated as a corporate asset, shared by all. Develop any relevant policies and procedures to be presented to CIGG for approval, ensuring that NBBC is complying with relevant legislation
- To promote Information Management as a key corporate activity, essential to the provision of excellent customer interaction and efficiently delivered, high quality services

4.3.3. Central Midlands Audit Partnership (CMAP)

- To support the Council and its services in the effective development, implementation, monitoring and review of the Council's risk management policy, strategy and process
- To promote risk management and the process of business risk assessment throughout the Council and in relation to the Council's partnerships.
- To develop and implement Audit Plans using a risk-based approach.
- To support and promote risk management guidance and training for employees, contractors and members and to encourage the sharing of good practice
- To report to the Audit and Standards Committee on risk management activities and any issues arising
- To ensure that strategic, operational and partnership risks are suitably reflected within risk registers and that appropriate mitigating controls are in place and are adequately monitored and controlled
- To report to the Corporate Governance Group on risk management activities and any issues arising

4.3. Elected Members - Roles and Responsibilities

4.3.1.

Audit and Standards Committee (based on risk reports and reviews provided by officers):

- To monitor the effective development and operation of risk management and corporate governance across the Council
- To seek and obtain assurance that appropriate action has been taken on risk related issues identified by internal and/or external audit
- To ensure that the Council's assurance statements, including the Annual Governance Statement, properly reflect the risk environment and any actions required to improve it

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Risk Management Policy and Strategy

- To review the Strategic Risk Register alongside the draft annual internal audit plan and recommend changes to address any highlighted concerns
- To consider and approve the Risk Management Policy and Strategy following bi-annual review if significant changes are identified or if significant changes are necessary in the interim period between scheduled reviews.

4.3.2.

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Members

- To oversee the effective management of risk by the Council's officers, particularly when considering reports and proposals from officers. This includes scrutiny, challenge and recommendations at the Audit and Standards Committee, Overview and Scrutiny Panel(s) and amongst members of Cabinet.

Senior Information Risk Owner (SIRO) and Deputy SIRO

- ~~To oversee the development of an Information Risk Policy, and a Strategy for implementing the policy within the existing Information Governance Framework~~
- ~~To take ownership of the risk assessment process for information risk, including review of the annual information risk assessment to support and inform the Annual Governance Statement~~
- ~~To review and agree an action plan in respect of identified information risks~~
- ~~To ensure that the Council's approach to information risk is effective in terms of resource, commitment and execution and that this is communicated to all staff~~
- ~~To provide a focal point for the resolution and/or discussion of information risk issues~~
- ~~To ensure the Corporate Information Governance Group (CIGG) is adequately briefed on information risk issues~~
- ~~To advise the Chief Executive and the CIGG on information risk management strategies and provide periodic reports and briefings on programme progress~~

Strategic / Assistant Directors

- ~~To adopt the Risk Management Policy and Strategy~~
- ~~To ensure that all significant risks are identified and are effectively controlled through the process of risk assessment and mitigation within their respective services (maintain effective directorate Operational Risk Register)~~
- ~~To establish a positive health and safety culture within their service units and actively encourage ownership and accountability at all levels~~
- ~~To develop and maintain a current business continuity plan (including updated contact information), ensuring appropriate officers understand their respective roles in relation to it~~

The Corporate Governance Group (CGG)

- ~~To monitor current and planned expenditure and income and to highlight any emerging issues that could have an impact on the Council's finances~~

Risk Management Policy and Strategy

- To develop and co-ordinate excellent governance arrangements across the Council, including those relating to risk management
- To fulfil the role of the Corporate Information Governance Group (CIGG) on behalf of the Council providing strategic advice and assurance to the Authority on all matters concerning information management and governance
- To report to Management Team any issues that require its attention.
- To review directorate Operational Risk Registers on an annual basis (one register every two months Directorate per quarter)

The Information Management Group (IMG)

- To monitor and appraise the information and data needs of the Council and ensure that the Council delivers quality customer interaction and delivers services efficiently
- To facilitate information audits within each functional area and review them on a regular basis
- To aid the Information Asset Owners, (IAO) in carrying out their duties
- To monitor and appraise the outstanding FOI/DP cases. To identify any outstanding actions, liaise and co-ordinate with the relevant service areas to ensure that the requests are completed within the relevant timescales. If necessary, escalating the requests to the CIGG
- To promote and raise awareness of retention and disposal policies and procedures for all documents and records
- To ensure that information and data is treated as a corporate asset, shared by all. Develop any relevant policies and procedures to be presented to CIGG for approval, ensuring that NBBC is complying with relevant legislation.
- To promote Information Management as a key corporate activity, essential to the provision of excellent customer interaction and efficiently delivered, high quality services

Head of Audit and Governance ***Central Midlands Audit Partnership (CMAP)***

- To support the Council and its services in the effective development, implementation, monitoring and review of the Council's risk management policy, strategy and process
- To promote risk management and the process of business risk assessment throughout the Council and in relation to the Council's partnerships.
- To develop and implement Audit Plans using a risk-based approach.
- To support and promote risk management guidance and training for employees, contractors and members and to encourage the sharing of good practice
- To report to the Audit and Standards Committee on risk management activities and any issues arising
- To ensure that strategic, operational and partnership risks are suitably reflected within risk registers and that appropriate mitigating controls are in place and are adequately monitored and controlled
- To review the Risk Management Policy & Strategy at least bi-annually and to update it as required

Risk Management Policy and Strategy

- To report to the Corporate Governance Group on risk management activities and any issues arising

~~The Governance, Risk Management and Performance Officer~~

- To provide risk management information & advice, both proactively & reactively in relation to strategic, operational and partnership risks
- To work with the owners of operational risks as required to identify and manage those risks and to maximise opportunities
- Liaising with Chief Executive / Strategic Directors / officers, to review and update all risks in the Strategic Risk Register on a quarterly basis
- To provide quarterly Strategic Risk Register reports to Management Team (CET / SLT) / Cabinet / Scrutiny panels, identifying what proportion of the risks are being satisfactorily managed (Clause 3.4 of this document refers)
- To review and propose changes as required to the Risk Management Policy & Strategy, to risk registers and to other corporate risk management related documents
- To review the Risk Management Policy & Strategy at least bi-annually and to update it as required

~~Health & Safety Managers~~

- To promote an effective, healthy and safe organisational culture by developing, implementing and monitoring health & safety policies and procedures

~~Employees (including agency and casual)~~

- To maintain an awareness of risks in their own areas of work and contribute to the control process as appropriate
- To recognise their legal responsibility for the health, safety and welfare of themselves and others who may be affected by their work activities

5. Transparency

- The current policy and strategy will be available to view on the Council's website.

- The Audit and Standards Committee shall at least annually, receive a report regarding the Strategic Risk Register to check, challenge and ensure positive scrutiny and oversight of the register.

- Each Overview and Scrutiny Panel shall also receive information associated to the Strategic Risk Register for oversight and scrutiny purposes.

6. Training

- Elected Members – annual training will be provided as part of the Corporate

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Risk Management Policy and Strategy

Governance training programme.

- **Designated Officers** – training will be available for Strategic Directors, Assistant Directors and where applicable Service Managers during the 2026/2027 Financial Year and will be refreshed thereafter on a programme basis.

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AGENDA ITEM NO. 10

NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to:	Audit and Standards Committee
Date of Meeting:	25 November 2025
Subject:	Review of the Register of Members' Interests and the Gifts and Hospitality Register 2024 - 2025
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:	n/a
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. This report provides the Audit and Standards Committee with information regarding the registration of Members' Interests and, Gifts and Hospitality by Members and Officers for the period 16 October 2024 – 23 October 2025.

2. Recommendations

- 2.1. That the contents of the Register of Members' Interests between 16 October 2024 and 23 October 2025 be considered and noted; and
- 2.2. That the contents of the Register of Gifts and Hospitality for Members and Officers between 16 October 2024 and 23 October 2025, as set out in Appendix A, be considered and noted.

3. Background

- 3.1 The Nuneaton and Bedworth Borough Council (NBBC) Constitution specifies that one of the roles of the Audit and Standards Committee (the Committee) is to oversee and develop the Council's Code of Conduct and the overall standards of conduct for Council Members and co-opted Members. The Committee has the role of granting dispensations to both elected and independent Members, having regard to all relevant circumstances as detailed in the Constitution (A9.3.)
- 3.2 The Localism Act 2011 (the Act) introduced Disclosable Pecuniary Interests (DPIs) which Members are required to disclose either in advance or at a meeting where that interest is engaged.
- 3.3 It is included in the Work Programme of the Committee that a report will be presented to the November 2025 meeting on the operation of the Register of Members' Interests and Gifts and Hospitality by Members and Officers. This is therefore an opportunity for the Committee to be appraised of and review the operation of the Register of Members' Interests and, Gifts and Hospitality by Members and Officers for the period 16 October 2024 – 23 October 2025.

4. Body of report and reason for recommendations

- 4.1. As detailed in paragraph 3.1 above, the Standards responsibilities of the Committee are to oversee and develop the Council's Code of Conduct and the overall standards of conduct for Council Members and co-opted Members. Therefore, information relation to the operation of the Register of the Members' Interests is provided to inform this role of the Committee.

Operation of Member's Register of Interests (ROI)

- 4.2. Section 29 of the Localism Act 2011 requires the Monitoring Officer to establish and maintain a register of interests of Members of the authority. Within 28 days of becoming a Member or their re-election or re-appointment to office they must complete an ROI form and send it to the Monitoring Officer for registration.
- 4.3 Upon election each Councillor is provided with a pack that contains a number of documents, one of which is the Register of Interest form that Councillors are asked complete and return to the Monitoring Officer within 28 days of being elected. The ROI form contains guidance notes to assist Councillors in completing the form.
- 4.4 The administration of the forms is managed by Democratic Services. As soon as new and updated forms are received from Councillors, the content is added to the Committee Management System and documented on the Council's [website](#). In accordance with the Act a paper Register is also kept in the office and is available should a member of the public request to view this.
- 4.5 On a regular basis, the Monitoring Officer issues a reminder to all Councillors regarding the completion of their Register of Interest forms and highlights the guidance notes for each section. From this, Councillors may update their forms accordingly. In addition, if it is brought to the attention of the Monitoring Officer that there could be an omission on the form of a Councillor, contact is made with that Councillor to discuss their form and to ascertain whether it requires updating. Ultimately, however, it is the responsibility of Councillors rather than Officers to complete the Register entries correctly.
- 4.6 The Council is obliged to publish Councillors' names and addresses on the ROI. However, Councillors are able to ask the Monitoring Officer to withhold their address from published versions of the register of interests where there are legitimate concerns of violence or intimidation. As detailed in paragraph 3.2 above, this Committee has the role of granting dispensations to both elected and independent Members. The Committee is reminded that the Government encourages Monitoring Officers to look sympathetically at accommodating requests for the withholding of home addresses from published versions of the register of interests

where there are legitimate concerns of violence or intimidation. The Committee is also reminded that last year on 18 March, Simon Hoare, MP, wrote to all Chief Executives of Local Authorities in England highlighting that all Councillors and elected Mayors should be made aware of the sensitive provisions in Section 32 of the Localism Act 2011. These provisions provide for details about a registered interest to be excluded from versions of the Register of Interests available for public inspection (or published online) where a Member and Monitoring Officer agree that the disclosure of that interest could lead to violence or intimidation of them or their family. Members will therefore disclose that they have an interest, but the details are withheld from the public register.

Gifts and Hospitality

- 4.7. It is best practice and also in line with the recommendations of the Committee for Standards in Public Life that the Council maintains a Register of gifts and hospitality. A further recommendation of the Committee for Standards in Public Life is that the register is reviewed by the Audit and Standards Committee at least once a year. The purpose of this Committee considering the Register is to ascertain whether there are any issues or to put forward recommendations on best practice.
- 4.8. In accordance with Section 117 of the the Local Government Act 1972, supplemented by the Council's Gifts and Hospitality Policy, Officers are required to make declarations.
- 4.9. The Work Programme of the Committee includes the annual review of the Register of Members and Officers Gifts and Hospitality.
- 4.10. Appendix A, details the Register of Gifts and Hospitality of Members and Officers between 16 October 2024 – 23 October 2025. The Committee should not request in open public session a name/recipient but Members of the Committee can comment on specific items. The recipient column has been redacted as it identifies an individual's identity, who in most cases, are non-senior staff. Paragraph 1 and 2 of Schedule 12A to the Local Government Act 1972 classifies the following, amongst other options, as exempt information for the purposes of Access to Information:

- 1. Information relating to any individual.

2. Information which is likely to reveal the identity of an individual.

Therefore, as classified as exempt information, If the Committee wish to obtain information, they must move to private session which will allow the Monitoring Officer to provide further information to the Committee regarding the recipient column.

4.11. The Committee is asked to review the Register and to consider whether there are any issues that need addressing, such as whether the Committee feels that there are omissions from the Register. It is recognised that these may be difficult to identify, but Committee Members may be aware of events that Officers and Members have attended in some capacity, which should be recorded.

4.12. As for the Members Register of Interests, it is good practice for the Monitoring Officer to write to all Members and Officers to remind them of the importance of keeping the Gifts and Hospitality Register accurate and up to date. This ensures openness and transparency and also ensures that the public have confidence in the Governance arrangements of the Council.

Reasons for Recommendations

4.13. The recommendations are intended to enable the Committee to be appraised of the operation of the Register of Members' Interests and thereby enable it to carry out its Standards responsibilities effectively.

4.14. The annual Work Programme of the Committee states that a report shall be presented to the November 2025 meeting of the Committee for consideration and information.

4.15. To promote compliance by all Councillors with the requirement to register their pecuniary interest in the Councils' publicly available register.

4.16. To promote compliance by all Councillors with the Member Code of Conduct in being open and transparent about their personal interests.

4.17. To maintain the public's confidence that all Councillors and Officers are putting the public interest first and are not benefiting their own financial affairs from being a councillor.

5. Consultation with the public, members, officers, and associated stakeholders
 - 5.1. This is an update report for the Committee's information and is therefore not appropriate for wider consultation.
6. Financial Implications
 - 6.1. There are no direct financial implications arising from this report.
 - 6.2. There are no direct manpower implications arising from this report; however, the Committee will be aware that the handling and processing of the Register of Interests is resource intensive.
7. Legal Implications
 - 7.1. Section 29 of the Localism Act 2011 requires the Monitoring Officer to establish and maintain a register of interests of members of the authority. Within 28 days of becoming a Member or the re-election or re-appointment to office, the Councillor must register with the Monitoring Officer.
 - 7.2. Councillors must ensure that their Register of Interests is kept up-to-date and within 28 days of becoming aware of any new interest, or of any change to a registered interest, notify the Monitoring Officer.
 - 7.3. Failure to appropriately declare and act on prejudicial interests would mean that the Councillors has not complied with the Code of Conduct and may have committed a criminal offence . It may also leave a Council decision in which the Councillor has participated open to legal challenge. Failure to declare and register significant personal interests could mean that the Councillor has not complied with the Council's Code of Conduct.
 - 7.4 Section 117 of the Local Government Act 1972, and supplemented by the Council's Gifts and Hospitality Policy, Officers are required to make declarations of any gifts and hospitality that they have been offered and to state whether it was received.
8. Equalities implications

8.1. There are no direct equality implications arising from this report.

9. Health implications

9.1. There are no immediate health implications arising from this report.

10. Climate and environmental implications

10.1. There are no direct climate and implications arising from this report

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.

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 has an obligation to promote and maintain high

		standards of conduct by Members, Independent Members and any other representatives. Therefore, this report provides an annual update Review of the Register of Members' Interests and the Gifts and Hospitality Register 2024 – 2025.
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15. Conclusion

- 15.1. The Committee to note that it is included in the Work Programme of the Committee that a report will be presented to the November 2025 meeting on the operation of the Register of Members' Interests and Gifts and Hospitality by Members and Officers. This is therefore an opportunity for the Committee to be appraised of and review the operation of the Register of Members' Interests and, Gifts and Hospitality by Members and Officers for the period 16 October 2024 – 23 October 2025.

16. Appendices

- 16.1. Please note the following appendices:

- i. Appendix A – Register of Gifts and Hospitality for Members and Officers between 16 October 2024 and 23 October 2025

17. Background papers

- 17.1. The Register of Members Interest

- 17.2. The Register of Gifts and Hospitalities for Members and Officers

- 17.3. The annual Work Programme 2024/25 of the Audit and Standards Committee

18. Report Writer Details:

Officer Job Title: Elections and Democratic Services Manager &
Deputy Monitoring Officer

Officer Name: Tracy Tiff

Officer Email Address: tracy.tiff@nuneatonandbedworth.gov.uk

Nuneaton & Bedworth Borough Council

Register of gifts and hospitality - Officers and Members 16 October 2024 - 23 October 2025

Date informed of gift or hospitality	Date gift or hospitality received	Recipient - REDACTED	Person or company offering gift or hospitality	Brief details of gift or hospitality	Approximate value of gift or hospitality	Reason for accepting gift or hospitality	Has this been received before
04/12/2024	04/12/2024		P. Khan - Taxi Driver	15 samosas	£5	Seasonal gift - gesture of thanks for work of team	Yes
19/12/2024	18/12/2024		AtkinsRealis	Working lunch with Bedworth Physical Activity Project Team	£55	Site meeting held with construction team and a full project team meeting, which then followed with just the NBBC Client team and NBBC consultants to cover off internal matters and future actions to be considered for the New Year and milestone to be signed off	No
15/01/2025	17/01/2025		Mr Vorajee	2 bottles of perfume, 2 free samples and a few miniature chocolate bunnies.	£100	We had been processing his case for various works within HEART. Gift left behind reception and was opened in front of seniors Faz and Sam	No
23/01/2025	23/01/2025		Yummies, 79 Nuneaton Road, Bedworth	Chinese food	£8	Refused offering from owner repeatedly several times. Items were then put in rucksack without knowledge	No
03/04/2025	03/04/2025		Mr Bugghi Magar (Nuneaton's Nepalese Community)	3 x token scarfs of religious/cultural significance	No more than £5 per scarf.	So as not to offend culturally. An offer of coffee/ refreshments at Crossed Khukris Gurkha Restaurant (115 Abbey Street) was refused	No
15/04/2025	14/04/2025		HSL Recruitment	2 HSL branded mugs, 1 packet of tesco hot cross buns, 1 cadburys creme egg, 4 packs of treat size haribo	£5	Easter treats	No
15/04/2025	11/04/2025		Claire Fell - Artist for Take 3 Exhibition	Thorntons Chocolates	£10	Temporary Exhibition Set-up and return works	No

25/04/2025	22/05/2025		Local Government Partnership Network	3 Free passes to the LGPN Manchester Event (22nd and 23rd May), on the topic of cyber security and unitary reform in Local Government. This included attendance at the event, 1 night hotel stay and all meals.	£850	DECLINED	No
16/05/2025	16/05/2025		Tennant	Used Louboutin Shoes	£100 +	Customer states has been waiting many years to gift these to someone who has cared and been kind to her, she is no longer able to wear due to disabilities. I declined the shoes, but the tenant insisted i took them and stated she will deny knowledge of them if questioned - i intend to call her and state i will be taking them back to her or i will have to donate to mayors charity! I will also obtain a signature from the tenant to show they are back in her possession.	No
02/07/2025	02/07/2025		Applicant for Housing	Two tubs of chocolates (heroes and quality street) for CBL & Customer Services	Unknown	Applicant was insistent in wishing to provide a thank you gift. I advised him on several occasions there was no need but eventually advised him if he wished to he could send in some chocolates or something to that effect and I would share these with the team. He sent in two tubs of chocolates (heroes and quality street) these were shared between CBL team and housing solutions team and I donated a tub to the customer services team as they also dealt with multiple enquiries from the applicant.	No
14/08/2025	13/07/2025		Customer - Mr Voragee	3 candles	£2 - £3 each	A thank you gift for assisting him with grant works - the gifts had been left on the NBBC reception desk for the team	No
02/10/2025	03/10/2025		Olga Gallagher	Pack of Boarder biscuits & Chocolate	£20	A thank you for help & service provided. Works completed DFG Level Access Shower	No