

NON-CONFIDENTIAL



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AUDIT AND GOVERNANCE COMMITTEE

5 November 2024

Dear Councillor

A meeting of the Audit and Governance Committee will be held in **Town Hall, Market Street, Tamworth on Wednesday, 13th November, 2024 at 6.00 pm**. Members of the Committee are requested to attend.

Yours faithfully

A handwritten signature in black ink, appearing to read 'S. C. V.'.

CHIEF EXECUTIVE

A G E N D A

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- 1 Apologies for Absence**
- 2 Declarations of Interest**

To receive any declarations of Members' interests (pecuniary and non-pecuniary) in any matters which are to be considered at this meeting.

When Members are declaring a pecuniary or non-pecuniary interest in respect of which they have dispensation, they should specify the nature of such interest. Members should leave the room if they have a pecuniary or non-pecuniary interest in respect of which they do not have a dispensation.

- 3 Minutes of the Previous Meeting** (Pages 5 - 8)
- 4 Audit Findings Report and Management Representation Letter (To Follow)**
(Report of the External Auditors, Azets)
- 5 Outstanding Audit Recommendations** (Pages 9 - 36)
(Report of the Audit Manager)
- 6 Counter Fraud Update** (Pages 37 - 126)
(Report of the Audit Manager)
- 7 Internal Audit Quarterly Progress Report - Q2 2024/25** (Pages 127 - 152)
(Report of the Audit Manager)
- 8 Annual Statement of Accounts (To Follow)**
(Report of the Interim Executive Director Finance)
- 9 Risk Management Quarterly Update Qtr.2 2024/25** (Pages 153 - 202)
(Report of the Assistant Director Finance)
- 10 Financial Waivers to 30th September 2024** (Pages 203 - 206)
(Report of the Assistant Director Finance)
- 11 Member Enquiries Update** (Pages 207 - 216)
(Report of the Leader of the Council and the Monitoring Officer)
- 12 Audit and Governance Committee Timetable** (Pages 217 - 222)
(Discussion Item)

Access arrangements

If you have any particular access requirements when attending the meeting, please contact Democratic Services on 01827 709267 or e-mail democratic-services@tamworth.gov.uk. We can then endeavour to ensure that any particular requirements you may have are catered for.

Filming of Meetings

The public part of this meeting may be filmed and broadcast. Please refer to the Council's Protocol on Filming, Videoing, Photography and Audio Recording at Council meetings which can be found [here](#) for further information.

If a member of the public is particularly concerned about being filmed, please contact a member of Democratic Services before selecting a seat

FAQs

For further information about the Council's Committee arrangements please see the FAQ page [here](#)

To Councillors: C Adams, S Doyle, C Bain, M Couchman, J Oates, P Turner, J Wadrup and A Wells

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MINUTES OF A MEETING OF THE AUDIT AND GOVERNANCE COMMITTEE HELD ON 25th SEPTEMBER 2024

PRESENT: Councillor C Adams (Chair), Councillors M Couchman, P Turner and A Wells (Vice-Chair)

Officers Joanne Goodfellow (Interim Executive Director Finance and Deputy Section 151 Officer), Andrew Wood (Audit Manager), Nicola Hesketh (Monitoring Officer) and Leanne Costello (Senior Scrutiny and Democratic Services Officer)

Guests Bethany Hincks (Azets)

12 APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillors C Bain, S Doyle and J Wadrup.

13 MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 26th June 2024 were approved and signed as a correct record.

(Moved by Councillor A Wells and seconded by Councillor P Turner).

14 DECLARATIONS OF INTEREST

There were no declarations of Interest.

15 UPDATE FROM EXTERNAL AUDITORS

The external auditor from Azets gave a verbal update on interim work carried out for 2023/24. The update highlighted that the audit was progressing well, and they had received timely response to all enquiries. The audit was on track for completion for the aspiration date of 30th September and that there had been no findings or adjustments required to date.

Pension assurance from Pension Fund Auditor were outstanding however the were in communication around these.

16 INTERNAL AUDIT QUARTERLY PROGRESS REPORT - QUARTER 1 2024/25

Report of the Audit Manager provided Audit & Governance Committee with internal audit's progress report for period to 30th June 2024.

Resolved that the Committee:

Noted Internal Audit's Quarterly Progress Report (Appendix 1), which includes results up to 30th June 2024.

(Moved by Councillor P Turner and seconded by Councillor A Wells')

17 ANNUAL REPORT ON THE TREASURY MANAGEMENT SERVICE AND ACTUAL PRUDENTIAL INDICATORS 2023/24

Report of the Executive Director Finance reviewed the Annual Report on the Treasury Management Service and Actual Prudential Indicators 2023/24 following Council on 10th September 2024.

Resolved that the Committee:

Considered the Annual Report on the Treasury Management Service and Actual Prudential Indicators 2023/24, as detailed at Annex 1, and highlighted any proposed changes for recommendation to Cabinet

(Moved by Councillor A Wells and seconded by Councillor M Couchman)

18 FINANCIAL WAIVERS TO 30TH JUNE 2024

Report of the Executive Director Finance noted the waivers to the Council's procurement processes as set out in Financial Guidance for the period 1st April to 30th June 2024, for the reasons as set out, and to advise if any further information is required.

Resolved that the Committee:

Noted the waivers approved to the procurement processes as set out in the Council's Financial Guidance.

(Moved by Councillor M Couchman and seconded by Councillor P Turner)

19 RISK MANAGEMENT QUARTERLY UPDATE 2024/25

Report of the Assistant Director, Finance report on the Risk Management process and progress for Quarter 1 of the 2024/25 financial year.

Resolved that the Committee:

Endorsed the Corporate Risk Register

(Moved by Councillor P Turner and seconded by Councillor M Couchman)

For – 3
Against – 1
Abstentions - 0

20 LOCAL GOVERNMENT AND SOCIAL CARE OMBUDSMAN ANNUAL REVIEW 2023/24

Report of the Assistant Director, People advised the committee of the contents of the Local Government and Social Care Ombudsman's Annual Review letter for the year ended 31st March 2024 in relation to complaints against Tamworth Borough Council.

Resolved that the Committee:

Endorsed the contents of the 2023/24 Ombudsman Annual Review Letter, and the summary of complaints, decisions and compliance contained within it.

(Moved by Councillor A Wells and seconded by Councillor M Couchman)

21 REGULATORY INVESTIGATORY POWERS ACT 2000 ANNUAL UPDATE

Report of the Assistant Director, Partnerships. The Council's Code of Practice for carrying out surveillance under the Regulation of Investigatory Powers Act 2000 (RIPA) specifies that annual reports will be taken to Audit & Governance Committee to demonstrate to elected members that the Council is complying with its own Code of Practice when using RIPA

Resolved that the Committee:

Endorsed the RIPA monitoring report for 2023/24

(Moved by Councillor A Wells and seconded by Councillor P Turner)

22 MODERN SLAVERY AND TRAFFICKING STATEMENT 2023/24

Report of the Assistant Director, Partnerships. To endorse the Council's Modern Slavery and Human Trafficking Statement 2023/24.

Resolved that the committee:

1. Endorsed the Modern Slavery and Human Trafficking Statement 2023/24 signed by the Chief Executive
2. Approved the publication of statement in accordance with the Modern Slavery Act 2015

(Moved by councillor M Couchman seconded by Councillor P Turner)

23 AUDIT AND GOVERNANCE COMMITTEE TIMETABLE

The Committee reviewed the timetable and highlighted that flooding is a major concern and they would like to continue to monitor this risk as part of their work streams.

The Committee identified comments, compliments and complaints as an area they would like to add to the work plan.

Chair

Wednesday, 13 November 2024

Report of the Audit Manager

Outstanding Audit Recommendations

Exempt Information

None.

Purpose

To provide the Committee with an overview concerning the currently outstanding and overdue audit recommendations.

Recommendations

It is recommended that the committee:

- Notes the report and provides observations on the content;
- Notes that a further report providing details of progress to date and a planned completion date for each of the outstanding recommendations is brought to the next committee meeting.

Executive Summary

Following discussions at this committee's meeting of 25th September 2024 it was agreed that the Audit Manager would bring forward a paper outlining currently outstanding audit recommendations.

At the conclusion of Internal Audit reviews an assurance level (substantial, adequate, limited or no) related to the system that was subject to review is provided to management. In addition, where we report weaknesses in the control environment and/or improvements to systems we agree with management a set of recommendations. These include agreed implementation dates, that will achieve the services objectives and provide assurance over the systems of internal control. This is an essential part of the governance and assurance process by which both senior management and the Audit & Governance Committee can assure themselves over the operation of the Council's systems. It also provides a link into both the Council's Annual Governance Statement and ultimately the Audit Manager's ability to provide an annual audit opinion.

All recommendations are under the ownership of service management and ultimately the Council's Corporate Management Team. Internal Audit, as part of our Audit Charter & Protocol will follow up on audit recommendations to ensure that they have been implemented. Additionally, Internal Audit will follow up all 'Limited Assurance' reviews gaining full evidence of recommendation implementation and provision, where appropriate, of a revised assurance level.

All internal audit and progress reports are reported to Audit & Governance Committee on a quarterly basis.

Internal Audit prioritises the audit recommendations as either high, medium or low priority. The definitions of audit recommendations are shown in the table below.

Definition
High priority recommendations representing a fundamental control weakness which exposes the organisation to a high degree of unnecessary risk.
Medium priority recommendation representing a significant control weakness which exposes the organisation to a moderate degree of unnecessary risk.
Low priority (housekeeping) recommendation highlighted opportunities to implement a good or better practice, to add value, improve efficiency or further reduce the organisation's exposure to a risk.

Audit & Governance Committee, at its meeting on 25th September 2024 requested a report detailing the current position relating to outstanding audit recommendations, together with responses in terms of the length of time these recommendations have been outstanding. As at 16th October 2024 we have the following number of outstanding recommendations

Priority	Number of Outstanding Audit Recommendations	% outstanding by priority
High	8	12.50
Medium	35	54.69
Low	21	32.81
Total	64	100.00

A listing of all high priority recommendations is contained in **Appendix 1** of this report.

Analysis of outstanding recommendations by audit year raised is outlined below.

Audit Year	High	Medium	Low	Total
2018/19	1			1
2019/20				
2020/21	1			1
2021/22	3	2	1	6
2022/23		8	1	9
2023/24	1	16 (2)	7 (2)	24 (4)
2024/25	2 (2)	9 (9)	12 (11)	31 (22)
Total	8 (2)	35 (11)	21 (13)	64 (26)

Note: Figures in brackets indicates that a number of the recommendations raised are currently in progress for completion.

Further analysis has been completed to identify in which service areas the recommendations have been raised. All current outstanding recommendations are shown in **Appendix 2** of this report.

Area	High	Medium	Low	Total
Finance	1	4 (1)	4 (1)	9 (2)
Housing Repairs / Landlord H&S	2	8 (1)		10 (1)
ICT / Finance	5 (2)	2	1	8 (2)
ICT		6 (6)	11 (8)	17 (14)
Community Safety			1 (1)	1 (1)
HR		7	1	8
Revenues		1 (1)	1 (1)	2 (2)
Food Safety		2 (2)	2 (2)	4 (4)

Housing Rents		2		2
Corporate Policy		2		2
Taxi Licences		1		1
Total	8 (2)	35 (11)	21 (13)	64 (26)

Note: Figures in brackets indicates that a number of the recommendations raised are currently in progress for completion.

Internal Audit, as part of the assurance processes review 100% of all high priority recommendations to ensure that they have been fully implemented. It is proposed that subsequent to this the section would review a random sample of 10% of all medium and low priority recommendations following management confirmation that the recommendation has been implemented.

Options Considered

None.

Resource Implications

None.

Legal/Risk Implications Background

Compliance with agreed standards within the Public Sector Internal Audit Standards and in accordance with industry best practice.

Equalities Implications

Community Impact Assessment completed see **Appendix 3**.

Environment and Sustainability Implications (including climate change)

None.

Background Information

None.

Report Author

Andrew Wood – Audit Manager
Andrew-wood@tamworth.gov.uk

List of Background Papers

Appendices

Appendix 1 – High Priority Recommendations

Appendix 2 – All Recommendations raised per Audit Area

Appendix 3 – Community Impact Assessment

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APPENDIX 1

High Priority					
Code	Title	Recommendation	Status	Due Date	Managed By
1819 Proc 14.01	Pentana Training & Procedures	<p>a) Detailed procedures notes are developed for the use of the contract register on Pentana and made available to staff.</p> <p>b) Detailed training is provided to staff on the requirements of contract monitoring and management, how to use and update the contract register in Pentana to ensure staff are fully aware of their responsibilities and how to appropriately manage their contracts.</p>	Overdue	30-Nov-23	Joanne Goodfellow
2021 PM 01	Asset Management Policy/Strategy	An Asset Management Policy and Strategy covering planned maintenance should be produced, approved and communicated with stakeholders. This should also include the frequency of the stock condition survey.	Overdue	30-Nov-22	Paul Weston
2122 PCI 01	PCI DSS Compliance	The PCI DSS Policy and Procedure should be reviewed and finalised. The policy should clearly define all key roles and responsibilities, including the corporate lead for PCI compliance.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki
2122 PCI 02	PCI DSS Compliance	The scope of the PCI environment should be explicitly defined, covering people, processes and technology. This should include a list of all service providers. Data flow maps may help define the PCI scope.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki
2122 PCI 03	PCI DSS Compliance	The relevant SAQ's should be identified and completed on an annual basis.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki

APPENDIX 1

2324 Bus Continu	01 Working group	<p>A Business Continuity Working Group should be established to:</p> <ul style="list-style-type: none"> . Oversee the review and testing of the Council's BCPs. . Report to senior management on business continuity activities. . Ensure that the BCPs align to the Council's corporate objectives. . Ensure stakeholders understand their roles and responsibilities for BCP. <p>A terms of reference for the Working Group should be established, outlining the membership and role of the group.</p>	Overdue	30-Sep-24	Paul Weston
2425 Cyber Sec	01 Security vulnerabilities report	<p>A formal report on the status of all security vulnerabilities should be reported monthly to the Head of IT. A prioritised action plan should be agreed and risk mitigation put in place where possible. Vulnerabilities that cannot be immediately remediated or mitigated should be reported to CMT for acceptance.</p>	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
2425 Cyber Sec	02 IT Health assessment	<p>All critical and high risk vulnerabilities on the RAP should be addressed as soon as possible. Risk mitigation and management processes should be established as per recommendation 1.</p>	In Progress	31-Dec-24	Zoe Wolicki; Gareth Youlden

APPENDIX 2

Priority	Code	Title	Recommendation	Status	Due Date	Managed By
High	1819 Proc 14.01	Pentana Training & Procedures	<p>a) Detailed procedures notes are developed for the use of the contract register on Pentana and made available to staff.</p> <p>b) Detailed training is provided to staff on the requirements of contract monitoring and management, how to use and update the contract register in Pentana to ensure staff are fully aware of their responsibilities and how to appropriately manage their contracts.</p>	Overdue	30-Nov-23	Joanne Goodfellow
High	2021 PM 01	Asset Management Policy/Strategy	An Asset Management Policy and Strategy covering planned maintenance should be produced, approved and communicated with stakeholders. This should also include the frequency of the stock condition survey.	Overdue	30-Nov-22	Paul Weston
Low	2122 Creditors	01 Procedures	A review of guidance notes available on the intranet in relation to creditors should be reviewed and updated as required.	Overdue	31-Mar-23	Joanne Goodfellow; Zoe Wolicki
High	2122 PCI 01	PCI DSS Compliance	The PCI DSS Policy and Procedure should be reviewed and finalised. The policy should clearly define all key roles and responsibilities, including the corporate lead for PCI compliance.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki
High	2122 PCI 02	PCI DSS Compliance	The scope of the PCI environment should be explicitly defined, covering people, processes and technology. This should include a list of all service providers.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki

APPENDIX 2

			Data flow maps may help define the PCI scope.			
High	2122 PCI 03	PCI DSS Compliance	The relevant SAQ's should be identified and completed on an annual basis.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki
Medium	2122 PCI 09	PCI DSS Compliance	Corporate level PCI compliant guidelines should be developed for all staff taking card payments.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki
Medium	2122 PCI 13	PCI DSS Compliance	Once the PCI scope is formally defined, discussions should be held with the acquiring bank to confirm what, if any, security scans are required.	Overdue	31-Dec-23	Joanne Goodfellow; Zoe Wolicki
Medium	2223 House Rents	02 Tenancy agreements	Signed tenancy agreements should be returned promptly.	Overdue	31-May-23	Hamid Khan; Tina Mustafa
Medium	2223 House Rents	03 Former tenant arrears	<p>Consideration should be taken as to the suitability of tenants when renewing a tenancy, for instance their level of arrears.</p> <p>Whilst it is not current practice to transfer arrears to renewed tenancies, the former arrears should be subject to recovery action and payment plans should be set up.</p>	Overdue	31-May-23	Hamid Khan; Tina Mustafa
Medium	2223 Landl/d H&S	01 Fire safety assessments	Confirmation should be sought that the actions have been addressed. Evidence of this should be retained.	Overdue	31-Mar-23	Paul Weston

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Medium	2223 Landl/d H&S	03 Electric inspections	The Electrical Inspection spreadsheet should be updated to include the commercial properties. The Council should continue to programme the electrical inspections in so that all properties are inspected.	Overdue	31-Dec-22	Paul Weston
Medium	2223 Landl/d H&S	04 Asbestos survey	All properties should have a completed asbestos survey, recorded correctly on the asbestos spreadsheet.	Overdue	31-Dec-22	Paul Weston
Medium	2223 Landl/d H&S	05 asbestos policy	The current processes should be reviewed to ensure compliance with the asbestos policy. For instance, clarity on whether asbestos management plan are site specific or strategic level. An asbestos annual report should be prepared for the Corporate Management Team.	Overdue	31-Oct-22	Paul Weston
Medium	2223 Landl/d H&S	06 Legionella remedial action	Remedial action to be taken on red issues and the Zetasafe dashboard should be updated with the current status.	Overdue	31-Dec-22	Paul Weston
Medium	2223 Landl/d H&S	07 Legionella risk assessments	There should be actions raised on Zetasafe/ Orchard to confirm the progress of the remedial work through to completion. Clarity should be obtained where the action is unclear.	Overdue	31-Dec-22	Paul Weston
Low	2223 Web Portals	17 accessibility statement	The MyHousing portal accessibility page should link to the web accessibility page on the corporate website.	Overdue	31-Dec-23	Zoe Wolicki; Gareth Youlden

APPENDIX 2

High	2324 Bus Continu	01 Working group	<p>A Business Continuity Working Group should be established to:</p> <ul style="list-style-type: none"> . Oversee the review and testing of the Council’s BCPs. . Report to senior management on business continuity activities. . Ensure that the BCPs align to the Council’s corporate objectives. . Ensure stakeholders understand their roles and responsibilities for BCP. <p>A terms of reference for the Working Group should be established, outlining the membership and role of the group.</p>	Overdue	30-Sep-24	Paul Weston
Medium	2324 Bus Continu	02 Training	<p>All heads of service and BCP owners should be provided with training once their BCP has been refreshed. This should then be provided on an agreed basis thereafter. Where staff have specific roles or responsibilities in the BCP, tailored training should be provided to ensure they fully understand their responsibilities. Training compliance rates should be monitored by the Assistant Director of Assets.</p>	In Progress	31-Dec-24	Paul Weston
Medium	2324 Bus Continu	03 BCP's	<p>Each service area lead should review and revise the BCPs to ensure that they are completed using the latest template. The plans should specify a clear BIA which set out the critical functions for the service, including RTOs and RPOs. The plans should be subject to review on at least an annual basis.</p>	Overdue	30-Sep-24	Paul Weston

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Low	2324 Comm safety	03 CSP plan	The council should develop clear aims and objective for the CSP plan which should be set out at the start of the plan. These should be linked with the identified priorities and give direction for the workplan to be based on.	In Progress	31-Mar-25	Joanne Sands
Medium	2324 Corp Policy	01 Policy log	A policy log should be developed containing all organisational policies which includes the following information: Policy Owner Last review date Review Frequency Next review date Whether it should be uploaded on to Astute The responsibility of who has oversight of the log should be determined to ensure that policy owners are regularly reviewing and updating their policies when required. This could be for the whole Council or specific service areas.	Overdue	30-Jun-24	Zoe Wolicki
Medium	2324 Corp Policy	02 Policy ownership	Heads of Services should be reminded of their responsibility to update policies within their service area. Policies should be reviewed in line with what is stated within the coversheet. Each policy should include a standardised coversheet which outlines the responsible individual and approval history.	Overdue	30-Jun-24	Zoe Wolicki

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Low	2324 Creditors	02 Receipts	In line with Recommendation 1A and 1B, the requirements to retain receipts and the ramifications of not doing so should be clearly outlined in the credit card policy.	Overdue	30-Apr-24	Emma Dyer; Joanne Goodfellow
Low	2324 Insurance	01 Policies and procedures	Information including policies and procedure notes to be reviewed to ensure relevance and accuracy.	Overdue	30-Sep-24	Emma Dyer; Joanne Goodfellow; Omotayo Lawal
Low	2324 Insurance	04 Safe controls	It should be considered that a reminder email be sent to Managers. The email should include the Financial Guidance requirements, in relation to keys and also inform of the insurance cover of the safe.	Overdue	29-Feb-24	Emma Dyer; Joanne Goodfellow; Omotayo Lawal
Medium	2324 Insurance	02 Renewal procedures	Procedures should be developed to cover the renewal process. This should include a checklist of tasks that can be used to monitor progress and return of information requested. The checklist should include responsible officers and timescales.	Overdue	30-Sep-24	Emma Dyer; Joanne Goodfellow; Omotayo Lawal
Medium	2324 Insurance	03 Invitation to quote	The invitation to quote form should comply with the Financial Guidance.	Overdue	31-Mar-24	Emma Dyer; Joanne Goodfellow; Omotayo Lawal
Low	2324 Remote	IT Remote Working 11	The information on MS Teams should include a link to the training videos and associated material available on the Microsoft website.	Overdue	30-Nov-23	Pardeep Kataria

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Low	2324 Risk Mgt	03 Training	A risk management training programme should be provided to all staff to ensure there is clear guidance on their roles and responsibilities, and how departmental risks feed into the corporate risk areas. This could be in an e-learning module so staff can access the content at any time or through in-house training. We recognise that the Council would need to firstly consider its resources to deliver this additional training.	In Progress	31-Mar-25	Emma Dyer; Joanne Goodfellow
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Medium	2324 Risk Mgt	01 Review and monitoring	<p>1. The Senior Management Team should continue to review the control measures for the risks identified on the Corporate Risk Register quarterly. This should include scrutiny of the detail provided on the control measures to identify what the 'actual' controls are. Controls which the Council may wish to consider include for Risk 7 are:</p> <ul style="list-style-type: none"> . Cyber security and data protection training, including simulated exercises to test awareness eg phishing exercises. . Technical controls that are in place on the Council's network such as multi-factor authentication and restriction of web content. . Testing of the Council's business continuity and disaster recovery procedures. <p>2. Risk management training should be provided to the Audit and Governance Committee to ensure it has the appropriate skills to effectively undertake its role for overseeing and monitoring risks.</p>	Overdue	31-May-24	Emma Dyer; Joanne Goodfellow
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Medium	2324 Risk Mgt	02 Local Risk Register	<p>1. In accordance with Finding 4, further training should be provided to staff, outlining the roles and responsibilities for risk management and providing support on how to effectively document controls.</p> <p>2. Each Head of Service should present the local risk register to the Assistant Director responsible for the area quarterly to oversee the implementation of the control measures.</p>	In Progress	31-Mar-25	Emma Dyer; Joanne Goodfellow
Medium	2324 Safeguardin	02 New starter training	Training should be provided within 3 months of starting employment.	Overdue	31-Jan-24	Jackie Noble; Joanne Sands
Medium	2324 Safeguardin	03 Refresher training	Refresher training should be completed every 3 years.	Overdue	31-Mar-24	Jackie Noble; Joanne Sands
Medium	2324 Safeguardin	04 training consistency	Officers of the same role should receive consistent safeguarding training. Training should be monitored and chased to confirm completion.	Overdue	31-Mar-24	Jackie Noble; Joanne Sands
Medium	2324 Safeguardin	06 Sheltered scheme	Confirmation should be recorded that the DBS check has been seen for service provider, for instance the DBS certificate number.	Overdue	31-Jan-24	Joanne Sands

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Low	2324 T & D	05 Policy	<ul style="list-style-type: none"> • Following the implementation of the new Training and Development Policy, it should be reviewed and updated every three years to ensure it reflects the Council’s current arrangements. • The new draft Training and Development Policy should be updated to include the following before it is implemented: • References to how training modules can be completed on Astute or via alternative methods (see Finding 4) • Consequences for non-compliance with the policy requirement, ie disciplinary actions for non-completion of mandatory training. 	Overdue	30-Jun-24	Jackie Noble
Medium	2324 T & D	02 PDR completion	The HR team should continue to monitor completion of PDRs at the end of the PDR window. A reminder email should be issued to line managers and staff that have not completed their PDR with ongoing non-compliance reported to CMT listing those PDRs that remain outstanding two weeks after the window.	Overdue	31-Aug-24	Jackie Noble

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Medium	2324 T & D	03 PDR analysis	<ul style="list-style-type: none"> • Heads of Services and Assistant Directors should meet annually after the PDR window to identify priorities in their service's needs and advise the Head of Human Resources and Organisational Development on the training allocation suggestions. <p>To identify high performers, the Council should consider whether to utilise a rating system into its PDR process. This could be used to direct the Heads of Service and Assistant Directors on staff that would benefit from further training.</p>	Overdue	31-Aug-24	Jackie Noble
Medium	2324 T & D	04 Training delivery	<p>The Council should explore alternative approaches to delivering mandatory training modules to staff in manual roles. For example, these could be completed by face-to-face group sessions or 'Toolbox Talks'. However, if these options are pursued then attendance records should be maintained to ensure the HR and Organisational Development Team can track completion of mandatory training.</p>	Overdue	30-Jun-24	Jackie Noble

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Medium	2324 Taxi Lic	01 Checks	<p>A. The details of the exceptions identified in our testing will be shared with the lead officer and these should be investigated further to ensure they are rectified at the earliest opportunity.</p> <p>B. Going forwards, the Council should ensure all steps and documentation requirements set out in the Policy are completed prior to issuing licences and that ongoing checks are completed to ensure these remain up-to-date. The findings from this report should be shared with all relevant staff, highlighting the common issues identified and reminding staff of the correct Policy. Failures to comply should be escalated and actions taken as appropriate.</p> <p>C. The Council should investigate whether it would be feasible to update the M3 System to add functions with automatic alerts on expired or missing documentation, to ensure sufficient controls are in place to identify out-of-date information. The results of these enquiries should be formally documented, including any alternative options and costings.</p>	Overdue	30-Apr-24	Wendy Smith
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High	2425 Cyber Sec	01 Security vulnerabilities report	A formal report on the status of all security vulnerabilities should be reported monthly to the Head of IT. A prioritised action plan should be agreed and risk mitigation put in place where possible. Vulnerabilities that cannot be immediately remediated or mitigated should be reported to CMT for acceptance.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
High	2425 Cyber Sec	02 IT Health assessment	All critical and high risk vulnerabilities on the RAP should be addressed as soon as possible. Risk mitigation and management processes should be established as per recommendation 1.	In Progress	31-Dec-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	10 CMT info	CMT should be briefed every six-months on cyber security and related matters.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	11 Phishing training	Users who fail the phishing test should be required to complete additional cyber training.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	12 Microsoft defender	As planned, Microsoft Defender should be installed on all mobile devices.	In Progress	31-Dec-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	13 Sophos	The Sophos threat protection policies for clients and servers should be reviewed.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	14 Scan of clients	The Sophos threat protection policies for clients and servers should be reviewed.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	15 Daily job list	The check of Sophos Central should be added to the daily checks job list.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	16 Application control policy	The application control policy on Sophos should be reviewed.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden

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Low	2425 Cyber Sec	17 Default administrator account	The name of the default administrator account should be changed and the account disabled if it is not used.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Low	2425 Cyber Sec	18 Vulnerability Management Policy	The Vulnerability Management Policy should be reviewed and updated.	Overdue	30-Sep-24	Zoe Wolicki; Gareth Youlden
Medium	2425 Cyber Sec	03 Cyber risk	A cyber risk should be added to the IT risk register and all existing risks reviewed. Cyber should also be added to the corporate risk register for senior management oversight.	In Progress	31-Dec-24	Zoe Wolicki; Gareth Youlden
Medium	2425 Cyber Sec	04 Training	Cyber security training should be refreshed annually.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Medium	2425 Cyber Sec	06 Administrator accounts	Administrator accounts should not be used for web browsing or accessing emails. Separate non-administration accounts should be used for these activities.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Medium	2425 Cyber Sec	07 LAPS	The issue with LAPS should be resolved and it should be used for all clients and servers.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Medium	2425 Cyber Sec	08 Workstation Admin Group	Users in the Workstation Admin Group should be reviewed.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden
Medium	2425 Cyber Sec	09 Microsoft Intune reporting	Microsoft Intune reporting on patch status should be reviewed and all computers confirmed to be patched up-to-date. A formal check should be performed monthly.	In Progress	31-Oct-24	Zoe Wolicki; Gareth Youlden

APPENDIX 2

Low	2425 Debtors	01 Corporate Credit Policy	The Corporate Credit Policy should be reviewed to ensure it reflects the current owner and actual procedures.	In Progress	30-Nov-24	Faron Blencoe; Michael Buckland
Medium	2425 Debtors	03 invoice promptness	Invoices should be raised promptly. Supporting documentation should be retained to confirm the charge, or if needed, if a dispute should arise. Officers should be reminded to put their contact details on the invoice.	In Progress	31-Dec-24	Faron Blencoe
Low	2425 Food Safety	01 Procedures	Work should continue to review the procedures to ensure a complete and current set is available for staff.	In Progress	31-Dec-24	Wendy Smith
Low	2425 Food Safety	03 Filing paperwork	Officers should ensure that all paperwork is correctly filed under the correct premise.	In Progress	31-Dec-24	Wendy Smith
Medium	2425 Food Safety	02 registrations	Following receipt of submitted forms, new businesses should be promptly registered and follow the inspection pattern. Where there are reasons for a delay, for instance, the business has not started operating, this should be recorded on the notes.	In Progress	31-Dec-24	Wendy Smith
Medium	2425 Food Safety	04 Inspections	Inspections should be completed at the frequency the risk category dictates.	In Progress	31-Dec-24	Wendy Smith

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Community Impact Assessment

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Delivery of Internal Audit Service and Outstanding Audit Recommendations	
Date Conducted	16 th October 2024	
Name of Lead Officer and Service Area	Andrew Wood, Audit Manager – Shared Service	
Commissioning Team (if applicable)	N/A	
Director Responsible for project/service area	Jo Goodfellow – Acting Executive Director – Finance	
Who are the main stakeholders	Corporate Management Team and Elected Members	
Describe what consultation has been undertaken. Who was involved and what was the outcome	Corporate Management and Audit & Governance Committee approved annual audit plan for 2024/25. Adoption of audit recommendations by management at the conclusion of audits.	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	
	A Strategy/Policy/Procedure	
	A function, service or project	X
What kind of assessment is it? Indicate with an 'x' which applies	New	
	Existing	X
	Being reviewed	
	Being reviewed as a result of budget constraints / End of Contract	

Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

To provide an update to Audit & Governance Committee on the completion of outstanding audit recommendations by management.

Who will be affected and how?

The whole organisation is impacted by the report and its findings; residents, businesses, visitors, voluntary sector and partner organisations.

Are there any other functions, policies or services linked to this impact assessment?

Yes No

If you answered 'Yes', please indicate what they are?

All services and functions are covered by this report.

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Disability		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Gender Reassignment		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Marriage and Civil Partnership		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Pregnancy & Maternity		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Race		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Religion or belief		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Sexual orientation		<input checked="" type="checkbox"/>	No impact as a direct result of

			this report
Sex		X	No impact as a direct result of this report
Gypsy/Travelling Community		X	No impact as a direct result of this report
Those with caring/dependent responsibilities		X	No impact as a direct result of this report
Those having an offending past		X	No impact as a direct result of this report
Children		X	No impact as a direct result of this report
Vulnerable Adults		X	No impact as a direct result of this report
Families		X	No impact as a direct result of this report
Those who are homeless		X	No impact as a direct result of this report
Those on low income		X	No impact as a direct result of this report
Those with drug or alcohol problems		X	No impact as a direct result of this report
Those with mental health issues		X	No impact as a direct result of this report
Those with physical health issues		X	No impact as a direct result of this report
Social inclusion Please include refugees and asylum seekers,		X	No impact as a direct result of this report
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered		X	No impact as a direct result of this report
Health and Wellbeing		X	No impact as a direct result of this report
Climate Change		X	No impact as a direct result of this report

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
N/A		

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
	Outcomes and Actions entered onto Pentana			

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

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Wednesday, 13 November 2024

Report of the Audit Manager

Counter Fraud Update

Exempt Information

None.

Purpose

To provide Members with:

- An update of counter fraud work completed this financial year, including an updated fraud action and fraud risk register;
- A refreshed and updated Counter Fraud & Corruption Strategy;
- A refreshed and updated Whistleblowing Policy; and
- A refreshed and updated Anti Money Laundering Policy.

Recommendations

It is recommended that the committee:

1. Endorses this update report including the updated fraud action plan at **Appendix 1** and the fraud risk register at **Appendix 2**.
2. Endorse the refreshed Counter Fraud & Corruption Policy Strategy at **Appendix 3**.
3. Endorse the refreshed Whistleblowing Policy at **Appendix 4**.
4. Endorse the refreshed Anti Money Laundering Policy at **Appendix 5**.

Executive Summary

Counter Fraud Update

Counter fraud work this financial year, April to September 2024 has included proactive counter fraud checks involving work on the National Fraud Initiative (NFI), the Cabinet Office's national data matching service. During 2022/23 there was a NFI exercise on Council Tax Single Person Discount, Council Tax Reduction, Electoral Register, Payroll Data, Housing Tenant's Data, Trader Creditors and Taxi Licencing. Ongoing liaison and review of these data matches were completed during 2023/24. The data matches were reviewed by the Counter Fraud Officer and discrepancies investigated.

During 2024/25, further work will be undertaken and the data matches for the 2024/25 will be submitted to NFI during October 2024 and within the required timeframes stipulated.

Routine counter fraud work including NNDR, Council Tax Reduction, Single Persons Discount, illegal sub-letting and non-residence of council housing has continued. This has included where appropriate 'home visits' and further investigations. The outcomes of these are shown in the table below.

	Number of cases investigated	Number of cases proven	Value
Council Tax reduction	10	2	£9,208.13
Housing Benefit	1	0	0
Revenues – Single Person Discount (SPD)	1	0	0
Housing - sublet	4	0	0
Housing – non residence	3	0	0
COVID- 19 NFI Upload File	0	0	0
NFI SPD check – NFI Dataset	73*	12	£8,231.32
NFI – Other dataset	18*	0	0
NFI Spotlight checks	0	0	0
Total		14	£17,439.45
Notes * relate to reviewed and closed dataset matches			

In addition to the above, proactive checks have been undertaken on 39 housing related applications (36 Right to Buy & 1 false application) at application stage.

The Council proactively manages fraud and the early intervention by the Counter Fraud Officer provides assurance that issues are picked up prior to them developing into a fraud concern. This is supported by the work undertaken by Internal Audit during the year and assurance that management controls are both in place and operating to detect and mitigate the risk of fraud. Whilst assurance cannot be ‘absolute’ the frameworks in place provide reasonable assurance around the management of risk.

As the Committee is aware, in line with good practice, a fraud response place and fraud risk register is maintained and reviewed on a regular basis. The latest Fraud Action Plan is detailed at **Appendix 1** and the Fraud Risk Register at **Appendix 2**.

Counter Fraud & Corruption Policy Strategy, Whistleblowing Policy and Anti-Money Laundering Policy

All policies are contained within **Appendices 3, 4 and 5** to this report. At this committee’s meeting on 15th November 2023 delegation was provided to the Audit Manager to update these policies for ‘minor changes’. This has been completed for 2024/25, the main changes required relate to;

- Reference to Office for Environmental Protection being a prescribed regulator;
- Minor job title changes; and
- Refresh of Chief Executive and Leader signatures.

Options Considered

None.

Resource Implications

None.

Legal/Risk Implications Background

Without sufficient counter fraud arrangements in place, the risk of fraud/corruption is increased. This can lead to a loss of Council assets / resources / fines and associated reputational damage.

Equalities Implications

Community Impact Assessments (CIA) for policies in **Appendices 3, 4 and 5** have been completed and included within each individual policy.

Environment and Sustainability Implications (including climate change)

None.

Background Information

None.

Report Author (s)

Andrew Wood – Audit Manager
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Jo Goodfellow – Interim Executive Director Finance
joanne-goodfellow@tamworth.gov.uk

List of Background Papers

Appendices

Appendix 1 – Fraud Action Plan 2024/25

Appendix 2 – Fraud Risk Register

Appendix 3 – Counter Fraud & Corruption Strategy including CIA

Appendix 4 – Whistleblowing Policy including CIA

Appendix 5 – Anti Money Laundering Policy including CIA

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Fraud Action Plan 2024/25

Report Author: Andrew Wood / Andrea Isaac

Date: March 2024

Fraud Response Area	Creating an Anti-Fraud Culture		
Description	To build an anti-fraud culture through the adoption of various measures to promote counter fraud awareness.		
Risks	Failure to make staff, member and the public aware that their suspicions will be treated confidentially, objectively and professionally	Due Date / Responsibility	Completed Date
Actions	Action Notes		
Issue of the counter fraud and corruption policy and whistleblowing policy to raise all staff awareness via Astute	All staff email issued 14/10/21 with update of Astute Policies. Following refresh of policies in October 2024, reissue via Astute.	November 2024 / Counter Fraud Officer (CFO)	
Provide drop in sessions to staff and members as required promoting counter fraud	Fraud drop in day completed November 2019. Virtual session planned for after Easter 2022. To be reviewed.	March 2025/ CFO	
Fraud Response Area	Deterring and Preventing Fraud		
Description	Deterring fraud through proactive communications. Preventing fraud by ensuring that relevant policies are in place and fraud risks are identified.		
Risks	A lack of robust strategic approach to deterring fraud can undermine actions to build an anti-fraud culture	Due Date	Completed Date
	A lack of understanding as to the stance the authority takes against fraud		
	Out of date policies and procedures which do not cover relevant legislation.		
Actions	Action Notes		

Regular attendance at service team meetings to promote counter fraud work	On-going	31 March 2025/ CFO	
Active participation in Staffordshire Counter Fraud Partnership	Joined the Staffordshire Counter Fraud Partnership early 2021. Continue to engage with the partnership and the Audit Manager to evaluate benefits.	31 March 2025/ CFO, Audit Manager (AM)	Ongoing, meetings regularly attended.
Produce and issue prevention of the facilitation of tax evasion policy statement and procedures	CMT approved 15/10/20, A&G Committee approval sought 29/10/20. Audit Manager to completed risk assessment required and then issue of the policy to all staff via the Astute system and provision of targeted training to finance and business support staff.	31 March 2025 / AM	Ongoing, risk assessment to be completed.
Ensure all counter fraud policies and procedures and Financial Guidance are reviewed by their review date / or on change of key legislation / best practice.	All policies and procedures are currently in date. Next review cycle November 2024 to be completed.	30 October 2024 / AM	Counter Fraud Policy and Strategy reviewed.

Fraud Response Area	Detecting Fraud		
Description	Detecting fraud through proactive investigations		
Risks	If not undertaken, there is a risk that the opportunity to abuse a system weakness may be heightened as the risk of being caught maybe deemed negligible by the perpetrator.		
	If not undertaken, there is a risk that fraud could go undetected		
Actions	Action Notes	Due Date	Completed Date
Participating and undertaking NFI checks	Regular ongoing activity.	31-Mar-2025 / CFO	Ongoing Data uploads conducted – NFI matches checked and continue to be checked.
Undertake local proactive exercises through data & intelligence analysis at the Authority as agreed with the Executive Director--Finance	On-going	31-Mar-2025 / CFO	

Internal audit programme includes review of counter fraud and corruption controls.	Plan on target	31-Mar-2025/ AM	Ongoing
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Fraud Response Area	Investigations		
Description	Investigate fraud in accordance with laid down policies and procedures.		
Risks	The risk of not investigating is that fraud goes unpunished and there is no resulting deterrent effect thus increasing the prevalence of fraud further		
	The staff (or others) making the allegation feel they are not taken seriously and referrals cease to be made.		
Actions	Action Notes	Due Date	Completed Date
Fraud referrals investigated	On-going	31-Mar-2025 / CFO	Ongoing

Fraud Response Area	Sanctions		
Description	Apply sanctions correctly and consistently		
Risks	If sanctions are not imposed there is no deterrence of fraud.		
Actions	Action Notes	Due Date	Completed Date
Ensure that sanctions are applied correctly and consistently (including internal disciplinary, regulatory & criminal)	On-going	31-Mar-2025/ CFO	Ongoing

Fraud Response Area	Redress		
Description	To ensure that redress is calculated correctly		
Risks	Fraudsters may not realise that any and all measures will be taken to recover any money lost to fraud.		
Actions	Action Notes		

Maintain comprehensive records of time spent on each investigation so that this can be included in any compensation claim. Identify and maintain a record of the actual proven amount of loss so that appropriate recovery procedures can be actioned.	On-going	31-Mar-2025 / CFO	Ongoing
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Fraud Response Area	Strategic Work		
Description	To maintain mandatory counter fraud arrangements.		
Risks	Failure to ensure the completion of mandatory strategic work may mean that the professional knowledge and skills are not maintained to a high standard	Due Date	Completed Date
Actions	Action Notes	Due Date	Completed Date
Attendance at relevant fraud forums/meetings to ensure that professional knowledge and skills are maintained	On-going	31-Mar-2025/ CFO, AM	Ongoing Attended Midland Fraud group and Staffordshire Counter Fraud group meeting
Attendance at relevant training as required	On-going	31-Mar-2025 / CFO, AM	Ongoing
Regular reporting of counter fraud work	Update to A&G Committee – November 2023	31-Mar-2025 / CFO, AM	15 November 2023
Regular meetings with the Chief Executive / Executive Director - Finance	On-going	31-Mar-2025 / CFO, AM	Ongoing. Monthly 1 to 1's.









Fraud & Corruption Risk Register

Report Type: Risks Report


Report Author: Andrew Wood/ Andrea Isaac

Date: 30 September 2024







Risk Title	Risk Description	Gross Risk	- Assessment	Current Risk	- Assessment	Last Review Date
Staffing (internal)						
Credit Income	Misappropriation of income		4 significant-unlikely		2 significant-very unlikely	30-Sep-24
Assets	Theft of fixed assets		9 serious-likely		2 minor-unlikely	30-Sep-24
Assets	Theft of Council information/intellectual property		12 major - likely		8 major - unlikely	30-Sep-24
Assets	Inappropriate use of Council assets for private use		8 significant - very likely		2 minor-unlikely	30-Sep-24
Petty cash/imprest accounts	Theft of takings disguised by manipulation of accounts		2 minor-unlikely		2 minor-unlikely	30-Sep-24
Expenses claims	Inflated claims		6 significant-likely		2 minor-unlikely	30-Sep-24
Corruption	Disposal of assets - land and property		6 serious-unlikely		3 serious-very unlikely	30-Sep-24
Corruption	Award of planning consents and licences		9 serious-likely		4 significant-unlikely	30-Sep-24
Corruption	Acceptance of gifts, hospitality, secondary employment		6 significant-likely		4 significant-unlikely	30-Sep-24
Car parking	Theft of takings		9 serious-likely		2 minor-unlikely	30-Sep-24
Treasury management	Falsifying records to gain access to loan or investment monies		12 major - likely		4 significant-unlikely	30-Sep-24
Money laundering	Using the council to hide improper transactions		8 major - unlikely		4 significant-unlikely	30-Sep-24
ICT fraud	Improper use of council ICT equipment		12 major - likely		4 significant-unlikely	30-Sep-24

Risk Title	Risk Description	Gross Risk	- Assessment	Current Risk	- Assessment	Last Review Date
Employee - general	Abuse of flexi system Falsification of car loans		6 significant-likely		4 significant-unlikely	30-Sep-24
Payment of grants to the public	Grants fraudulently claimed		12 major - likely		4 significant-unlikely	30-Sep-24
Loans & Investments	Misappropriation of funds Fraudulent payment or investment of funds		12 major - likely		4 significant-unlikely	30-Sep-24
Regeneration development corruption	Regeneration development corruption		12 major - likely		4 significant-unlikely	30-Sep-24
Financial statements	The financial statements may be materially mis-stated due to fraud		6 serious-unlikely		4 significant-unlikely	30-Sep-24
New starter	Fraudulent job application		9 serious-likely		4 significant-unlikely	30-Sep-24
ICT abuse	Improper use of IT equipment		9 serious-likely		4 significant-unlikely	30-Sep-24
Benefits fraud - internal	Fraudulent claim by member of staff		9 serious-likely		4 significant-unlikely	30-Sep-24
Cash theft	Theft of takings disguised by manipulation of accounts		4 significant-unlikely		2 significant-very unlikely	30-Sep-24
Cash theft	Theft of cash without disguise		4 significant-unlikely		1 minor - very unlikely	30-Sep-24
Payroll	Payment to non existent employees		2 significant-very unlikely		3 serious-very unlikely	30-Sep-24
Payroll	Over claiming hours worked		6 significant-likely		2 minor-unlikely	30-Sep-24
Payroll	Manipulation of standing data		6 serious-unlikely		2 significant-very unlikely	30-Sep-24
Assets	Theft of current assets		6 significant-likely		4 significant-unlikely	30-Sep-24
Procurement & Contract Management						30-Sep-24
Selection process	Senior staff influencing junior staff involved in a selection process		6 serious-unlikely		4 significant-unlikely	30-Sep-24

Risk Title	Risk Description	Gross Risk	- Assessment	Current Risk	- Assessment	Last Review Date
Lack of awareness of the procurement process	Lack of awareness of risks and issues in the procurement process		6 significant-likely		4 significant-unlikely	30-Sep-24
Lack of anti fraud culture	No antifraud culture - no due diligence/risk registers		6 significant-likely		2 significant-very unlikely	30-Sep-24
Contract awarded prior to specification being agreed	Contract awarded prior to specifications being fully agreed and developed; meaning the organisation becomes responsible for additional development and training expenses		6 significant-likely		4 significant-unlikely	30-Sep-24
Manipulation of preferred bidders list	Manipulation of preferred bidders list		4 significant-unlikely		2 significant-very unlikely	30-Sep-24
No formal contract in place	No formal contract in place		8 significant - very likely		4 significant-unlikely	30-Sep-24
Prices reworked	Prices reworked to enable the successful bidder to move up the proposal list following initial bidding		6 significant-likely		4 significant-unlikely	30-Sep-24
Value of contract disaggregated	Value of contract disaggregated to circumvent organisation/EU regulations		12 serious - very likely		4 significant-unlikely	30-Sep-24
Inappropriate high value purchase	Inappropriate high value purchase for an unauthorised purpose		6 significant-likely		4 significant-unlikely	30-Sep-24
Inappropriate use of single tender acceptance	Inappropriate use of single tender acceptance		6 significant-likely		4 significant-unlikely	30-Sep-24
Using agency staff or consultants			4 significant-unlikely		1 minor - very unlikely	30-Sep-24
Initial commercial consultations	Procurement staff being sidelined during initial		12 major - likely		4 significant-unlikely	30-Sep-24

Risk Title	Risk Description	Gross Risk	- Assessment	Current Risk	- Assessment	Last Review Date
	commercial consultations and subsequently being presented with a "done deal".					
Contract signing	Contracts signed by member of staff not authorised to do so		12 major - likely		4 significant-unlikely	30-Sep-24
Diversion of funds	Diversion of funds: the risk that a member of staff diverts funds through the set up of non-existent supplier/freelancer		12 major - likely		4 significant-unlikely	30-Sep-24
Bogus vendor	An individual could authorise the set up of a bogus vendor and raise and authorise a purchase order		16 major - very likely		4 significant-unlikely	30-Sep-24
Sale of confidential information	A member of staff could disclose information on bids to other contract bidders		12 major - likely		4 significant-unlikely	30-Sep-24
Creditor payments	Fraudulent requests for creditor payments		9 serious-likely		4 significant-unlikely	30-Sep-24
Fraudulent use for one off payment	Staff use the cheque payment process to send to a bogus vendor		6 serious-unlikely		2 significant-very unlikely	30-Sep-24
Declaration of interests	Lack of declarations of interests		9 serious-likely		4 significant-unlikely	30-Sep-24
Housing tenancy/homelessness						30-Sep-24
Housing allocations	Housing allocated for financial reward fraudulent allocation of property		9 serious-likely		4 significant-unlikely	30-Sep-24
Illegal sub letting	Illegal sub letting of council property		4 significant-unlikely		2 minor-unlikely	30-Sep-24
Homelessness	False claim of homelessness		6 significant-likely		2 minor-unlikely	30-Sep-24
Right to Buy	Fraudulent claim of right to buy discount		6 significant-likely		4 significant-unlikely	30-Sep-24

Risk Title	Risk Description	Gross Risk	- Assessment	Current Risk	- Assessment	Last Review Date
Council Tax						30-Sep-24
Single Persons Discount	Single persons discount fraudulently claimed		6 significant-likely		6 significant-likely	30-Sep-24
Discounts/exemptions	Discounts and exemptions falsely claimed		3 minor-likely		2 minor-unlikely	30-Sep-24
Refund fraud			3 minor-likely		2 minor-unlikely	30-Sep-24
Suppressed recovery action	Suppressed recovery action		3 minor-likely		2 minor-unlikely	30-Sep-24
NNDR						30-Sep-24
Void exemption	Void exemption falsely claimed		6 significant-likely		4 significant-unlikely	30-Sep-24
Occupation dates	Occupation dates incorrectly notified		6 significant-likely		4 significant-unlikely	30-Sep-24
Changes to property	Changes to property increase the rateable value		6 significant-likely		4 significant-unlikely	30-Sep-24
Insurance						30-Sep-24
Insurance claims	Claiming for non existent injuries Claiming at another establishment for the same injury overclaiming		9 serious-likely		4 significant-unlikely	30-Sep-24
Other						30-Sep-24
Elections	Fraudulent voting Fraudulent acts by canvassers		12 major - likely		4 significant-unlikely	30-Sep-24
External funding	Fraudulently claiming/using external funding		1 minor - very unlikely		1 minor - very unlikely	30-Sep-24
Housing Benefits/Council Tax Reduction Scheme						30-Sep-24
Benefits fraud -	Claimant fraudulently claims		12 serious - very likely		6 significant-likely	30-Sep-24

Risk Title	Risk Description	Gross Risk	- Assessment	Current Risk	- Assessment	Last Review Date
claimant	benefits					
Benefits fraud - third party eg landlord	fraudulent claim by third party		4 significant-unlikely		4 significant-unlikely	30-Sep-24
Cyber	Risk of loss, disruption or damage to the reputation of the Authority from some sort of failure of Information Technology systems				6 serious-unlikely	30-Sep-24
Sheltered schemes	Theft of customer monies		4 significant-unlikely		2 significant-very unlikely	30-Sep-24



COUNTER FRAUD AND CORRUPTION POLICY STATEMENT,
STRATEGY & GUIDANCE NOTES

Document Status: Final

Originator: A Struthers

Updated: A Wood

Owner: Audit Manager

Version: 01.01.11

Date: November 2024

Document Location

This document is held by Tamworth Borough Council, and the document owner is Andrew Wood, Audit Manager.

Printed documents may be obsolete. An electronic copy will be available on Tamworth Borough Councils Intranet. Please check for current version before using.

Revision History

Revision Date	Version Control	Summary of changes
1/3/12	1.01.01	Scheduled review
30/07/13	1.01.02	Scheduled review
15/08/15	1.01.03	Scheduled review
22/08/17	1.01.04	Scheduled review
04/07/18	1.01.05	Minor changes
26/09/2018	1.01.06	Scheduled review
14/10/19	1.01/07	Scheduled review
October 2021	1.01.08	Minor changes
October 2022	1.01.09	Scheduled review
October 2023	1.01.10	Minor changes
November 2024	1.01.11	Minor changes

Approvals

Name	Title	Approved
Audit & Governance Committee	Committee Approval	Yes
CMT	Group Approval	Yes
Andrew Wood	Audit Manager	Yes

Document Review Plans

This document is subject to a scheduled 3 yearly review. Updates shall be made in accordance with business requirements and changes and will be with agreement with the document owner.

Distribution

The document will be available on the Intranet and the website.

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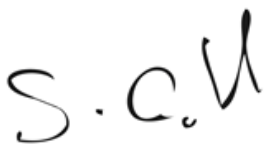
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TAMWORTH BOROUGH COUNCIL

COUNTER FRAUD AND CORRUPTION POLICY STATEMENT

- 1.0 Tamworth Borough Council fully recognises its responsibility in relation to the spending of public money (Protecting the Public Purse) and is committed to the fullest support for Councillors and Employees in upholding the reputation of the Council and maintaining public confidence in its integrity. It also recognises its responsibilities under the Proceeds of Crime Act 2002, The Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 and the Bribery Act 2010.
- 2.0 The Council acknowledges the threats of fraud and corruption and the harm that they can cause. The Council is committed to maintaining an ethical culture which does not and will not tolerate any form of fraud and corruption. Any such issues will be thoroughly investigated and, if confirmed, dealt with rapidly in the strongest possible way. We will seek the strongest possible sanctions against those who seek to defraud the Council. This includes taking appropriate action against employees, Councillors, contractors, external individuals and organisations.
- 3.0 To deliver the Council's corporate priorities, aims and strategic objectives we need to maximise the financial resources available to us. In order to do this we must reduce the risk of fraud to an absolute minimum.
- 4.0 This Policy Statement, together with the Counter Fraud & Corruption Strategy and Guidance Notes, is intended to provide advice and information to Employees and Councillors but suppliers, contractors and the general public are also encouraged to use this advice and guidance.



Chief Executive



Leader of the Council

COUNTER FRAUD AND CORRUPTION STRATEGY

1.0 Introduction

1.1 This strategy is a key element of the Council's overall corporate governance arrangements which aim to ensure the Council is well managed and does the right things, in the right way, for the right people, in a timely, inclusive, open, honest and accountable way. The Council has a range of other interrelated policies and procedures that provide a corporate framework to counter fraud activity. These have been formulated in line with appropriate legislative requirements and include, for example, the anti-money laundering policy, whistleblowing policy, constitution, financial guidance and codes of conduct.

1.2 All references to fraud within this document include any type of fraud-related offence. Fraud, bribery and corruption are defined as follows:

Fraud by false representation or failure to disclose information when there is a legal duty to do so, or by abuse of position. Fraud Act 2006

Bribery – Broadly, the Bribery Act defines bribery as giving or receiving a financial or other advantage in connection with the "improper performance" of a position of trust, or a function that is expected to be performed impartially or in good faith.

Corruption - is a form of dishonesty or criminal activity undertaken by a person or organization entrusted with a position of authority, often to acquire illicit benefit.

1.3 A dishonest act or fraudulent activity may be, but is not limited to, an act or activity that is unethical, improper, or illegal such as:

- theft of an asset including, but not limited to, money, tangible property, intellectual property etc;
- misappropriation, misapplication, destruction, removal, or concealment of property;
- false claims and/or misrepresentation of facts;
- alteration or falsification of paper or electronic documents, including the inappropriate destruction of paper or electronic documents;
- inappropriate use of computer systems including hacking and software piracy;
- embezzlement;
- bribery, or corruption of any kind;
- unlawful or undeclared conflict of interest; and
- unauthorised use or misuse of Council property, equipment, materials or records.

- 1.4 Although a dishonest or fraudulent act may have criminal and/or civil law consequences, the Council is not required to use a determination by a criminal or civil body as the basis for determining whether an act is dishonest or fraudulent, nor must the act rise to the level of a crime or violation of civil law in order to constitute a violation of the Council's Conduct and Capability Policy.
- 1.5 The Council also expects that all individuals and organisations (e.g. partners, suppliers/contractors and service users) which it comes into contact with, will act towards the Council with integrity and without actions involving fraud or corruption. The Council in turn will endeavour to ensure that all of its dealings will be on the same basis.
- 1.6 In administering its aims and responsibilities the Council is totally committed to deterring fraud and corruption, whether it is attempted on or from within the Council, and is committed to an effective counter fraud and corruption strategy designed to:
- limit, as far as possible, the opportunities to commit fraudulent acts - **prevention**,
 - enable any such acts to be **detected** at an early stage, and
 - deal with any subsequent **investigations** in a prompt, thorough and professional manner.
- 1.7 Overall responsibility for dealing with fraud and corruption rests with the Executive Director - Finance, who is the nominated Section 151 Officer having a statutory duty under Section 151 of the Local Government Act 1972 to ensure that there are proper arrangements in place to administer the Council's financial affairs. He is therefore the principal contact for all Councillors and employees.
- 1.8 Internal scrutiny of the Council's various activities occurs as a result of:-
- the Executive Director - Finance Section 151 responsibilities and Section 114 Local Government Finance Act 1988 responsibilities,
 - the establishment of sound Internal Audit arrangements in accordance with the Accounts and Audit Regulations 2015, and
 - the responsibilities placed on the Monitoring Officer under Section 5 of the Local Government and Housing Act 1989.

1.9 External scrutiny of the Council's various activities occurs as a result of involvement by:-

- Local Government & Social Care Ombudsman,
- Housing Ombudsman
- External Auditor,
- Central Government Departments and Parliamentary Committees,
- HM Revenues and Customs,
- The Department for Work and Pensions, and
- The general public.

1.10 This Counter Fraud and Corruption Strategy is based on a series of comprehensive and inter-related procedures designed to deter any attempted fraudulent or corrupt act. These cover:-

- Culture,
- Prevention,
- Detection and Investigation,
- Recovery, Sanction and Redress,
- Training and Awareness,
- Sharing Information, and
- Implementing the Strategy.

2.0 Objectives

2.1 The key objectives of this Counter Fraud and Corruption Strategy are to:

Increase awareness of the counter-fraud responsibilities at all levels within and outside the Council;

Further embed and support the effective management of fraud risk within the Council;

Set specific goals for improving the resilience against fraud and corruption through the support of counter-fraud activities across the Council; and

Minimise the likelihood and extent of loss through fraud and corruption.

2.2 All of the above will directly support the achievement of the Council priorities whilst ensuring that statutory responsibilities are met.

3.0 Roles and Responsibilities

3.1 Roles and responsibilities for identifying and mitigating against the risk of fraud must be clearly understood and embraced effectively.

3.2 The risk of fraud and corruption is considered in the Council's corporate risk management arrangements. Chief Officers must therefore ensure that:

Their risk registers accurately reflects the risk of fraud and corruption including any emerging risks;

Controls, including those in the digital environment and for new systems and procedures, are effective and are properly maintained and documented;

There is compliance with the Council's Financial Guidance and any other relevant codes of practice;

Those engaged in countering fraud and corruption, have the appropriate authority, skills and knowledge to undertake this work effectively;

That the necessary framework agreements to counter fraud are in place where the Council is working with other organisations either by way of contract or partnership. The Council will not knowingly enter into any contractual agreement with an organisation that fails to comply with its Code of Practice and/or other related procedures; and

Findings from fraud investigations may lead to relevant system changes.

4.0 Culture

4.1 The Council has determined that the culture and ethics of the Authority is one of honesty and openness in all its dealings, with opposition to fraud and corruption. This strategy forms part of the governance arrangements for the authority.

4.2 The Council's Councillors and employees play an important part in creating and maintaining this culture by their actions and approaches to corrupt practices. They are encouraged to raise any matters that concern them relating to the Council's methods of operation in accordance with this Counter Fraud & Corruption Strategy or the Council's Whistleblowing Policy.

4.3 The Council is committed to driving down Benefit Fraud. Both public perception and organisational culture play key roles in achieving this aim. All Councillors and Employees are therefore required to report any known material changes affecting Benefit claims to the Department of Works & Pensions (DWP). This specifically includes your own entitlement and of any tenants or sub-tenants that you may have. Failure to do so will result in the Councillor or Employee being subject to the Benefits (CTR) Prosecution Policy and Conduct and Capability Procedures. In addition, it is also a requirement that the timely transfer of information you receive in your normal business activities relating to

any other customer who has alerted you to a fact that affects Benefit awards is completed.

- 4.4** The Council's Whistleblowing Policy ensures that those raising concerns know they will be treated seriously and properly investigated in a confidential and impartial manner. In raising concerns employees can be assured that they will be protected if the disclosure is made in the public interest and will not affect their employment situation or future prospects with the Council.
- 4.5** Employees can raise their concerns in the first instance with their line manager but where employees feel unable to raise concerns with their immediate line manager/supervisor they can deal direct with any of the following:-
- the Section 151 Officer (Executive Director - Finance),
 - the Audit Manager,
 - the Chief Executive,
 - any member of Executive Leadership Team or Corporate Management Team,
 - the External Auditor, or
 - any Trade Union Representative.
- 4.6** Elected Councillors, suppliers, contractors, and the general public are also encouraged to report concerns through any of the above routes.
- 4.7** Unless there are good reasons to the contrary, any allegations received by way of confidential letters or telephone calls will be taken seriously and investigated in an appropriate manner. All concerns will be treated in confidence and every effort will be made not to reveal your identity if you so wish. At the appropriate time, however, you may need to come forward as a witness, but this will be discussed with you, as to whether and how the matter can be proceeded with.
- 4.8** The Nolan Committee set out the seven guiding principles that apply to people who serve the public. The Council will develop our working behaviour around these principles, which are attached as Appendix 1.

5.0 Prevention

5.1 Employees

- 5.1.1** The Council recognises that a key preventative measure in the fight against fraud and corruption is to take effective steps at the recruitment stage to establish, as far as possible, the previous record of potential employees, in terms of their propriety and integrity. In this regard temporary, agency and contract employees should be treated in the same manner as permanent employees. Chief Officers are

responsible for ensuring agencies engaged for the supply of temporary employees have rigorous vetting processes and that references are sought direct from previous clients with regard to the suitability and integrity of the candidate.

- 5.1.2 Employee recruitment is required to be in accordance with procedures laid down by the Council. Written references covering the known honesty and integrity of potential employees and where required, evidence of a licence to practice must always be obtained. All qualifications will be verified. There will be an open and fair policy of recruitment with no 'canvassing' or 'favouritism'.
- 5.1.3 Employees of the Council are expected to follow any Code of Conduct relating to their personal Professional Body and also abide by the terms and conditions of employment as set out in the Contract of Employment and the National Scheme of Conditions. The Council will report any known impropriety to the relevant Institution for them to consider appropriate disciplinary action.
- 5.1.4 Employees are reminded that they must comply within Section 117 of the Local Government Act 1972 which requires any interests in contracts that have been or are proposed to be entered into by the Council to be declared. The legislation also prohibits the acceptance of fees or rewards other than by means of proper remuneration. Details are described within the Code of Conduct.
- 5.1.5 Managers are required to observe the formal Conduct and Capability Procedures.
- 5.1.6 All employees are required to declare in a public register (held by the Monitoring Officer) any offers of gifts or hospitality (accepted or not) which are in any way related to the performance of their duties in relation to the Authority. Employees should also declare private work (paid or unpaid) etc., which if permitted must be carried out during hours when not employed on Council work, and should not be conducted from Council premises or use any Council equipment/assets.
- 5.1.7 The above matters are brought to the attention of employees via induction training and subsequently by internal procedures, policies and / or communications.
- 5.1.8 Management at all levels are responsible for ensuring that employees are aware of the Authority's Financial Regulations and Standing Orders, and that the requirements of each are being met. They are also responsible for ensuring that appropriate procedures are in place to safeguard the resources for which they are responsible, which include accounting control procedures, working manuals and operating procedures. Management must ensure that all employees have

access to these rules and regulations and that employees receive suitable training.

- 5.1.9 Managers should strive to create an environment in which employees feel able to approach them with concerns they may have about suspected irregularities. If managers and employees are unsure of the appropriate action they should consult with the Internal Audit Section.

5.2 Councillors

- 5.2.1 Councillors are required to operate within: -

- Sections 49 - 52 of the Local Government Act 2000,
- Local Authorities (Members' Interest) Regulations 1992 (S.I. 618)
- The National Code of Local Government Conduct
- Any local code or amendments agreed and
- The Council's Standing Orders and Financial Regulations.

- 5.2.2 These matters are specifically brought to the attention of elected Councillors at their induction and subsequent training. Councillors are required to provide the Monitoring Officer with specific information concerning their disclosable pecuniary interests and to keep that information up to date, as required by sections 29-34 of the Localism Act 2011. The Members Interests Register is held by the Monitoring Officer.

5.3 Systems

- 5.3.1 The Council's Scheme of Delegation, Standing Orders and Financial Regulations place a duty on all Councillors and employees to act in accordance with best practice when dealing with the affairs of the Council.

- 5.3.2 The Executive Director - Finance has a statutory responsibility under Section 151 of the Local Government Act 1972 to ensure proper administration of financial affairs. Various Codes of Practice outlining systems, procedures and responsibilities are widely distributed to employees.

- 5.3.3 The Internal Audit Section regularly assesses the level of risk within the Council with a view to preventing fraud and corruption. Such assessments are discussed with Chief Officers and, where appropriate, incorporated into work and/or training plans.

- 5.3.4 Significant emphasis has been placed on thorough documentation of financial systems, and every effort is made to continually review and

develop these systems in line with best practice to ensure efficient and effective internal controls and to include adequate separation of duties. The adequacy and appropriateness of the Council's financial systems are independently monitored by both the Internal Audit Section and External Audit. Any weaknesses identified in internal control will be reported to management whose duty it will be to ensure that corrective and / or preventative action is taken. The Section 151 Officer will use their statutory power to enforce the required changes if necessary.

- 5.3.5 Chief Officers will ensure that internal controls, including those in a computerised environment, are effectively maintained and documented and will investigate any potential weaknesses.
- 5.3.6 Chief Officers must ensure that proportionate counter fraud measures are applied to new systems/procedures.
- 5.3.7 It is evident across the country that an increasingly wide variety of frauds are being perpetrated. The larger frauds may involve the creation of multiple identities and false addresses, and involve different agencies. Employees are therefore encouraged to liaise with those other agencies, exchanging information, where possible and appropriate to help prevent and detect such fraud. It is important that arrangements exist, and are developed, to encourage the exchange of information with other agencies including:-
- other local and statutory authorities,
 - Chief Financial Officer Group,
 - local, regional and national Auditor networks,
 - government departments,
 - police forces,
 - the External Auditor,
 - the National Anti-Fraud Network, and
 - any other Fraud Networks/Forums.
- 5.3.8 The Council has established formal procedures to respond to complaints received about any aspect of service delivery. Issues relating to fraud and corruption will be passed directly to the Executive Director - Finance. Specific guidance has also been issued to all employees in relation to Proceeds of Crime and Money Laundering. The Monitoring Officer acts as the Council's Money Laundering Reporting Officer.
- 5.3.9 The Council will involve the police to prosecute offenders where fraudulent or corrupt acts are discovered. This will be a matter for the Executive Director - Finance, Monitoring Officer and the Chief Executive to decide, in consultation with the relevant Chief Officer.

6.0 Detection and Investigation

- 6.1** The Council's preventative systems, particularly internal control systems, provide indicators of fraudulent activity and are designed to deter any fraudulent activity.
- 6.2** It is often the alertness of elected Councillors, council employees, and the general public to the possibility of fraud and corruption, that enables detection to occur and appropriate action to take place.
- 6.3** Many frauds are discovered by chance, 'tip-off' or general audit work and arrangements are in place to enable such information to be properly dealt with.
- 6.4** Chief Officers are required by Financial Regulations to report all suspected instances of fraud and corruption to the Executive Director - Finance. Early reporting is essential to the success of this strategy, and;
- ensures the consistent treatment of information regarding fraud and corruption,
 - facilitates a thorough investigation of any allegation received by an independent unit (Internal Audit), and
 - ensures maximum protection of the Council's interests.

Suspicious that any transaction or dealing may involve the proceeds of crime should be reported to the Monitoring Officer, who will ensure such suspicions are reported to the appropriate authorities as required by the relevant Act.

- 6.5** The investigating officer will be appointed by the Executive Director - Finance. The investigating officer will usually be the Corporate Anti-Fraud Investigations Officer. The investigating officer will;-
- deal promptly and confidentially with the matter,
 - have unhindered access to employees, information and other resources as required for investigation purposes
 - record all evidence received,
 - ensure that evidence is sound and adequately supported,
 - ensure security of all evidence collected,
 - liaise as necessary and appropriate with the relevant Chief Officer,
 - liaise as necessary with external agencies e.g. Police,
 - notify the Council's insurers if appropriate.
- 6.6** The Council can be expected to deal swiftly and thoroughly with any employee who attempts to defraud the Council or who is corrupt. The Council will deal positively with fraud and corruption or suspicions

thereof. Where appropriate, the Council's disciplinary procedures will be implemented.

- 6.7** There is a need to ensure that any investigation process is not misused and, therefore, any abuse such as raising unfounded malicious allegations may be dealt with as a disciplinary matter.
- 6.8** When it is found that fraud or corruption has occurred due to a break down in the Council's systems or procedures, Chief Officers will ensure that appropriate improvements in systems of control are promptly implemented in order to prevent a reoccurrence.
- 6.9** Depending on the nature and anticipated extent of the allegations, the Internal Audit section will normally work closely with management and other agencies such as the police to ensure that all allegations and evidence is properly investigated and reported upon.
- 6.10** The Council's Conduct procedure will be used where the outcome of the audit investigation indicates improper behaviour.
- 6.11** The Council will normally wish the police to independently prosecute offenders where financial impropriety is discovered.
- 6.12** Any Councillor who is the subject of allegations of wrong doing will be referred to the Monitoring Officer to the authority (details on the website), who will determine what action should be taken.
- 6.13** All contractors, consultants and organisations receiving funding from the Council who are accused of wrong doing will be the subject of an investigation and where appropriate an independent decision may be taken to terminate the agreement/grant.
- 6.14** The Council's External Auditor has a responsibility to review the Council's arrangements for the prevention, detection and investigation of fraud and corruption and report accordingly.

7.0 Recovery, Sanctions & Redress

- 7.1** Where the Council identifies fraud then it will:

Recover, prosecute or apply other sanctions to perpetrators, where appropriate.

- 7.2** Where fraud or corruption by employees is indicated, then action will be taken in accordance with the Council's Conduct and Capability Policy. This may be in addition to any civil recovery action or sanctions.
- 7.3** The Council aims to be effective in recovering any losses incurred to fraud using, as appropriate, criminal and/or civil law. Success rates will be monitored routinely as an indicator and part of the quality process.

7.4 Wherever possible, redress should be applied. This ensures that the Council is seen as recovering money lost to fraud.

8.0 Training & Awareness

8.1 The Council recognises the importance of training in the delivery of high quality services. The Council supports the concept of fraud awareness training for managers and for employees involved in internal control systems to ensure that their responsibilities and duties in this respect are regularly highlighted and reinforced. Chief Officers are responsible for training employees and promoting awareness of fraud issues.

8.2 Investigation of fraud and corruption centres around the Council's Internal Audit section. Employees engaged in this section, for the detection and prevention of fraud, are properly and regularly trained in all aspects of it. The training plans of the section will reflect this requirement.

8.3 Employees who ignore such training and guidance may face the possibility of disciplinary action.

8.4 Regular training seminars will be provided for Councillors on a wide range of topics including declarations of interest and the Code of Conduct as detailed in the Constitution.

8.5 The Council will maintain an up to date awareness of the types of fraud that it may be exposed to, especially given the ongoing financial situation and the resourcefulness of potential fraudsters. It will review national developments and strengthen systems and procedures accordingly using the following key sources of information:

National Fraud Reports
National Anti-Fraud Network
Midlands Fraud Forum
Staffordshire Counter Fraud Partnership
Local Networking
Any other sources of fraud awareness/updates etc.

9.0 Sharing Information

9.1 The Council is committed to working with other agencies in the detection and prevention of fraud.

9.2 Information will be shared internally and with other government departments and other agencies e.g. insurance companies for the purposes of fraud prevention and detection. This information will be shared in accordance with the principles of the General Data Protection Regulation 2018 and other appropriate legislation.

9.3 The Council participates in national data sharing exercises, i.e. the National Fraud Initiative to enable the proactive detection of fraud.

10.0 Implementing the Strategy

10.1 Internal Audit will undertake an annual assessment of the effectiveness of existing counter-fraud and corruption arrangements against:

Fighting Fraud Locally Checklist

Other best practice/statutory guidance as required

The roles and responsibilities as set out in Appendix 2 of this strategy.

10.2 Internal Audit will regularly complete a Counter Fraud Work Plan and report this annually to the Audit & Governance Committee.

10.3 Internal Audit will report its findings to the Audit and Governance Committee who will consider the effectiveness of the counter-fraud risk management arrangements.

11.0 Conclusions

11.1 The Council's systems, procedures, instructions and guidelines are designed to limit, as far as is practicable, acts of fraud and corruption. All such measures will be kept under constant review to ensure that they keep pace with developments in prevention and detection techniques regarding fraudulent or corrupt activity.

11.2 The Council will maintain a continuous review of all its systems and procedures through the Executive Director - Finance and Audit Manager.

COUNTER FRAUD AND CORRUPTION GUIDANCE NOTES

1.0 Why Do We Need a Counter Fraud And Corruption Strategy?

1.1 Even though the vast majority of people working for the Council are honest and diligent, the Council cannot be complacent. Fraudulent or corrupt acts may include:

System issues	i.e. where a process/system exists which can be abused by either employees or members of the public (e.g. Housing Allocations)
Financial issues	i.e. where individuals or companies have fraudulently obtained money from the Council (e.g. invalid invoices/work not done)
Equipment issues	i.e. where Council equipment is used for personal use (e.g. personal use of council telephones)
Resource issues	i.e. where there is misuse of resources (e.g. theft of building materials/cash)
Other issues	i.e. activities undertaken by officers of the Council which may be: unlawful; fall below established standards or practices; or amount to improper conduct (e.g. receiving unapproved hospitality)

(This is not an exhaustive list.)

1.2 The prevention of fraud, and the protection of the public purse is **EVERYONES BUSINESS**. It is important that all employees know:

- how to recognise a fraud,
- how to prevent it, and
- what to do if they suspect that they have come upon a fraud.

1.3 This guidance has been drawn up to provide information to employees at all levels. The strategy and guidance attempt to assist employees and others with suspicions of any malpractice. The overriding concern is that it is in the public interest for the malpractice to be corrected and, if appropriate, sanctions and redress applied.

1.4 It is important that employees should be able to use any mechanism without fear of victimisation, and fully know that their concerns will be addressed seriously, quickly and discreetly.

1.5 It is important that the whole Council works together to reduce Benefit Fraud. All employees are therefore required to transfer relevant information gathered in their normal day to day activities about possible Benefit irregularities to the Single Fraud Investigation Service (SFIS) at the DWP. So, for example, if during a routine visit/interview you

become aware that a customer is working and “signing on” which they may be entitled to do so but you must tell the SFIS this information. The SFIS will assess the matter and investigate where appropriate. You are not expected to and must not delve any further.

- 1.6** The Council has determined that it should have a culture of honesty and openness in all its dealings, with opposition to fraud and corruption. The Council’s Whistleblowing Policy does this by :-
- making it clear that vigilance is part of the job. Knowingly not raising concerns may be a serious disciplinary offence,
 - recognising that early action may well prevent more worry or more serious loss/damage,
 - making it safe and simple to convey critical information ensuring that any concern in this area is seen as a concern and not a grievance,
 - encouraging information exchange, remembering that there are two sides to every story,
 - providing a way in which concerns can be raised in confidence and not necessarily via the nominated line manager or supervisor,
 - recognising the need for discretion,
 - ensuring the anonymity of the individual, where possible, should this be preferred by the employee, and by protecting employers from reprisals.
- 1.7** Under the Enterprise and Regulatory Reform Act 2013, any disclosure made using the Whistleblowing Policy, within reasonable belief of the worker making the disclosure will only be protected if it is made in the public interest. More detail is found in the Whistleblowing Policy.
- 1.8** There is a need to ensure that any investigation process is not misused and, therefore, any abuse such as raising unfounded malicious allegations may be dealt with as a disciplinary matter.
- 2.0 Why Do We Need This Advice?**
- 2.1** It is important that you follow the advice given and do not try to handle the problem yourself, without expert advice and assistance. A badly managed investigation may do more harm than good. There are a number of internal and external processes which have to be followed to yield a satisfactory conclusion.
- 3.0 How To Recognise A Fraud**
- 3.1** Each employee must be aware of fraud and the areas within their responsibility where fraud may occur.

3.2 Fraud can happen wherever employees or independent contractors complete official documentation and can take financial advantage of the Council. The risk of fraud is enhanced where employees or contractors are in positions of trust or responsibility and are not checked or subjected to effective monitoring or validation. Consequently the following areas are susceptible to fraud:-

- claims for work done by independent contractors,
- travel and expense claims,
- cash receipts/ petty cash,
- payroll,
- ordering, and
- stocks and assets.

3.3 Fraud involves the falsification of records, failing to disclose information or abuse of position. Managers need to be aware of the possibility of fraud when presented with claims/forms/documentation etc. Issues which may give rise to suspicions are:-

- documents that have been altered, “Tippex” used thereon, or different pens and different hand writing,
- claims that cannot be checked, particularly if prior authorisation was not given,
- strange trends (use comparisons and reasonableness),
- confused, illegible text and missing details,
- delays in documentation, completion or submission, and
- no vouchers or receipts to support claims.

3.4 There are a number of indications of an employee being in a situation whereby they could be acting fraudulently. Common indicators could be:-

- living beyond their means,
- under financial pressure ,
- not taking annual leave, and
- solely responsible for a “risk” area and/or possibly refusing to allow another officer to be involved in their duties and/or have minimal supervision.

4.0 How To Prevent It

4.1 By establishing an adverse culture to fraud and corruption the Council can help to prevent its occurrence.

4.2 Managers need to :-

- Minimise the opportunity for fraud – this can be achieved by putting in place robust systems of internal controls and checks.

- Reduce the “Pay – Off” – this is achieved by increasing the chances of detection and increasing the penalty for the perpetrator so risks outweigh the benefits of getting “away with it”

4.3 There are 8 basic control types which management should concern themselves with: -

Supervision

Supervisory checks should be completed and recorded by the line manager on the work completed by his/ her team.

Organisation

Within each system, there should be policies/ procedures setting out how functions should be carried out. There should be clear structures/ rules which employees should work within.

Authorisation

Within a system there should be authorisation controls e.g. controls to authorise a payment (electronic/ physical signature), and the correct level of authority is used in decision making.

Employees

There should be clear roles and responsibilities and appropriate level of delegation. The right person should be doing the right job.

Segregation of Duties

Seek to avoid the sole ownership for the processing and control functions of any activity, by one employee.

Physical

This relates to physical controls e.g. access to monies, documents, security of premises etc should be appropriate and restricted where necessary. Where restricted access is necessary, access to keys/door numbers etc should be retained by the person granted access rights. They should not be left on the premises. Inventory checks ensure that assets are controlled.

Arithmetical Accuracy

Checks completed by another person to confirm the accuracy of data input/ independent reconciliations of cash floats etc.

Management Functions

Within the system there should be controls for monitoring and reporting upon activity e.g. the production of audit trail reports from systems etc. Monitoring to highlight irregularity/ non-compliance with rules and procedures and reporting – being accountable for actions.

- 4.4. Employees need to be aware of the possibility of fraud when presented with claims/ forms/ documentation, etc. They should also have an awareness of internal rules and procedures; i.e. financial regulations, standing orders, declarations of outside work, hospitality etc.
- 4.5 Deterrence and prevention is the primary aim and if managers implement and control areas as mentioned in 4.3, any deviation from the set procedure should be highlighted in a timely manner.

5.0 What To Do On Suspecting A Fraud

5.1 Action By Employees

- 5.1.1 The Council is committed to the highest possible standards of openness, probity and accountability. Any employee who believes such standards are being breached should report their suspicions. This can be done via the Council's Whistleblowing Policy or you can contact the Executive Director - Finance, Audit Manager or a Chief Officer.
- 5.1.2 You should report the matter immediately, make a note of your suspicions and provide as much factual information to support your concerns. Concerns are better raised in writing.
- 5.1.3 The background and the history of the concern, giving names, dates and places where possible, should be set out and the reason why the individual is particularly concerned about the situation. Those who do not feel able to put their concern in writing can telephone or meet the appropriate officer. The earlier the concern is expressed, the easier it is to take action. Individuals may invite their trade union or professional association to raise a matter on their behalf.
- 5.1.4 Do not try to carry out an investigation yourself. This may damage any investigation carried out by the Internal Audit section or an appointed investigator. Help the official investigators by providing information as and when requested and by giving a written statement when required.

5.2 Action By Managers

- 5.2.1 If managers become suspicious of any action by an employee or supplier or such suspicions are reported to them they should follow these simple rules.

- If possible establish if the irregularity (potential fraud, corruption or error) is a genuine error or possible fraud.
- Contact their Chief Officer or any other officer as identified in the Counter Fraud and Corruption Strategy, who will contact the Executive Director - Finance or the Audit Manager.
- Contact the Executive Director - Organisation, where there may be implications under the disciplinary procedures for officers.
- Do nothing else, except remain vigilant and await further instructions from the investigating team.

5.2.2 The Council is required to report any cases in which it is suspected that transactions involve the proceeds of crime. If employees or managers have any such suspicion, this should be reported immediately to the Monitoring Officer, who shall advise on the necessary action and ensure the matter is reported to the appropriate authorities.

5.2.3 Details of the relevant contacts can be found in Appendix 4.

6.0 What happens to the allegation

6.1 The Executive Director - Finance or their investigating officer, will normally carry out a full enquiry even where there is clear evidence of an offence following the Fraud Response Plan (Appendix 3). A full report will be copied and sent to:-

- the relevant Chief Officer, and
- the Chief Executive to consider if there needs to be any police involvement.

6.2 It is essential that the Executive Director - Finance investigation should be a complete one and the investigating officer to whom it is delegated is entitled to expect the fullest co-operation from all employees.

6.3 A full detailed report on any system control failures and recommended actions to address the failures will be issued to the relevant manager in the format of an internal audit report.

The Seven Principles of Public Life (Nolan Committee)

Selflessness

Holders of public office take decisions in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

Holders of public office should promote and support these principles by leadership and example.

Statement of Expected Responsibilities

Stakeholder	Expected Responsibilities
Chief Executive	Ultimately accountable as Chief Executive for the effectiveness of the Council's arrangements for countering fraud and corruption as well as corporate governance.
Executive Director - Finance (Section 151 Officer)	The Executive Director - Finance has a statutory duty, under Section 151 of the Local Government Act 1972, Sections 114 and 116 of the Local Government Finance Act 1988 and Accounts and Audit Regulations 2011 to ensure the proper administration of the Council's financial affairs. This includes Internal Audit and Benefit (Council Tax Reduction) Fraud.
Audit Manager	Responsible for developing and implementing the Counter Fraud and Corruption Policy Statement, Strategy and Guidance Notes and investigating any issues reported under this policy. Reporting on the effectiveness of controls to the Audit and Governance Committee. To ensure that all suspected or reported irregularities are dealt with promptly and in accordance with this Strategy and that action is identified to improve controls and reduce the risk of recurrence.
Monitoring Officer	<p>To advise Councillors and officers on ethical issues, standards and powers to ensure that the Council operates within the Law and Statutory Codes of Practice. The operation of the Council's Money Laundering Policy.</p> <p>Maintain a Register of Disclosable Pecuniary Interests Maintain a Register of Interests, Gifts & Hospitality.</p>
Executive Director - Organisation	To put in place a corporate recruitment and selection policy and monitor compliance against it.
Chief Officers	To ensure that fraud and corruption risks are considered as part of the Council's corporate risk management arrangements. To ensure that actions to mitigate risks in this area are effective. To notify the

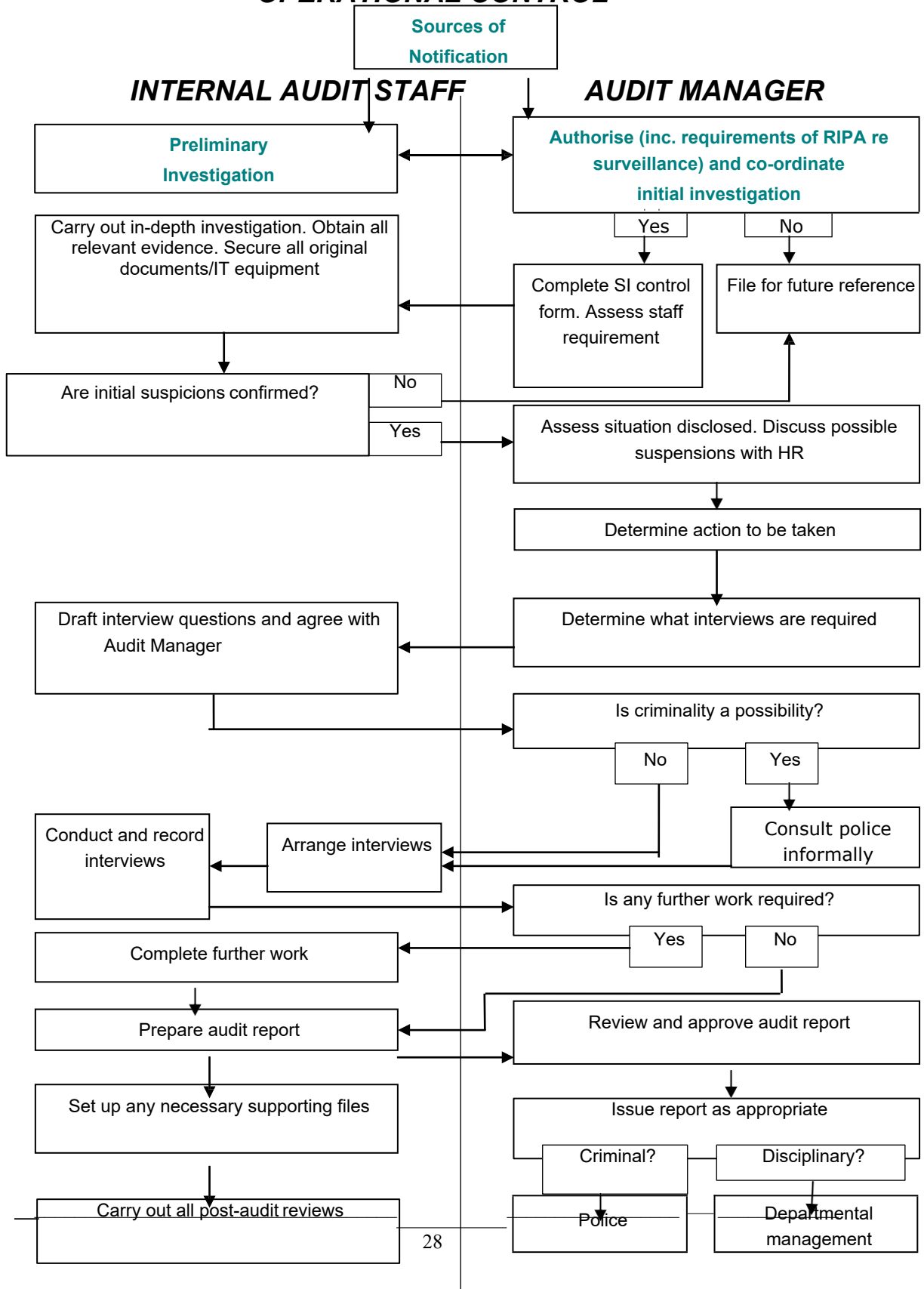
	<p>Executive Director - Finance of any fraud arising in a timely manner.</p> <p>To ensure all training is provided and fully attended that supports this policy</p>
Assistant Director - Partnerships	The operation of the Council's Regulation of Investigatory Powers Act (RIPA) 2000 Policies and Procedures
Executive Management Team	Challenge new policies and strategies to ensure that fraud and corruption risks have been taken into account. Review the corporate framework designed to promote an over-riding counter-fraud culture on a regular basis. This will include monitoring and evaluating arrangements to ensure effectiveness and compliance with best practice.
Audit and Governance Committee	<p>To monitor the Council's policies and consider the effectiveness of the arrangements for Counter Fraud and Whistleblowing.</p> <p>To exercise all the functions of the Council relating to Codes of Conduct as provided in the Localism Act 2011 except for those functions which under Chapter 7 of the Localism Act 2011 may only be exercised by the full Council.</p>
Deputy leader & Portfolio holder – Assets & Finance	To champion the Council's Counter Fraud & Corruption arrangements and promote them at every opportunity.
Elected Councillors	To support and promote the development of a strong counter fraud culture.
External Audit	Statutory duty to ensure that the Council has in place adequate arrangements for the prevention and detection of fraud, corruption and theft.
Senior Managers	To promote employee awareness and ensure that all suspected or reported irregularities are immediately referred to Executive Director Corporate Services. To ensure that there are mechanisms in place within their service areas to assess the risk of fraud, corruption and theft and to reduce these risks by implementing robust internal controls.

Employees	To comply with Council policies and procedures, to be aware of the possibility of fraud, corruption and theft, and to report any genuine concerns to the appropriate management, the Chief Executive, the Executive Director - Finance or Internal Audit.
Public, Partners, Suppliers, Contractors and Consultants	To be aware of the possibility of fraud and corruption against the Council and report any genuine concerns or suspicions. To ensure that effective controls are in place to mitigate risks to the Council.

Tamworth Borough Council

Fraud Response Plan

OPERATIONAL CONTROL



**HOW TO REPORT ANY SUSPECTED FRAUDS, CORRUPTION, OTHER
IRREGULARITIES OR CONCERNS**

To contact Internal Audit Services

Contact: Andrew Wood, Audit Manager

Tel: 01827 709234 email: andrew-wood@tamworth.gov.uk

Write to Audit Manager (Confidential)
Tamworth Borough Council
Marmion House,
Lichfield Street
Tamworth
B79 7BZ

Or: Andrea Isaac, Corporate Anti-Fraud Investigations Officer

Tel: 01827 709541 email: andrea-isaac@tamworth.gov.uk

Alternatively you can contact:

Jo Goodfellow, Acting Executive Director - Finance

Tel: 01827 709241 email: joanne-goodfellow@tamworth.gov.uk

Stephen Gabriel, Chief Executive

Tel: 01827 709453, email: stephen-gabriel@tamworth.gov.uk

Anica Goodwin, Executive Director - Organisation

Tel: 01827 709225 email: anica-goodwin@tamworth.gov.uk

Rob Barnes, Executive Director – Communities

Tel: 01827 709447 email: rob-barnes@tamworth.gov.uk

To contact the Council's external auditor

Write to:

Azets
6th Floor Bank House
Cherry Street
Birmingham
West Midlands B2 5AL

Tel: 0121 374 0180

To report Housing Benefit Fraud contact;

National Benefit Fraud Hotline 0800 854 440 or

text phone number 0800 320 0512 or

Write to NBFH, PO Box No. 224, Preston, PR1 1GP

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Counter Fraud & Corruption Policy Statement, Strategy & Guidance Notes	
Date Conducted	15 th October 2024	
Name of Lead Officer and Service Area	Andrew Wood Audit Manager	
Commissioning Team (if applicable)	N/A	
Director Responsible for project/service area	Jo Goodfellow Acting Executive Director – Finance	
Who are the main stakeholders	Employees and Citizens	
Describe what consultation has been undertaken. Who was involved and what was the outcome	CMT – review of existing policy	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	
	A Strategy/Policy/Procedure	X
	A function, service or project	
What kind of assessment is it? Indicate with an 'x' which applies	New	
	Existing	X
	Being reviewed	
	Being reviewed as a result of budget	

	constraints / End of Contract	
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Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

Review of existing policy to bring into line with current best practice.

Who will be affected and how?

Employees and Citizens – updated policy

Are there any other functions, policies or services linked to this impact assessment?

Yes No

If you answered 'Yes', please indicate what they are?

Council's Whistleblowing Policy

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age		<input checked="" type="checkbox"/>	
Disability		<input checked="" type="checkbox"/>	
Gender Reassignment		<input checked="" type="checkbox"/>	
Marriage and Civil Partnership		<input checked="" type="checkbox"/>	
Pregnancy & Maternity		<input checked="" type="checkbox"/>	
Race		<input checked="" type="checkbox"/>	
Religion or belief		<input checked="" type="checkbox"/>	
Sexual orientation		<input checked="" type="checkbox"/>	
Sex		<input checked="" type="checkbox"/>	
Gypsy/Travelling Community		<input checked="" type="checkbox"/>	
Those with caring/dependent responsibilities		<input checked="" type="checkbox"/>	

Those having an offending past		X	
Children		X	
Vulnerable Adults		X	
Families		X	
Those who are homeless		X	
Those on low income		X	
Those with drug or alcohol problems		X	
Those with mental health issues		X	
Those with physical health issues		X	
Social inclusion Please include refugees and asylum seekers,		X	
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered		X	
Health and Wellbeing		X	
Climate Change		X	

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
<i>None identified</i>		

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
None identified				

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

APPENDIX 4

WHISTLEBLOWING POLICY

Document Status: Final

Originator: A Struthers

Updated: A Wood

Owner: Audit Manager

Version: 01.01.11

Date: October 2024

This information can be produced on request in other formats and languages

Document Location

This document is held by Tamworth Borough Council, and the document owner is Andrew Wood, Audit Manager.

Printed documents may be obsolete. An electronic copy will be available on Tamworth Borough Councils Intranet. Please check for current version before using.

Revision History

Revision Date	Version Control	Summary of changes
01/03/12	1.01.01	Scheduled review
29/07/13	1.01.02	Changes under the Enterprise and Regulatory Reform Act 2013
03/08/15	1.01.03	Scheduled review plus changes under The Public Interest Disclosure (Prescribed Persons) Order 2014 .
23/08/17	1.01.04	Scheduled review
04/07/18	1.01.05	Minor Changes (job titles)
26/09/2018	1.01.06	Scheduled review
14/10/19	1.01.07	Scheduled review
05/10/21	1.01.08	Minor changes (job titles)
08/09/22	1.01.09	Scheduled review
16/10/23	1.01.10	Minor changes
15/10/24	1.01.11	Minor changes

Approvals

Name	Title	Approved
Audit & Governance Committee	Committee Approval	Yes
CMT	Group Approval	Yes
Andrew Wood	Audit Manager	Yes

Document Review Plans

This document is subject to a scheduled 3 yearly review. Updates shall be made in accordance with business requirements and changes and will be with agreement with the document owner.

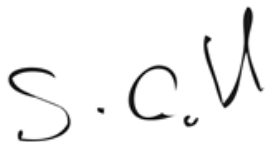
Distribution

The document will be available on the Intranet.

WHISTLEBLOWING POLICY

1. Policy Statement

- 1.1 Tamworth Borough Council believes it is important to encourage a climate of openness and dialogue within the Council, where the free expression by staff of their concerns is welcomed by managers as a contribution towards improving services.
- 1.2 Employees are often the first to realise that there may be something seriously wrong within the Council. However, they may not express their concerns because they feel that speaking up would be disloyal to their colleagues or to the Council. They may also fear harassment or victimisation. In these circumstances it may be easier to ignore the concern rather than report what may just be a suspicion of malpractice.
- 1.3 The Council is committed to the highest possible standards of openness, probity and accountability. In line with that commitment it expects employees, and others that it deals with, who have serious concerns about any aspect of the Council's work to come forward and voice those concerns. It is recognised that most cases will have to proceed on a confidential basis.
- 1.4 This policy document makes it clear that you can do so without fear of victimisation, subsequent discrimination or disadvantage. *This Whistleblowing Policy is intended to encourage and enable anyone to raise concerns in the public interest, in good faith within the Council rather than overlooking a problem or 'blowing the whistle' outside.*



Chief Executive



Leader of the Council

2. Introduction

2.1 The Public Interest Disclosure Act 1998 became law in July, 1999. This Act, introduced the protection of whistle-blowers and removes the limits of financial liability to which an organisation is exposed should a whistle-blower receive unfair treatment. This policy document sets out the Council's response to the requirements of the Act.

2.2 Under the Enterprise and Regulatory Reform Act 2013, any disclosure made using the Whistleblowing Policy, within reasonable belief of the worker making the disclosure will only be protected if it is made in the public interest. It must also show one or more of the following:

(a) that a criminal offence has been committed, is being committed or is likely to be committed,

(b) that a person has failed, is failing or is likely to fail to comply with any legal obligation to which he is subject,

(c) that a miscarriage of justice has occurred, is occurring or is likely to occur,

(d) that the health or safety of any individual has been, is being or is likely to be endangered,

(e) that the environment has been, is being or is likely to be damaged, or

(f) that information tending to show any matter falling within any one of the preceding paragraphs has been, is being or is likely to be deliberately concealed.

2.3 This policy is designed for workers. Workers include:

employees;
agency workers;
people that are training with an employer but not employed; and
self-employed workers, if supervised or working off-site.

2.4 Local Government employees have an individual and collective responsibility regarding their conduct and practices, which are always subject to scrutiny. As individuals, employees are required to work within the Code of Conduct for Tamworth Borough Council Employees and the

relevant codes of conduct including the standards appropriate to their professional organisations or associations. The Council's regulatory framework also includes Financial Guidance that must be met.

- 2.5 All employees have a duty to bring to the attention of management any deficiency in the provision of service and any impropriety or breach of procedure, in accordance with Financial Guidance.
- 2.6 These procedures are in addition to the Council's complaints procedures including the Grievance Procedure and the Dignity and Respect at Work Policy, and other statutory reporting procedures applying to some Services.
- 2.7 This policy has been discussed with the relevant trade unions and professional organisations and has their support.

3 Aims and Scope of this Policy

- 3.1 This policy aims to:
 - encourage you to feel confident in raising concerns that are in the public interest
 - provide avenues for you to raise those concerns and receive feedback on any action taken
 - ensure that you receive a response to your concerns and that you are aware of how to pursue them if you are not satisfied
 - reassure you that you will be protected from possible reprisals or victimisation if you have a reasonable belief that you have made any disclosure in good faith.
- 3.2 There are existing procedures in place to enable you to disclose particular concerns. These are:
 - The Authority's Grievance Procedure which enables you to lodge a grievance relating to your own employment;
 - The Authority's Counter Fraud and Corruption Policy Statement, Strategy & Guidance Notes, which outlines how you can disclose potential fraud, bribery, corruption and theft;
 - The Authority's Dignity and Respect at Work Policy, which enables you to disclose cases of potential harassment and bullying;
 - The Authority's Children & Adults at Risk of Abuse and Neglect Policy (which has its own Whistleblowing Policy in place), for disclosures regarding suspected mistreatment of children and adults at risk of abuse and neglect.

- 3.3 This policy does **not** replace the corporate complaints procedure or other existing policies for raising issues regarding your employment.

4 Safeguards

- 4.1 The Council is committed to good practice and high standards and shall be supportive of employees.
- 4.2 The Council recognises that the decision to report a concern can be a difficult one to make. If what you are saying is within reasonable belief, you should have nothing to fear because you will be doing your duty to your employer and those for whom you are providing a service.
- 4.3 The Council will not tolerate any harassment or victimisation (including informal pressures) and will take appropriate action to protect you when you raise a concern in good faith. It is a disciplinary matter to victimise a bone fide whistle-blower.

5 Confidentiality

- 5.1 All concerns will be treated in confidence and every effort will be made not to reveal your identity if you so wish. At the appropriate time, however, you may need to come forward as a witness, but this will be discussed with you, as to whether and how the matter can be proceeded with .

6 Anonymous Allegations

- 6.1 This policy encourages you to put your name to your allegation whenever possible.
- 6.2 Concerns expressed anonymously are much less powerful but will be considered at the discretion of the Council.
- 6.3 In exercising this discretion the factors to be taken into account would include:
- the seriousness of the issues raised
 - the credibility of the concern; and
 - the likelihood of confirming the allegation from attributable sources.

7 Untrue Allegations

- 7.1 If you make an allegation in good faith, but it is not confirmed by the investigation, no action will be taken against you. If, however, you make

an allegation frivolously, maliciously or for personal gain, disciplinary action will be taken against you.

8 How to Raise a Concern

- 8.1 As a first step, you should normally raise concerns with your immediate manager or their superior. This depends, however, on the seriousness and sensitivity of the issues involved and who is suspected of the malpractice. For example, if you believe that management is involved, you should approach the Chief Executive, Executive Director – Organisation, Executive Director -Finance, or Audit Manager. Where you feel unable to raise the concerns internally due to the nature of the disclosure you should contact the External Auditor who will then ensure that the disclosure is properly investigated.
- 8.2 To raise a concern in respect of Benefits Fraud, you can contact the National Benefit Fraud Hotline - telephone number 0800 854 440 or text phone number 0800 320 0512 or online www.gov.uk/report-benefit-fraud or write to them at NBFH, PO Box No. 224, Preston, PR1 1GP.

9 External contacts

- 9.1 While it is hoped that this policy gives you the reassurance you need to raise such matters internally, it is recognised that there may be circumstances where you can properly report matters to outside bodies, such as prescribed regulators, some of which are outlined at 9.7. If a worker chooses to go to the media, they can expect in most cases to lose their whistleblowing law rights. It is only in exceptional circumstances that a worker can go to the media without losing their rights. The Public Interest Disclosure Act 1998 gives more detail on this.
- 9.2 Concerns may be raised verbally or in writing. Staff who wish to make a written report are invited to use the following format:
- the background and history of the concern (giving relevant dates);
 - the reason why you are particularly concerned about the situation.
- 9.3 The earlier you express the concern the easier it is to take action and you will need to be able to demonstrate to the person contacted that there are reasonable grounds for your concern.
- 9.4 Contact points for advice/guidance on how to pursue matters of concern can be obtained from:
- Chief Executive – 709453

- Executive Director – Organisation 709225
- Executive Director - Finance – 709242
- Executive Director – Communities 709447
- Audit Manager – 709234

9.5 You may wish to consider discussing your concern with a colleague first and you may find it easier to raise the matter if there are two (or more) of you who have had the same experience or concerns.

9.6 You may invite your trade union or professional association representative or a member of staff to be present during any meetings or interviews in connection with the concerns you have raised.

9.7 Examples of relevant Prescribed Regulators are as follows:

Proper conduct of public business, value for money fraud and corruption relating to provision of public services	Comptroller and Auditor General
Serious or complex fraud	Director of the Serious Fraud Office
Environmental issues	Environment Agency
Accounting, auditing and actuarial issues	Financial Reporting Council Limited
Health & Safety issues	Health & Safety Executive
Social Housing	Homes & Communities Agency
Data Protection & Freedom of Information	Information Commissioner
Corruption & Bribery	National Crime Agency
Child Welfare & Protection	Children's Commissioner NSPCC
Environmental Protection issues	Office for Environmental Protection

The full list of prescribed regulators can be found in [The Public Interest Disclosure \(Prescribed Persons\) Order 2014](#).

10 How the Council Will Respond

- 10.1 The Council will always respond to your concerns. Do not forget that testing out your concerns is not the same as either accepting or rejecting them.
- 10.2 Where appropriate, the matters raised may:
- be investigated by management, internal audit, or through the disciplinary process
 - be referred to the police
 - be referred to the external auditor
 - form the subject of an independent inquiry.
- 10.3 In order to protect individuals and those accused of misdeeds or possible malpractice, initial enquiries will be made to decide whether an investigation is appropriate and, if so, what form it should take. The overriding principle which the Council will have in mind is the public interest. Concerns or allegations which fall within the scope of specific procedures (for example, child protection or discrimination issues) will normally be referred for consideration under those procedures.
- 10.4 Some concerns may be resolved by agreed action without the need for investigation. If urgent action is required this will be taken before any investigation is conducted.
- 10.5 Within ten working days of a concern being raised, the Audit Manager will write to you:
- acknowledging that the concern has been received
 - indicating how the Council propose to deal with the matter
 - giving an estimate of how long it will take to provide a final response
 - telling you whether any initial enquiries have been made
 - supplying you with information on how the Council will support you if you think this is necessary, whilst the matter is under consideration, and
 - telling you whether further investigations will take place and if not, why not.
- 10.6 The amount of contact between the officers considering the issues and you will depend on the nature of the matter raised, the potential difficulties involved and the clarity of the information provided. If necessary, the Council will seek further information from you.

- 10.7 Where any meeting is arranged, off-site if you so wish, you can be accompanied by a trade union officer or professional association representative or a member of staff.
- 10.8 The Council accepts that you need to be assured that the matter has been properly addressed. Thus, subject to legal constraints, we will inform you of the outcome of any investigation.

11 The Responsible Officer

- 11.1 The Audit Manager has overall responsibility for the maintenance and operation of this policy. That officer maintains a record of concerns raised and the outcomes (but in a form which does not endanger your confidentiality) and will report as necessary to the Council.

12 How the Matter can be Taken Further

- 12.1 If you feel that the Council has not responded correctly at any stage, remember you can go to the other levels and bodies mentioned at paragraph 9.7. While it cannot be guaranteed that all matters will be addressed in the way that you might wish, it will always be the Council's intention to handle the matter fairly and properly. By using this policy, you will help achieve this
- 12.2 If you do take the matter outside the Council, you should ensure that you do not disclose confidential information. Check with the contact point about that.

Community Impact Assessment

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Counter Fraud & Corruption Policy Statement, Strategy & Guidance Notes	
Date Conducted	15 th October 2024	
Name of Lead Officer and Service Area	Andrew Wood Audit Manager	
Commissioning Team (if applicable)	N/A	
Director Responsible for project/service area	Jo Goodfellow Acting Executive Director – Finance	
Who are the main stakeholders	Employees and Citizens	
Describe what consultation has been undertaken. Who was involved and what was the outcome	CMT – review of existing policy	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	
	Strategy/Policy/Procedure	X
	A function, service or project	
What kind of assessment is it? Indicate with an 'x' which applies	New	
	Existing	X
	Being reviewed	
	Being reviewed as a	

	result of budget constraints / End of Contract	
--	--	--

Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

Review of existing policy to bring into line with current best practice.

Who will be affected and how?

Employees and Citizens – updated policy

Are there any other functions, policies or services linked to this impact assessment?

Yes No

If you answered 'Yes', please indicate what they are?

Council's Counter Fraud and Corruption Strategy

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age		<input checked="" type="checkbox"/>	
Disability		<input checked="" type="checkbox"/>	
Gender Reassignment		<input checked="" type="checkbox"/>	
Marriage and Civil Partnership		<input checked="" type="checkbox"/>	
Pregnancy & Maternity		<input checked="" type="checkbox"/>	
Race		<input checked="" type="checkbox"/>	
Religion or belief		<input checked="" type="checkbox"/>	
Sexual orientation		<input checked="" type="checkbox"/>	
Sex		<input checked="" type="checkbox"/>	
Gypsy/Travelling Community		<input checked="" type="checkbox"/>	
Those with caring/dependent responsibilities		<input checked="" type="checkbox"/>	

Those having an offending past		X	
Children		X	
Vulnerable Adults		X	
Families		X	
Those who are homeless		X	
Those on low income		X	
Those with drug or alcohol problems		X	
Those with mental health issues		X	
Those with physical health issues		X	
Social inclusion Please include refugees and asylum seekers,		X	
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered		X	
Health and Wellbeing		X	
Climate Change		X	

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
<i>None identified</i>		

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity

and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
None identified				

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

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APPENDIX 5

ANTI-MONEY LAUNDERING POLICY

Document Status: Final

Originator: J M Hackett

Updated: A Wood

Owner: Audit Manager

Version: 01.01.10

Date: October 2024

Approved by Audit & Governance Committee

Document Location

This document is held by Tamworth Borough Council, and the document owner is Andrew Wood, Audit Manager.

Printed documents may be obsolete. An electronic copy is available on Tamworth Borough Council's Intranet. Please check for current version before using.

Revision History

Revision Date	Version Control	Summary of changes
	1.01.01	Scheduled review
30/07/13	1.01.02	Scheduled review
28/09/16	1.01.03	Scheduled review
08/02/18	1.01.04	Scheduled review
04/07/18	1.01.05	Minor Changes to job titles
30/09/19	1.01.06	Minor changes to job titles and addition on MLRO response at Appendix 2.
05/10/21	1.01.07	Minor changes to job titles
08/09/21	1.01.08	Scheduled review
16/10/23	1.01.09	Minor changes
15/10/24	1.01.10	Minor changes

Approvals

Name	Title	Approved
Audit & Governance Committee	Committee Approval	Yes
CMT	Group Approval	Yes
Andrew Wood	Audit Manager	Yes

Document Review Plans

This document is subject to a scheduled review every 3 years. Updates shall be made in accordance with business requirements and changes and will be with agreement with the document owner.

Distribution

The document will be available on the Intranet and the website.

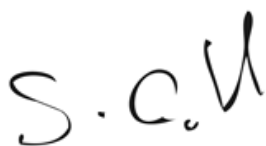
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TAMWORTH BOROUGH COUNCIL

ANTI-MONEY LAUNDERING POLICY STATEMENT

- 1.0 Tamworth Borough Council fully recognises its responsibility in relation to the spending of public money (Protecting the Public Purse) and is committed to the fullest support for Councillors and Employees in upholding the reputation of the Council and maintaining public confidence in its integrity. It also recognises its responsibilities under the Proceeds of Crime Act 2002 (as amended by the serious organised Crime and Police Act 2005), Money Laundering Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 (MLR) and the Bribery Act 2010.
- 2.0 The Council acknowledges the threat of money laundering and the harm that it can cause. The Council is committed to maintaining an ethical culture which does not and will not tolerate any form of fraud and corruption. Any such issues will be thoroughly investigated and, if confirmed, dealt with rapidly in the strongest possible way. We will seek the strongest possible sanctions against those who seek to defraud the Council. This includes taking appropriate action against employees, Councillors, contractors, external individuals and organisations.
- 3.0 To deliver the Council's corporate priorities, aims and strategic objectives we need to maximise the financial resources available to us. In order to do this we must reduce the risk of fraud to an absolute minimum.
- 4.0 This document is intended to provide advice and information to Employees and Councillors but suppliers, contractors and the general public are also encouraged to use this advice and guidance.



Chief Executive



Leader of the Council

TAMWORTH BOROUGH COUNCIL ANTI-MONEY LAUNDERING POLICY

1. Introduction

Although local authorities are not directly covered by the requirements of the Money Laundering Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 (MLR), guidance from CIPFA indicates that they should comply with the underlying spirit of the legislation and regulations.

Tamworth Borough Council is committed to the highest possible standards of conduct and governance, therefore, it has put in place appropriate and proportionate anti-money laundering safeguards and reporting arrangements.

The Council must apply customer due diligence measures if the person carries out an occasional transaction that amounts to a transfer of funds exceeding €1,000. **To address and prevent money laundering and terrorist financing the Council has set a cash payment limit of £1,000.**

This is not designed to prevent customers making payments for Council services but to minimise the risk to the Council of high value cash transactions. Best practice is to be encouraged – seek payment electronically from a UK clearing bank.

2. Scope of the Policy

This policy applies to all employees, whether permanent or temporary, and Members of the Council.

Its aim is to enable employees and Members to respond to a concern they have in the course of their dealings for the Council. Individuals who have a concern relating to a matter outside work should contact the Police.

3. Definition of Money Laundering

Money laundering is a general term for any method of disguising the origin of “dirty” or criminal money. This money may be the proceeds of any criminal activity including terrorism, drugs trafficking, corruption, tax evasion and theft. The purpose of money laundering is to hide the origin of the dirty money so that it appears to have come from a legitimate source. Unfortunately, no organisation is safe from the threat of money laundering, particularly where it is receiving funds from sources where the identity of the payer is unknown. It is, therefore, possible that Council may be targeted by criminals wishing to launder the proceeds of crime.

In addition, it is possible that the proceeds of crime may be received from individuals or organisations who do not realise that they are committing an offence. It is no defence for the payer or the recipient to claim that they did not know that they were committing an offence if they should have been aware of the origin of the funds. All staff therefore dealing with the receipt of funds or

having contact with third parties from whom funds may be received need to be aware of the possibility of money laundering taking place.

Money laundering describes offences involving the integration of the proceeds of crime or terrorist funds into the mainstream economy. Such offences are defined under the Proceeds of Crime Act 2002 (“the Act”); the following are ‘prohibited acts’:

- Concealing, disguising, converting, transferring or removing criminal property from the UK
- Becoming involved in an arrangement which an individual knows or suspects facilitates the acquisition, retention, use or control of criminal property by or on behalf of another person
- Acquiring, using or possessing criminal property
- Failure to disclose one of the offences listed above, where there are reasonable grounds for knowledge or suspicion
- Doing something that might prejudice an investigation e.g. falsifying a document
- Tipping off a person(s) who is or is suspected of being involved in money laundering in such a way as to reduce the likelihood of or prejudice an investigation

Provided the Council does not undertake activities regulated under the Financial Services and Markets Act 2000, the offences of failure to disclose and tipping off do not apply. However, the Council and its employees and Members remain subject to the remainder of the offences and the full provisions of the Terrorism Act 2000.

The Terrorism Act 2000 made it an offence of money laundering to become concerned in an arrangement relating to the retention or control of property likely to be used for the purposes of terrorism, or resulting from acts of terrorism.

Although the term ‘money laundering’ is generally used to describe the activities of organised crime, for most people it will involve a suspicion that someone they know, or know of, is benefiting financially from dishonest activities.

Potentially very heavy penalties (unlimited fines and imprisonment up to fourteen years) can be handed down to those who are convicted of one of the offences above.

It is important therefore that staff are aware of the rules and procedures that the Council has in place to ensure that they comply with the relevant legislation and approach taken by the Council as set out in this policy.

4. Requirements of the Money Laundering Legislation

The main requirements of the legislation are:

- To appoint a money laundering reporting officer.
- Maintain client identification procedures in certain circumstances.
- Implement a procedure to enable the reporting of suspicions of money laundering.

- Maintain record keeping procedures.

5. The Money Laundering Reporting Officer (MLRO)

The Council has designated the Monitoring Officer as the Money Laundering Reporting Officer (MLRO). She can be contacted on 01827 709266 or by email nicola-hesketh@tamworth.gov.uk.

In the absence of the MLRO or in instances where it is suspected that the MLRO could be involved in suspicious transactions, concerns should be raised with the Section 151 Officer – Executive Director (Finance). They can be contacted on 01827 709241 or by email joanne-goodfellow@tamworth.gov.uk.

6. Possible Signs of Money Laundering

It is not possible to give a definitive list of ways in which to spot money laundering but facts which tend to suggest that something “odd” is happening may be sufficient for a reasonable suspicion of money laundering to arise.

The following are the types of risk factors which *may*, either alone or cumulatively with other factors, suggest the possibility of money laundering activity:

- A new customer with no previous history with the Council.
- A secretive customer: for example one who refuses to provide requested information without a reasonable explanation.
- Concerns about the honesty, integrity or identity of a customer.
- Illogical third party transactions: for example unnecessary routing or receipt of funds from third parties or through third party accounts.
- Involvement of an unconnected third party without logical reason or explanation.
- Payment of substantial sum in cash.
- Overpayments by a customer.
- Absence of an obvious legitimate source of the funds.
- Movement of funds to and from overseas, particularly to and from a higher risk country.
- Where, without reasonable explanation, the size, nature and frequency of transactions or instructions is out of line with normal expectations.
- Cancellation or reversal of an earlier transaction.

7. Due Diligence Procedures

The Money Laundering Regulations require us to carry out “Customer Due Diligence”. Staff should therefore be alert to where Tamworth Borough Council (TBC) may be targeted by individuals trying to launder the proceeds of crime and/or finance terrorist activity.

Avoid alerting anyone dealing with TBC that they have a suspicion that they may be attempting to launder, or have laundered, the proceeds of crime; and to report any suspicions of money laundering. Any suspicions must be reported to the Money Laundering Reporting Officer.

Training will be provided to all relevant staff regarding money laundering to assist them in their awareness of how money laundering could take place and the appropriate method of dealing with this. In effect, any areas where money changes hands could therefore be at risk of money laundering attempts, i.e. Application fees for taxi licences, planning applications, payment of housing benefits etc.

The Council already has procedures in place to limit the amount of cash that it receives, with other payment methods being made available. To ensure however that the system is manageable, if a cash payment of less than £1,000 is received; no identification checks will be needed.

Where the £1,000 limit is exceeded, officers dealing with the matter will need to (1) establish the identity of the individual/company involved (2) seek advice from the MLRO (01827 709266) to ensure that the risk of receiving the proceeds of crime can be minimised.

For individuals, their passport or photo driving licence should be obtained, together with one of the following:

- Utility bills i.e. electricity, water etc. however mobile phone bills are not acceptable
- Mortgage/building society/bank statements
- Credit card statements
- Pension or benefit books

If passport or photo driving licence is not available, then two of the other items listed above will need to be produced.

For companies, a Companies House search should be undertaken to confirm the existence of the company and identify who the directors are. Personal identification should then be obtained for the representatives of the company together with proof of their authority to act on behalf of the company. Care should be taken if it becomes clear that the individual has only recently become a director of the company or if there has been a recent change in the registered office.

For any other type of organisation, for example a sole trader or partnership, personal identification should be obtained for the individuals together with documents indicating their relationship to the organisation.

Copies of any evidence provided in support of the identification of an individual or organisation should be kept on a central file so that it can be referred to later if necessary. Records should be kept for 6 years after the end of the transaction.

8. Land/Property Transactions

The Council has in place procedures to identify customers when Council land or property is being sold without the involvement of independent legal advice. The procedures will require the Council to:

- Identify customers and verify their identity on the basis of documents from a reliable and approved source;
- Identify where applicable the beneficial owner (see below) and take adequate measures on a risk sensitive basis to verify their identity;
- Maintain records of all checks.

“Beneficial owners” are the individuals who ultimately own or control have a legal interest in the asset or the person on whose behalf a transaction or activity is being conducted.

If satisfactory evidence of a customer’s identity at the outset cannot be obtained, then the business transaction CANNOT proceed any further.

All personal data collected will be kept in accordance with the General Data Protection Regulations.

9. Procedure for Reporting Suspicious Transactions

Any suspicious transactions which staff may become aware of in the course of their work must be reported to the MLRO immediately using the Council’s Internal Disclosure Form (see Appendix 2). Failure to make the appropriate report immediately will be regarded as gross misconduct and may result in dismissal without notice or pay in lieu of notice.

The report must include as much detail as possible including:

- Full details of the people involved.
- Full details of the nature of their/your involvement.
- The types of money laundering activity involved.
- The date(s) of such activity/ies.
- Whether the transactions have happened, are ongoing or are imminent.
- Where they took place (if applicable).
- How they were undertaken (if applicable).
- The (likely) amount of money/assets involved.
- Why, exactly, you are suspicious.

Along with any other available information to enable the MLRO to make a sound judgement as to whether there are reasonable grounds for knowledge or suspicion of money laundering and to enable her to prepare a report to the National Crime Agency (NCA), where appropriate. You should also enclose copies of any relevant supporting documentation.

It is imperative, if staff have a suspicion concerning an individual or organisation with which they are dealing, that they do not alert them to that suspicion i.e. that no “tipping off” is done. Staff must, therefore, **not** make them aware that an internal disclosure report may be made. Once the report is made, the cash/cheques/other form of payment from this source should not be banked

until clearance has been received from the MLRO. Such clearance may take up to seven days from the time when the initial report to the MLRO is made.

If the funds are banked in this period without getting clearance from the MLRO that staff members runs the risk of a fine and/ or imprisonment for up to 14 years.

10. Additional Guidance

If you require any additional information or guidance in relation to the contents of this policy and your responsibilities please contact the MLRO. An Aide Memoir has been prepared – Appendix 3, which can be used as a brief reminder to staff of their responsibilities.

11. Consideration of the disclosure by the Money Laundering Reporting Officer

Upon receipt of a report, the MLRO must note the date thereof and acknowledge receipt. She should also advise you of the timescale within which she expects to respond to you.

The MLRO will consider the report and any other available internal information she thinks relevant e.g.

- reviewing other transaction patterns and volumes;
- the length of any business relationship involved;
- the number of any one-off transactions and linked one-off transactions;
- any identification evidence held;

She will also undertake such other reasonable inquiries that are appropriate in order to ensure that all available information is taken into account in deciding whether a report to the NCA is required (such enquiries being made in such a way as to avoid any appearance of tipping off those involved). The MLRO may also need to discuss the report with you.

Once the MLRO has evaluated the report and any other relevant information, she must make a timely determination as to whether:

- there is actual or suspected money laundering taking place; or
- there are reasonable grounds to know or suspect that is the case; and
- there is a requirement to seek consent from the NCA for a particular transaction to proceed.

Where the MLRO does so conclude, then she must disclose the matter as soon as practicable to the NCA on their standard report form and in the prescribed manner, unless she has a reasonable excuse for non-disclosure to the NCA (for example, if you are a lawyer and you wish to claim legal professional privilege for not disclosing the information).

Where the MLRO suspects money laundering but has a reasonable excuse for non-disclosure, then she must note this accordingly; she can then immediately give her consent for any ongoing or imminent transactions to proceed.

In cases where legal professional privilege may apply, the MLRO must liaise with the Section 151 Officer to decide whether there is a reasonable excuse for not reporting the matter to the NCA.

Where consent is required from the NCA for a transaction to proceed, then the transaction(s) in question must not be undertaken or completed until the NCA has specifically given consent, or there is deemed consent through the expiration of the relevant time limits without objection from the NCA.

Where the MLRO concludes that there are no reasonable grounds to suspect money laundering then she shall note this accordingly and give consent for any ongoing or imminent transaction(s) to proceed.

All reports referred to the MLRO and reports made by her to the NCA must be retained by the MLRO in a confidential file kept for that purpose, for a minimum of six years.

The MLRO commits a criminal offence if she knows or suspects, or has reasonable grounds to do so, through a disclosure being made to her, that another person is engaged in money laundering and she does not disclose this as soon as practicable to the NCA.

12. Training

Officers considered likely to be exposed to suspicious situations, will be made aware of these by their senior officer and provided with appropriate training. In effect, any areas where money changes hands could therefore be at risk of money laundering attempts ie. application fees for taxi licences, planning applications, payment of housing benefits etc.

Additionally, all employees and Members will be familiarised with the legal and regulatory requirements relating to money laundering and how they affect both the Council and themselves.

Notwithstanding the paragraphs above, it is the duty of officers and Members to report all suspicious transactions whether they have received their training or not.

13. Conclusions

The Council has put into place a number of arrangements to protect itself from the risk of money laundering. However in the current climate of change there are issues that will increase this risk. Changes in structure, changes in systems and the turnover of staff all contribute to our exposure to the risk of money laundering. To mitigate against this risk the Council will regularly review arrangements.

The Money Laundering Policy provides a framework for preventing and tackling money laundering acts against the Authority. The approval of the Policy by the Audit and Governance Committee and the Council demonstrates the Council's commitment to protecting public funds. Having made this commitment, it is imperative that the MLRO puts in place arrangements for disseminating the Policy and promoting money laundering awareness, throughout the Council. The Council believes that this policy represents a proportionate response to the level of risk it faces from money laundering offences.

14. Review

This policy and associated procedure will be subject to a review every 3 years unless any changes or updates to any of the relevant legislation require that it is undertaken sooner.

Role of the Money Laundering Report Officer – “MLRO”

The duties of the Money Laundering Reporting Officer are:

- To ensure that the Council complies with the requirements of the Money Laundering Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 and the Proceeds of Crime Act 2002.
- To ensure that all relevant staff are aware of and comply with the Council’s Anti-Money Laundering Policy.
- To ensure that the Council properly identifies all third parties dealing with the Council where there is a higher risk of the Council receiving the proceeds of crime and to ensure that copies of any documents taken as proof of evidence are kept on a central file by the Council.
- To ensure that all relevant staff receive training on how to identify, deal with and prevent money laundering.
- To ensure that all necessary disclosures to the National Crime Agency (NCA) are made and that they are made as soon as practically possible after the suspicion has been raised.
- To decide whether a suspicious transaction report requires a disclosure to be made to NCA.
- To liaise with NCA regarding the outcome of the disclosure and update staff accordingly.



MONEY LAUNDERING – INTERNAL REPORTING FORM

Money laundering legislation requires all individuals within the Council to report any knowledge or suspicions that they might have of money laundering (as defined in the Proceeds of Crime Act 2002) to the Council's Money Laundering Reporting Officer. To assist individuals the following pro forma has been developed. Particular circumstances may require different information to be disclosed and this should be fully explained, if applicable.

Instructions for Completion

It is your legal duty and a requirement of your employment with Tamworth Borough Council that you report any suspicion concerning proceeds of crime to:

**Money Laundering Reporting Officer
 Tamworth Borough Council
 Marmion House
 Lichfield Street
 Tamworth
 Staffordshire
 B79 7BZ**

This should be marked **URGENT – **RESTRICTED** TO THE ADDRESSEE ONLY.**

You are also reminded that **“Tipping-Off”** is a criminal offence. You should therefore avoid discussing the content of this report with anyone other than the Money Laundering Reporting Officer.

Date of Report:		Date suspicion first aroused:	
Prepared by: Name & Dept:			
Disclosure Type:	(ie. Connections to crime/drugs/terrorism)		

Main Subject (Person)

Surname:		Forename(s):		Title:	
Date of Birth:		Gender:			
Occupation:		Employer:			
Address: (in full)		Postcode:	Home/Business /Registered	Current/Previous	

Or

Main Subject (Company)

Company Name:		Company No:	
Type of Business:		VAT No:	
Country of Reg:			
Address: (in full)	Postcode:	Home/Business/Registered	Current/Previous

Bank Account Details

Account Name:		Sort Code:	
Opened:		Account No:	
Closed:		Balance:	

Other Information

Any information/evidence held to confirm identification and/or address, ie. Passport/driving licence etc:

Connected Subject Person (if any)

Surname:		Forename(s):		Title:	
Date of Birth:		Gender:			
Occupation:		Employer:			
Address: (in full)		Postcode:	Home/Business /Registered	Current/Previous	

**Or
Connected Subject Company (if any)**

Company Name:		Company No:	
Type of Business:		VAT No:	
Country of Reg:			
Address: (in full)	Postcode:	Home/Business/Registered	Current/Previous

Bank Account Details

Account Name:		Sort Code:	
Opened:		Account No:	
Closed:		Balance:	

Other Information

Any information/evidence held to confirm identification and/or address, ie. Passport/driving licence etc:

Reason for the Suspicion

Please tick any or all of the following which might apply

Drugs	Personal Tax Fraud	Vat Fraud
Crime	Company Tax Fraud	
Immigration	Tobacco/Alcohol Excise Fraud	
Following on from above, please set out the reason for the suspicion:		
Please continue on separate sheet if required		
Names of all other colleagues (principals and staff) who have been involved in the case		

Declaration

The above is an accurate account of the facts that are available to me at the time of making the report. If I become aware of additional and/or changes in the information provided I will disclose these to the Money Laundering Reporting Officer in a timely manner. I am aware of the risks and penalties regarding “tipping-off” or frustrating in any way an investigation of the above or related matters by the authorities.

Signed: _____ Date: _____

Name in Full: _____ Position: _____

For Completion by the MLRO

Date received	
Date acknowledged	
Unique case ref	

Are there reasonable grounds for suspecting money laundering activity?	
If yes, confirm date reported to NCA	
Is consent is required from the NCA to any on-going or imminent transactions which would otherwise be prohibited by the act? If yes, please confirm full details	
Date consent received from NCA	
Date consent given to employee for transaction to proceed	
If there are reasonable grounds to suspect money laundering, but you do not intend to report the matter to the NCA, please set out the reasons for non disclosure	
Date consent given by you to the employee for transaction to proceed. Signed and dated	
This report to be retained for at least 6 years	

APPENDIX 3

MONEY LAUNDERING AVOIDANCE AIDE MEMOIR

1. No member of staff must accept cash of more than £1,000 from any member of the public.
2. If you are offered cash of more than £1,000 you should advise the person offering it to you that it is not Council policy to accept large amounts of cash of more than £1,000 and that you need to obtain guidance from a senior member of staff. You should then contact the Money Laundering Reporting Officer to obtain authorisation to take cash, if appropriate.
3. Any large cash sums should not be banked in the first instance. The Money Laundering Reporting Officer should be contacted to seek guidance as to how to deal with the funds. Forms to report the matter are included in the policy document at Appendix 2.
4. Whilst it is not acceptable to be suspicious of all cash based businesses, anyone whom you know to be associated with such a business should be dealt with using a higher degree of scepticism. If you have any reason to suspect the source of their funds then you should contact the Money Laundering Reporting Officer to discuss your concerns, even if the payment is not received in cash.
5. If you receive a complaint from a member of the public in relation to possible criminal activity being carried out by someone who may be a customer of the Council (i.e. a Council Tax or Business Rates payer, rent payer, licensee etc) you must pass this on to the Money Laundering Reporting Officer.

Community Impact Assessment

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Anti Money Laundering Policy	
Date Conducted	15 th October 2024	
Name of Lead Officer and Service Area	Andrew Wood Audit Manager	
Commissioning Team (if applicable)	N/A	
Director Responsible for project/service area	Jo Goodfellow Acting Executive Director – Finance	
Who are the main stakeholders	Employees and Citizens	
Describe what consultation has been undertaken. Who was involved and what was the outcome	CMT – review of existing policy	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	
	A Strategy/Policy/Procedure	X
	A function, service or project	
What kind of assessment is it? Indicate with an 'x' which applies	New	
	Existing	X
	Being reviewed	

	Being reviewed as a result of budget constraints / End of Contract	

Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

Review of existing policy to bring into line with current best practice.

Who will be affected and how?

Employees and Citizens – updated policy

Are there any other functions, policies or services linked to this impact assessment?

Yes No

If you answered 'Yes', please indicate what they are?

Council's Whistleblowing Policy

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age		<input checked="" type="checkbox"/>	
Disability		<input checked="" type="checkbox"/>	
Gender Reassignment		<input checked="" type="checkbox"/>	
Marriage and Civil Partnership		<input checked="" type="checkbox"/>	
Pregnancy & Maternity		<input checked="" type="checkbox"/>	
Race		<input checked="" type="checkbox"/>	
Religion or belief		<input checked="" type="checkbox"/>	
Sexual orientation		<input checked="" type="checkbox"/>	
Sex		<input checked="" type="checkbox"/>	
Gypsy/Travelling Community		<input checked="" type="checkbox"/>	

Those with caring/dependent responsibilities		X	
Those having an offending past		X	
Children		X	
Vulnerable Adults		X	
Families		X	
Those who are homeless		X	
Those on low income		X	
Those with drug or alcohol problems		X	
Those with mental health issues		X	
Those with physical health issues		X	
Social inclusion Please include refugees and asylum seekers,		X	
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered		X	
Health and Wellbeing		X	
Climate Change		X	

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
<i>None identified</i>		

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
None identified				

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

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Wednesday, 13 November 2024

Report of the Audit Manager

Internal Audit Quarterly Progress Report - Q2 2024/25

Exempt Information

None.

Purpose

To provide Audit & Governance Committee with internal audit's progress report for the period to 30th September 2024.

Recommendations

It is recommended that the Committee notes the following report:

- Internal Audit's Quarterly Progress Report (Q2) (**Appendix 1**)

Executive Summary

The Accounts and Audit Regulations 2015 require councils to undertake an effective internal audit to evaluate effectiveness of their risk management, control and governance processes, taking into account the Public Sector Internal Audit Standards and guidance.

Progress during Quarter 2 of 2024/25 is contained and detailed in **Appendix 1** to this report. The profiled audit plan completion was expected to be 50% of the audit plan by 30th September 2024. During Quarter 2 of 2024/25 we have completed 18% of the overall plan (3 out of 17 audits). A total of 3 audits were deferred and rolled forward from 2023/24 and these as previously reported have been fully completed.

The level of audit coverage in the first two quarters of the financial year have lagged behind the profiled expectations. This has been due to the use of auditor resources on additional work in relation to cash collection at the Assembly Rooms and review of a whistleblowing allegation. This additional work was requested by management and therefore affects the completion of planned audits for the year.

Resources have been reallocated to use BDO as a general audit provider for the remainder of the year and they have now completed the scoping and briefing of their audits with management. Additional work will be allocated for Quarter 4 of this financial year to ensure completion of the 90% of the audit plan by 31st March 2025.

At its meeting on 25th September 2024 the current number of outstanding audit recommendations were discussed. Committee requested a separate analysis of these recommendations and this has been provided as a separate report for discussion by the committee at this meeting.

Audit Opinion

In giving an opinion, contained in **Appendix 1**, it should be noted that assurance can never be absolute. The most that the internal audit service can provide to the Council is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes.

The matters raised in this report are only those which came to our attention during our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required.

In arriving at an opinion, the following matters have been taken into account:

- The outcomes of all audit activity undertaken during the period;
- The effects of any material changes in the organisation's objectives or activities;
- Whether or not any limitations have been placed on the scope of internal audit;
- Whether there have been any resource constraints imposed upon us which may have impinged on our ability to meet the full internal audit needs of the organisation; and
- What proportion of the organisation's internal audit needs have been covered to date.

Options Considered

None applicable.

Resource Implications

None applicable.

Legal/Risk Implications Background

Failure to report would lead to non-compliance with the requirements of the Annual Governance Statement and the Public Sector Internal Audit Standards.

Equalities Implications

See **Appendix 2** Community Impact Assessment, no issues identified.

Environment and Sustainability Implications (including climate change)

None.

Background Information

None.

Report Author

Andrew Wood – Audit Manager
Andrew-wood@tamworth.gov.uk

List of Background Papers

Appendices

Appendix 1 – Internal Audit Quarter Progress Report Q2 2024/25.

Appendix 2 – Community Impact Assessment

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Internal Audit Progress Report (Quarter 2)
October 2024



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- 01 Introduction**
- 02 Internal Audit Work Undertaken**
- 03 Opinion**
- 04 Follow Up**
- 05 Performance of Internal Audit**

Appendices

- 01 Summary of Internal Audit Work Undertaken**
- 02 Assurance and Recommendation Classifications**

In the event of any questions arising from this report please contact Andrew Wood, Audit Manager andrew-wood@tamworth.gov.uk

The matters raised in this report are only those which came to our attention during our internal audit work. Whilst every care has been taken to ensure that the information provided in this report is as accurate as possible, Internal Audit have only been able to base findings on the information and documentation provided and consequently no complete guarantee can be given that this report is necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required. This report was produced solely for the use and benefit of Tamworth Borough Council. The Council accepts no responsibility and disclaims all liability to any third party who purports to use or rely for any reason whatsoever on the report, its contents, conclusions, any extract, reinterpretation, amendment and/or modification.

01 INTRODUCTION

BACKGROUND

This report summarises internal audit activity and performance for the period to 30 September 2024.

SCOPE AND PURPOSE OF INTERNAL AUDIT

The Accounts and Audit Regulations require councils to undertake an effective internal audit to evaluate the effectiveness of their risk management, control and governance processes, taking into account Public Sector Internal Auditing Standards or guidance.

This progress report and opinion forms part of the framework of assurances that is received by the Council and is used to help inform the annual governance statement. Internal audit also has an independent and objective consultancy role to help managers improve risk management, governance and control.

Internal Audit's professional responsibilities as auditors are set out within Public Sector Internal Audit Standards (PSIAS) produced by the Internal Audit Standards Advisory Board produced by the Internal Audit Standards Advisory Board.

ACKNOWLEDGEMENTS

Internal audit is grateful to the directors, heads of service, service managers and other staff throughout the council for their help during the period.

02 INTERNAL AUDIT WORK UNDERTAKEN

The internal audit plan for 2024/25 approved by the Audit & Governance Committee at its meeting in March 2024. The plan was for a total of 17 audits. To the end of quarter 2 2024/2025 we have completed 18% of the audit plan. We have fully completed all of the audits rolled forward from 2023/24. Work has been ongoing on 3 audits during 2024/25 as outlined in the attached **Appendix 1**. An analysis of audit plan completion and indicatively planned audits is shown in the table below;

	Q1	Q2	Q3	Q4
Number of audits allocated per quarter	4	4	5	3
% of plan	25	25	31	19
Cumulative 2024/25 audit plan % completed	12	18		
Completed and finalised 2023/24 audits	3	3		
Audits drafted and awaiting management agreement 2024/25	1	0		

Planned work initially envisaged that by 30 September 2024 we would have completed 50% of the Audit Plan, actual out turn figures show that we have completed 18% of the expected plan. The work undertaken and the progress on each audit is shown in summary and progress made this year is included at **Appendix 01**.

03 OPINION

SCOPE OF THE OPINION

In giving an opinion, it should be noted that assurance can never be absolute. The most that the internal audit service can provide to the Council is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes.

The matters raised in this report are only those which came to our attention during our internal audit work and are not necessarily a comprehensive statement of all the weaknesses that exist, or of all the improvements that may be required. In arriving at an opinion, the following matters have been taken into account:

- The outcomes of all audit activity undertaken during the period.
- The effects of any material changes in the organisation's objectives or activities.
- Whether or not any limitations have been placed on the scope of internal audit.
- Whether there have been any resource constraints imposed upon us which may have impinged on our ability to meet the full internal audit needs of the organisation.
- What proportion of the organisation's internal audit needs have been covered to date.

INTERNAL AUDIT OPINION

On the basis of audit work completed, the Audit Manager’s opinion on the council’s framework of governance, risk management and internal control is reasonable in its overall design and effectiveness. Certain weaknesses and exceptions were highlighted by audit work. These matters have been discussed with management, to whom recommendations have been made. All of these have been, or are in the process of being addressed.

Specific Issues

No specific issues have been highlighted through the work undertaken by internal audit during the period.

Fraud & Irregularity

A whistleblowing allegation was received by Internal Audit during the quarter. Work is being completed on this to ascertain the substance

Consultancy & Advice

The audit team may be requested by managers to undertake consultancy and advice on governance, risk management and internal control matters from time to time. During the period to 30 September

2024 the following work was undertaken:

- Cash collection at the Assembly Rooms; and
- Whistleblowing allegation.

As previously agreed by the Committee, all high priority actions and those arising from no and limited overall assurance reports are followed up by audit, managers confirmation applies to the rest.

The total outstanding actions at the end of Quarter 2 are 66 (9 high, 36 medium, 21 low). During 2024/25 the Audit Manager will continue to hold quarterly meetings with all Assistant Directors to review all outstanding recommendations. This has shown a specific improvement in the implementation and the number of recommendations, over time, has been shown within **Appendix 03**. This shows in tabular graph form the progress regarding the number of outstanding audit recommendations over time.

Priority of Recs	Number of O/S recs – 1 April 2024	Number of recs closed during the period Apr – Sept 2024	Number of additional recs made Apr – Sept 2024	Number of current O/S recs as at 30 Sept 2024	Overall movement of rec numbers during the quarter 2
High	9	4	3	8	-1
Medium	26	9	20	35	+9
Low	12	5	14	21	+0

As at 30 September 2024 there were 8 high priority recommendations outstanding however of these 6 are overdue.

Compliance with professional standards

We employ a risk-based approach in planning and conducting our audit assignments. Internal audit work has been performed in accordance with PSIAS.

Conflicts of interest

There have been no instances during the year which have impacted on internal audit's independence that have led to any declarations of interest.

Performance of Internal Audit

Internal audit quality assurance


To ensure the quality of the work internal audit performs, there is a programme of quality measures which includes:


- Supervision of staff conducting audit work.
- Review of files of working papers and reports by managers.
- Regular meetings of our networking groups, which issue technical and sector updates.

Performance Measures


- Complete 90% of the audit plan - 18% relates to assurance work completed.
- 100% Draft reports issued within 6 weeks of start date – 50%
- 100% Closure meetings conducted within 5 days of completion of audit work – 43%
- 100% draft reports to be issued within 10 working days of closure meeting – 100%
- 100% of all high priority actions are implemented at follow up – N/A
- All no and limited assurance reports have arevised assurance rating of substantial or reasonable on follow up – Not applicable
- Achieve an average customer satisfaction score of 4 or more – 100%

Appendix 01: Summary of Internal Audit Work Undertaken


Assurance	Audit/Corporate Risk	Scope	Indicative Planned Quarter	Assurance Summary	Assurance Opinion
Core Financial Systems	Main Accounting & Budgetary Control CR1, CR6	Risk based review covering the adequacy and effectiveness of controls around the maintenance of main accounting and budgetary control systems.	Q3	Audit fully scoped and briefed with management.	
	Debtors CR1, CR6	Risk based review of Debtors systems to ensure controls in place for the adherence to procurement legislative requirements.	Q2	<p>The debtors system is designed well with adequate controls in place to mitigate against risk. Guidance is available through the Corporate Credit Policy and Financial Guidance which set out the terms of effective credit management and debtor recovery.</p> <p>Payments are correctly credited to customer accounts and instalments plans are adhered to. The suspense account at 1/5/24 is zero. Credit notes and refunds are initially raised and authorised by the service area and are processed by the Revenues Team. Write offs are approved in line with the Corporate Credit Policy.</p> <p>The E-Fins system has the functionality to send reminders for debt recovery. Aged debt reports are produced monthly for budget holders to review and discuss at monthly budget holder meetings.</p> <p>Reconciliations are completed and authorised each month. It was noted through testing that delays in recovery action incurred between 2021 and 2023, this was due to depletion of staff resource and there was a period of time where the Council was out of contract with the enforcement agency. Currently the section is fully staffed with an enforcement agency appointed.</p> <p>Some areas for improvement were noted. The Corporate Credit Policy requires updating to reflect the current recovery action timescales. Accounts that are put on hold should be independently reviewed. Invoices should be raised promptly and all supporting documentation, such as rental agreements should be retained.</p>	 <p>Reasonable Assurance H-0 M-2 L-1</p>
	Bank Reconciliation and Cash Collection CR1, CR6	Risk based review across the authority for all cash collection areas to ensure that robust arrangements are in place for the collection and reconciliation of cash.	Q3	Audit fully scoped and briefed with management.	



	Reactive Repairs CR1, CR4	Risk based review of the Reactive Repairs systems to ensure robust arrangement in place for the allocation and management repairs.	Q4		
Strategic & Operational Risks	Customer Services CR6	Risk based review of the council's arrangements for interactions with members of the public.	Q1		
	CCTV CR3, CR4, CR6	Risk based review of the council's arrangements for CCTV and shared service and controls around ASB and commissioner standards in conjunction with WMCA.	Q1	Audit fully scoped and briefed with management.	
	Food Safety CR3, CR4, CR5	Risk based review of the council's management arrangements for food safety across the Borough.	Q2	<p>The system has some good controls in place to mitigate against key risks.</p> <p>Inspections were completed and an inspection sheet was seen for all. A report was provided to the premise, which included the FHR and actions to address any weaknesses.</p> <p>During Covid, inspections were put on hold and the Council has been addressing the backlog through a recovery plan. Currently there are 137 inspections outstanding of which 128 are risk rated E. These are subject to an alternative enforcement strategy and questionnaires are being issued for the premise to self assess. There are no A or B risk rated premise inspections overdue.</p> <p>A sample of 3 complaints were reviewed and these had all been investigated and liaison with external parties was evident.</p> <p>There is a food service plan 2024/25 in place that provides inspection targets and looks at the previous year's performance. Two performance indicators for 2023/24 are held on Pentana, the performance management system performance. These are current and upto date for quarter 4. A further 3 have been added for 2024/25. The Council reports performance to the FSA every six months. Reports were seen for October 2023 and April 2024.</p>	 Reasonable Assurance H-0 M-2 L-2


			Areas for improvement include for new businesses ensuring a promptness for registering and inspecting. A delay was also noted for some inspections that were overdue. Procedure notes/ policies also need updating.	
Tourism, Town Centre and Shared Prosperity Fund CR3, CR5	Risk based review of Tourism and Town Centre promotion. Additionally review the arrangements for the Shared Prosperity Fund and confirm outputs and deliverables are being achieved.	Q3	Audit fully scoped and briefed with management.	
PR & Comms CR3, CR4, CR5	Risk based review looking at the Council's arrangements for PR and Communications.	Q2		
Scheme of Delegation CR1, CR2, CR3, CR4, CR5, CR6	Risk based review of the Council's controls around the operation of the scheme of delegations to ensure all legislative requirements are met and being consistently applied.	Q4		
VAT CR1, CR3	Risk based review to ensure that all VAT is correctly recorded and reported.	Q4	Audit fully scoped and briefed with management.	
Performance Management CR1, CR2	Risk based review to ensure that performance management system is providing a consistent approach is maintained.	Q1		
Social Housing Regulatory Programme CR3, CR4, CR5	Risk based review looking at key aspects of the council's Social Housing Regulatory Programme to ensure delivery.	Q2		
Events Management CR1, CR4, CR5	Risk based review looking at Events Management across the Borough	Q3	Audit work commenced	

Assurance	Audit	Scope	Planned Quarter	Assurance Summary	Assurance Opinion
ICT	Network & Infrastructure Management and Monitoring	Risk based audit of Network & Infrastructure Management and Monitoring	Q3	Audit briefed and scoped with management.	
	Cyber Security	Risk based audit of Cyber Security	Q1	<p>The audit has identified a number of areas where cyber security controls need to be improved. From a governance perspective, cyber is not included on the IT risk register or the corporate risk register. The IT risk register has a number of legacy risks around information security but they are scored as medium/low risk, whereas in the current climate cyber poses a much greater risk. Cyber should be added to risk registers to ensure it is effectively managed.</p> <p>All users are required to undertake mandatory training on cyber security, which covers key risk areas such as phishing, social engineering and passwords. Currently the training is refreshed every three years and we are recommending that it is reduced to annually given the importance of users remaining aware of their cyber security responsibilities. There is a cyber awareness page on the Intranet and cyber security articles are published in the newsletter. A phishing simulation exercise was performed in March 2024 and the results were positive with only one user clicking on an embedded link.</p> <p>Sophos Central is used for malware protection on clients and servers. The solution is generally well configured, although we identified some scanning policies are not enabled and should therefore be reviewed. We also found that the current scheduled scan of laptops/desktops is configured to run on a Sunday morning when most of them will likely be switched off and not therefore get scanned. The service desk check Sophos on a daily basis for any errors or issues but this is not logged and hence there is no assurance that the check is performed. Emails are scanned for malware in Microsoft 365 and there are plans to install malware protection on mobile devices.</p> <p>Network level administrator access is limited to five members of the IT team. We found they use their administrator accounts for activities which should not be performed using privileged accounts, such as reading</p>	 <p>Limited Assurance H-0 M-2 L-2</p>

				<p>emails and web browsing. There are a number of service accounts running with a higher level of privilege than they need and the management of Windows local administrator accounts can be improved.</p> <p>IT have a vulnerability assessment tool which scans key infrastructure and a sample of clients for security vulnerabilities on a weekly basis. The assessment tool is currently reporting a large number of critical and high risk security vulnerabilities. The IT Health Check in March 2024 also highlighted a significant number of critical and high risk vulnerabilities. We acknowledge that IT are working their way through these vulnerabilities but whilst they exist, they present a significant risk to the Council.</p> <p>The security patching of servers and laptops/desktops is performed monthly. The rollout of security updates was confirmed, although one of the patching tools is reporting a number of computers that have not been patched and they should be followed up. The documented patching policy also needs to be reviewed and updated.</p>	
Governance Fraud & Other Assurance	Disabled Facilities Grant	Assurance Statement	Q3		
	Municipal Charities	Preparation of municipal charities accounts	Q3		
	Counter Fraud	Work to support the mitigation of fraud risk, the provision of fraud awareness training, pro-active fraud exercises and reactive investigations.	Q1-Q4		
	Annual Governance Statement	Production of the AGS	Q1-Q2		

Assurance	Audit	Scope	Planned Quarter	Assurance Summary	Assurance Opinion
	Annual Audit Opinion	Production of the Annual Audit Opinion	Q1-Q2		
	Management and Planning	Management, planning and assurance reporting to CMT and Audit & Governance Committee	Q1-Q4	On-going	
	Ad-hoc / Consultancy / Contingency	Contingency allocation to be utilised upon agreement of the Chief Finance Officer	Q1-Q4	On-going	
	Follow Up of Recommendations				
	IA QAIP and PSIAS	Review of PSIAS standards and review	Q3	Ongoing	
23/24 Finalised Audits	Community Safety	Risk based audit of Community Safety	Q3	<p>Overall, the council has reasonable controls in place for the community safety processes, including the arrangements for the Tamworth Vulnerability Partnership, three-year rolling Community Safety Partnership Plan and the supporting Partnership Workplan.</p> <p>However, we have raised findings relating to:</p> <ol style="list-style-type: none"> 1. The workplan does not have a timeframe for each key project and it is updated internally without a tracker to indicate the date of when the specific action was completed. Our testing of a sample of actions showed the progress report of the workplan is not always accurate based on the RAG ratings assigned. (Medium, Finding 1). 2. The Antisocial behaviour terms of reference is a draft version and has not been updated to reflect structure changes within the Council. (Medium, Finding 2). 3. There are no aims and objectives outlined in the 2023-2026 Community Safety Partnership Plan. (Low, Finding 3). 	 <p>Reasonable Assurance H-0 M-2 L-1</p>

Assurance	Audit	Scope	Planned Quarter	Assurance Summary	Assurance Opinion
	Taxi Licensing	Risk based audit of the Taxi Licensing system	Q3	<p>Overall, the Council has reasonable processes in place to ensure taxi licences are processed in accordance with statutory legislation, including conducting background checks for new applications. Enforcement actions such as a penalty point system are also in place.</p> <p>However, we have raised findings relating to:</p> <ol style="list-style-type: none"> 1. Application evidence – we identified exceptions in the documentation records for driver and vehicle license applications, including not submitting all forms, not obtaining full logbooks and insurance and DBS checks not being updated. (Medium, Finding 1). <p>Enforcement and escalation – the Council does not schedule spot checks to ensure it is able to identify breaches and out of date information in a timely manner and results of checks are not recorded centrally. (Medium, Finding 2).</p>	 <p>Reasonable Assurance H-0 M-2 L-0</p>
	Risk Management	Risk based audit of risk management	Q4	<p>We have reached the overall opinion that the Council have reasonable controls to support risk management. This is because there was generally a sound system of internal control, with some weaknesses which may put the organisation's objectives in this area at risk. There were appropriate reporting structures in place to ensure that the Senior Management Team and the Audit and Governance Committee have oversight of corporate risks however, some control measures were inadequate and not challenged.</p> <p>The Council have acted over the past year to improve risk management, from the review of its Risk Management Policy and Risk Management Strategy, to external training for the Operational Risk Champions Group by Zurich. However, some staff remained unclear on how local risk registers interacted with corporate risks. There were gaps identified in the quality and completion of service area risk registers.</p>	 <p>Reasonable Assurance H-0 M-2 L-1</p>

	<p>Business Continuity</p>	<p>Risk based audit of Business Continuity</p>	<p>Q2</p>	<p>We have reached the overall opinion that the Council have inadequate controls to support business continuity and therefore we have provided a Limited Assurance opinion.</p> <p>BCPs were not regularly reviewed and updated, demonstrated by the fact that 21 of the 22 were still using the previous templates with the Corporate Finance BCP review ongoing at the time of our review. As a result, the BCPs either did not reflect the Council's actual processes or service areas were unaware of their BCPs, which could cause a significant risk to the adequacy of the response to an incident. This was further impacted by the lack of a consistent and thorough training programme for service leads. The Council are currently in the process of refreshing its service area BCPs which could improve the controls.</p> <p>There was a lack of governance structures in place to oversee the implementation of the Council's business continuity arrangements. There was support provided by the CCU but we would expect the Council to have robust internal governance to ensure there is sufficient ownership and monitoring of the BCP arrangements.</p> <p>The risk of 'Inability to deliver economic growth, sustainability and prosperity in the Borough', which 'inadequate business continuity planning' is identified as a causing factor, has a current risk score of 9 on the Council's Corporate Risk Register (with a target risk score of 4). Therefore, if appropriate controls are not implemented to support adequate BCPs and staff training, this could impact the achievement of the Council's objectives.</p>	 <p>Limited Assurance H-1 M-2 L-0</p>
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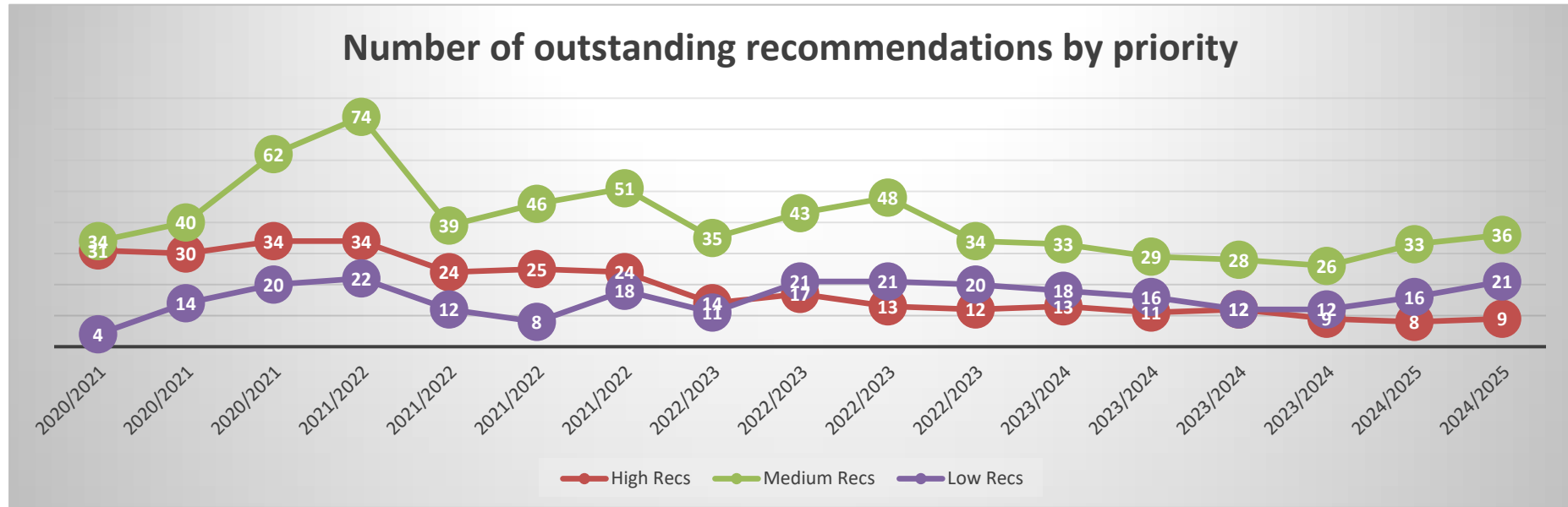
Appendix 02: Assurance and Recommendation Classifications

Overall Assurance Opinion	Definition
Substantial	There is a sound system of internal control designed to achieve the organisation's objectives. The control processes tested are being consistently applied.
Reasonable	While there is a basically sound system of internal control, there are some weaknesses which may put the organisation's objectives in this area at risk. There is a low level of non-compliance with some of the control processes applied.
Limited	Weaknesses in the system of internal controls are such as to put the organisation's objectives in this area at risk. There is a moderate level of non-compliance with some of the control processes applied.
No	Significant weakness in the design and application of controls mean that no assurance can be given that the organisation will meet its objectives in this area.

Recommendation Priority	Definition
High	High priority recommendation representing a fundamental control weakness which exposes the organisation to a high degree of unnecessary risk.
Medium	Medium priority recommendation representing a significant control weakness which exposes the organisation to a moderate degree of unnecessary risk.
Low (Housekeeping)	Low priority (housekeeping) recommendation highlighted opportunities to implement a good or better practice, to add value, improve efficiency of further reduce the organisation's exposure to risk.

Appendix 03: Outstanding Audit Recommendations

The graph below shows the number of outstanding audit recommendations over time.



Financial Year	Quarter	No of Outstanding Recommendations	No of High Recs	No of Medium Recs	No of Low recs
2021/2022	Q1	130	34	74	22
	Q2	75	24	39	12
	Q3	79	25	46	8
	Q4	93	24	51	18
2022/2023	Q1	60	14	35	11
	Q2	81	17	43	21
	Q3	82	13	48	21
	Q4	66	12	34	20
2023/2024	Q1	64	13	33	18
	Q2	56	11	29	16
	Q3	52	12	28	12
	Q4	47	9	26	12
2024/2025	Q1	57	8	33	16
	Q2	64	8	35	21

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Community Impact Assessment

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Delivery of Internal Audit Service	
Date Conducted	16 th October 2024	
Name of Lead Officer and Service Area	Andrew Wood, Audit Manager – Shared Service	
Commissioning Team (if applicable)	N/A	
Director Responsible for project/service area	Jo Goodfellow – Acting Executive Director – Finance	
Who are the main stakeholders	Corporate Management Team and Elected Members	
Describe what consultation has been undertaken. Who was involved and what was the outcome	Corporate Management and Audit & Governance Committee approved annual audit plan for 2024/25.	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	
	A Strategy/Policy/Procedure	
	A function, service or project	X
What kind of assessment is it? Indicate with an 'x' which applies	New	
	Existing	X
	Being reviewed	
	Being reviewed as a result of budget constraints / End of Contract	

Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

To provide an update to Audit & Governance Committee on the completion of the audit plan for 2024/25 as agreed by that committee in March 2024.

Who will be affected and how?

The whole organisation is impacted by the report and its findings; residents, businesses, visitors, voluntary sector and partner organisations.

Are there any other functions, policies or services linked to this impact assessment?

Yes No

If you answered 'Yes', please indicate what they are?

All services and functions are covered by this report.

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Disability		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Gender Reassignment		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Marriage and Civil Partnership		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Pregnancy & Maternity		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Race		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Religion or belief		<input checked="" type="checkbox"/>	No impact as a direct result of this report
Sexual orientation		<input checked="" type="checkbox"/>	No impact as a direct result of this report

Sex		X	No impact as a direct result of this report
Gypsy/Travelling Community		X	No impact as a direct result of this report
Those with caring/dependent responsibilities		X	No impact as a direct result of this report
Those having an offending past		X	No impact as a direct result of this report
Children		X	No impact as a direct result of this report
Vulnerable Adults		X	No impact as a direct result of this report
Families		X	No impact as a direct result of this report
Those who are homeless		X	No impact as a direct result of this report
Those on low income		X	No impact as a direct result of this report
Those with drug or alcohol problems		X	No impact as a direct result of this report
Those with mental health issues		X	No impact as a direct result of this report
Those with physical health issues		X	No impact as a direct result of this report
Social inclusion Please include refugees and asylum seekers,		X	No impact as a direct result of this report
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered		X	No impact as a direct result of this report
Health and Wellbeing		X	No impact as a direct result of this report
Climate Change		X	No impact as a direct result of this report

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
N/A		

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
	Outcomes and Actions entered onto Pentana			

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

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AUDIT AND GOVERNANCE COMMITTEE

Wednesday 13th November 2024

REPORT OF THE ASSISTANT DIRECTOR FINANCE

RISK MANAGEMENT QUARTERLY UPDATE

Purpose

To report on the Risk Management process and progress for Quarter 2 of the 2024/25 financial year.

Recommendations

- That the Committee endorses the Corporate Risk Register.

Executive Summary

One of the functions of the Audit & Governance Committee is to monitor the effectiveness of the Authority's strategic risk management arrangements. This report includes the actions taken to manage those risks and raises issues of concern that may impact the Authority. Corporate risks are identified, managed, and monitored by the Corporate Management Team (CMT) on a quarterly basis.

A copy of the current corporate risk register is attached, as **Appendix 1**. The control measures contained have been developed to reflect the actions in the 3-year corporate plan. The revised risk control measures will ensure the delivery of the strategic objectives, as detailed in the 2022-25 Corporate Plan, and minimise the risk of strategic drift.

CMT held a meeting on 16th September 2024 to review and update the corporate risk register for quarter 2, the following changes have been actioned:

- Risk 4 has been renamed "Inability to meet social housing targets, deliver affordable housing and meet the requirements of the social housing regulations." and split into two sub risks to differentiate between social housing and affordable housing risks.
- A new risk has been added to the corporate risk register (Risk 9) Cyber Security, this is one of the top 5 risks most likely to present a material crisis as per the World Economic Forum Global Risks Report. This will now be monitored as its own risk outside of Information and Data Management.
- Risk control measures have been added or reassigned to all risks, with the exception of risk 1. These changes have been highlighted in yellow in **Appendix 1**.
- All notes have been reviewed and updated.

- The risk control measure status column has been replaced with a progress bar. This will be updated at least quarterly to reflect the stage of completion of the risk control measure.

The current risk scores have been updated by CMT for quarter 2 reporting. The corporate risk profile can be seen in **Appendix 2**. Due to the incidents at the Holiday Inn that took place during quarter 2, Risk 3's (Promoting community resilience and cohesive communities) current risk score has been increased from four to twelve, this and the new cyber security risk introduced in quarter 2 has increased the Council's high-risk profile from 12.5% to 30%.

No issues of note have been raised by the risk champions to include in the corporate risk register. Work continues by Heads of Service to review their operational risks and update Pentana for 2024/25.

The current risk landscape and the five risks most likely to present a material crisis as per the World Economic Forum Global Risks Report reported in the 2023/24 quarter 4 Risk Report remain unchanged:

1. Extreme Weather
2. AI-generated misinformation & disinformation
3. Societal and or political polarisation
4. Cost-of-living crisis.
5. Cyberattacks

These risks are considered in the corporate risk report and will continue to be monitored throughout the year.

Options Considered

None.

Resource Implications

If training needs are identified external support may be required at a cost to the council, the insurance risk fund can be utilised to fund a small amount of training however if not sufficient additional resources may be required.

Legal / Risk Implications

There are no direct legal implications from this report but failure to manage strategic risks could lead to issues in delivering strategic priorities.

Equalities Implications

None.

Environment and Sustainability Implications (including climate change)

None

BACKGROUND INFORMATION

The Authority is committed to embedding the culture of Risk Management as detailed in the Council's Risk Management Strategy.

Risk Management objectives for Tamworth Borough Council are reviewed on a continual basis and reported to CMT and Audit and Governance committee on a quarterly basis.

The Audit & Governance Committee will regularly review the Risk Management Policy and Strategy to ensure their continued relevance to the Borough. They will also assess performance against the aims and objectives.

The council attach great significance to Risk Management, and it is essential that the Protocol is known and understood by all staff within the Authority. It will form part of the induction training and performance reviews for all staff and members and will be monitored as part of the performance review process utilising the corporate performance system

REPORT AUTHOR

Emma Dyer, Operations Accountant, ext. 239

LIST OF BACKGROUND PAPERS

None

APPENDICES

Appendix 1 Qtr.2 Corporate Risk Register

Appendix 2 Qtr.2 Risk Profile

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Corporate Risks Register Summary 2024/25

Generated on: 28 October 2024

Code	Corporate Risk Heading	Status	Status	Current Risk Matrix	Executive Leadership Team
CR2024/25_1	Finance/Financial stability		Alert		Joanne Goodfellow
CR2024/25_2	Governance		OK		Anica Goodwin
CR2024/25_3	Promoting community resilience and cohesive communities		Alert		Rob Barnes

Code	Corporate Risk Heading	Status	Status	Current Risk Matrix	Executive Leadership Team
CR2024/25_4	Inability to meet social housing targets, deliver affordable housing and meet the requirements of the social housing regulations.		Warning		Rob Barnes
CR2024/25_5	Organisational Resilience		Warning		Rob Barnes
CR2024/25_6	Failure to meet climate change/meet net zero targets and plan for major weather impacts		Warning		Rob Barnes
CR2024/25_7	Information and Data Management		Warning		Anica Goodwin

Code	Corporate Risk Heading	Status	Status	Current Risk Matrix	Executive Leadership Team
CR2024/25_8	Inability to deliver economic growth, sustainability and prosperity in the Borough		Warning		Rob Barnes
CR2024/25_9	Cyber Security		Alert		Anica Goodwin

Risk Status	
	Alert
	High Risk
	Warning
	OK
	Unknown

Risk Scoring Key from Risk Management Strategy

Each risk should be analysed for the likelihood it will happen and the impacts if it did happen. This assessment should be made considering controls that are already in place and working effectively. Probability assessment is applied relative to specific timeframes e.g. 'operational' risks will be assessed over a shorter timeframe than 'strategic' risks.

Likelihood Criteria:

- 4 – Very likely
- 3 - Likely
- 2 - Unlikely
- 1 – Very unlikely

The impact should be considered against the relevant objectives - corporate risks should be scored against the council's objectives; directorate risks scored against directorate objectives; service risks scored against service objectives; project risks scored against the objectives of the project. The impact relates to the potential effects on an objective, activity or function which may either be positive or negative.

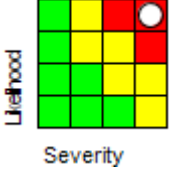
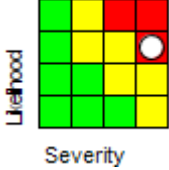
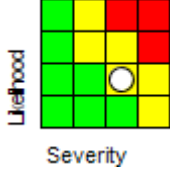
Impact Measure: There are 4 'impact descriptors' as follows:

- 4 - Major
- 3 - Serious
- 2 - Significant
- 1 - Minor

Each identified risk should be assessed at the Original (Inherent), Current (residual) and Target level.

1 Finance/Financial stability 2024/25


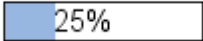
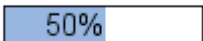
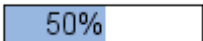
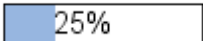
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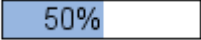
Risk Title	To ensure that the Council is financially sustainable as an organisation		Assigned To	Joanne Goodfellow	
Risk Code	CR2024/25_1.1	Categories	Priority2: The Economy Priority4: Living in Tamworth Priority5: Town Centre		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	4	Severity	4	Severity	3
Likelihood	4	Likelihood	3	Likelihood	2
Risk Score	16	Risk Score	12	Risk Score	6
Original Risk Date	15-May-2023	Date Reviewed	10-Oct-2024	Target Date	28-Feb-2025
Causes	<ul style="list-style-type: none"> * Risk of Austerity cuts/Major variances to the level of grant/subsidy * Uncertainty risk and potential financial disruption from External economic influences - mainly on income levels and current cost / inflationary pressures (and potential contractual cost increases) * Risk potential for poor Procurement practices and weak or ineffective Contract Management meaning VFM not maximised, and TBC exposed to unnecessary liabilities. * Ongoing cost of living crisis and inflationary pressures risk having an impact on the Council's income if households struggle to pay council tax, housing rent payments, etc. If families find themselves in financial 		Consequences	<ul style="list-style-type: none"> • Inability to plan long term due to uncertainty over future Local Government funding. A new Government following the General Election in July 2024 is unlikely to be able to implement anything but a one-year settlement for 2025/26. The planned funding reforms, Fair Funding Review, business rates reset, and the revised business rates retention scheme have been repeatedly deferred and are unlikely before 2026/27 at the earliest. While this means the Council will be able to retain its business rate growth for 2025/26, it also means that the uncertainty continues, making it difficult to plan beyond one year with any certainty. * Unplanned cost reductions / savings requirements * Financial issues leading to the Authority being taken 	

	<p>difficulty it could also increase the demand for our services putting pressure on resources, for example increase in homelessness.</p> <ul style="list-style-type: none"> * Underutilisation of Assets, failure to maximise income * Major town centre facility/source of income failing * New political leadership and inexperienced members * Not being prepared for the new Procurement Act 2023 * Implications of the national living wage and pending pay award * Financial consequences of shared services 		<p>over by Government appointed officers, having to make a request for additional financial support or issuing a S114 notice with the ensuing reputational damage that would entail.</p> <ul style="list-style-type: none"> *Inability to plan investments into assets, assets become costly to maintain and deliver little benefit *Inability to diversify/maximise income streams *Social cohesion erosion could occur as public are adversely impacted by cost-of-living increases – potential for reputational damage for the council if unable to support effectively (or perception). * Procurement challenges which could have reputational and financial implications. Scrutiny from the Government. *Increase in costs from shared services such as Joint Waste, Building Control partnership, Health & Safety. Services shared with other Councils who may also be experiencing financial difficulties or having to increase costs which impacts on TBC.
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<p>Latest Risk Note</p>	<p>A new Government following the General Election in July 2024 is unlikely to be able to implement anything but a one-year settlement for 2025/26. The planned funding reforms, Fair Funding Review, business rates reset, and the revised business rates retention scheme have been repeatedly deferred and are unlikely before 2026/27 at the earliest. While this means the Council will be able to retain its business rate growth for 2025/26, it also means that the uncertainty continues, making it difficult to plan beyond one year with any certainty. The big questions about the future of the funding system remain unaddressed.</p> <p>As part of the Local Government Finance settlement for 2024/25, councils were required to produce a productivity plan, to be submitted to DLUHC and published on the website by 19th July. TBC's productivity plan was reported to Corporate Scrutiny and Cabinet in June 2024 and includes details of how the Council will transform services to make better use of resources, identify ways to reduce wasteful spending within systems and take advantage of technological advances.</p> <p>The report to Corporate Scrutiny and Cabinet also included details of the Financial</p>	<p>14 Oct 2024</p>	<p>Emma Dyer</p>
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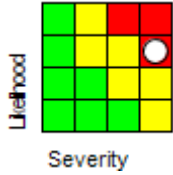
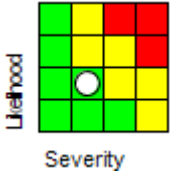
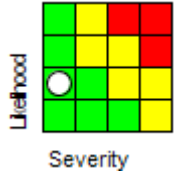
	<p>Stability Plan to support the production of a balanced MTFS and wider organisational improvement, this includes plans to implement targeted zero-based budgeting; budget holder savings reviews; the identification of spend to save projects; and opportunities for service transformation.</p> <p>The ongoing cost of living crisis and inflationary pressures continue to have an impact on the Council's finances. At the same time as rising supply costs there is also the potential for a fall in income as the disposable income of the public reduces due to the pressures on the household purse. This has the potential to affect collection rates for Council Tax and Housing Rents and it is also possible that income to attractions and events will reduce. If families find themselves in financial difficulty it could also increase the demand for our services putting additional pressure on resources, for example increased homelessness, exacerbated by the potential for increased numbers of asylum seekers who may also present as homeless. The situation will continue to be monitored, including through the monthly budget monitoring process.</p> <p>The council will lobby central government and respond to consultations, & LGA surveys when applicable to influence on particular issues in the interest of better local government.</p> <p>Original Risk Score – Impact – 4 Major Likelihood 4 Very Likely. This score was given based on the likelihood of further cuts to government funding; the uncertainty of continuing one year settlement on longer term financial stability; the potential negative impact of business rate funding reform or fairer funding review, whereby funding is likely to be redistributed to unitaries or counties with social care pressures; and the ongoing impact of the cost of living crisis and potential for a significant reduction in income from commercial property.</p> <p>Current Risk Score – Impact 4 Major Likelihood 3 Likely. Some mitigation in terms of the possibility of a three-year settlement from 2026/27 giving us more certainty over the short to medium term.</p> <p>Target Risk Score – Impact 3 Serious Likelihood 2 Unlikely. In recognition that there is understanding that savings will have to be made over the next three years and that we have a financial stability plan which is being implemented with effect from the 2025/26 MTFS, giving us time to manage the process.</p>		
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM1a 2024-25 Annual Fees & Charges Review for 2025/26		28-Feb-2025	Annual review of fees & charges as part of budget process	16-Oct-2024	Joanne Goodfellow
RCM1b 2024-25 Financial Stability Strategy & Productivity Plan		28-Feb-2025	Financial Stability Strategy and budget process including planned savings review. To include ELT/BRG meetings to support members Productivity plan completed and emailed to MHCLG.	10-Oct-2024	Joanne Goodfellow
RCM1c 2024-25 Improvements to procurement processes and contact management in line with new Public Contracts Regulations		31-Mar-2025	Procurement activity reported to CMT on a quarterly basis, CMT briefing from CIPFA on the new Procurement Act attended during quarter 2.	16-Oct-2024	Joanne Goodfellow
RCM1d 2024-25 Monthly Budget Monitoring		28-Feb-2025	Monthly Financial Health check reports to CMT and quarterly to Corporate Scrutiny and Cabinet	16-Oct-2024	Joanne Goodfellow
RCM1e 2024-25 Proactive and targeted cost saving analysis and review of reserve funds		28-Feb-2025	Review of reserves and retained funds to be reported to Cabinet in December and release of unspent funds to be returned to balances. Review of all vacancies & vacancy allowances to identify savings is in	14-Oct-2024	Joanne Goodfellow

			process. Vacancies which have been vacant for 12 weeks or more will be frozen and only be released with approval of ED and HOPS.		
RCM1f 2024-25 Robust asset management strategy and plans in place	 85%	31-Mar-2025	Asset strategy will be going to cabinet in November 24 (RB)	17-Oct-2024	Paul Weston
RCM1g 2024-25 Robust monitoring process for MTFs in place and Quarterly Healthcheck update to Members	 50%	31-Mar-2025	2024/25 Quarterly reporting to CMT, Corporate Scrutiny and Cabinet to include review of latest MTFs position.	16-Oct-2024	Joanne Goodfellow

2 Governance 2024/25

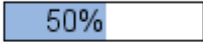
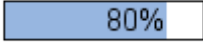
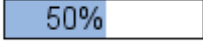
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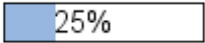
Risk Title	To ensure the Council is fully compliant in all legislative requirements		Assigned To	Anica Goodwin	
Risk Code	CR2024/25_2.1	Categories	Priority2: The Economy Priority1: The Environment Priority3: Infrastructure Priority4: Living in Tamworth Priority: Organisation Priority5: Town Centre		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	4	Severity	2	Severity	1
Likelihood	3	Likelihood	2	Likelihood	2
Risk Score	12	Risk Score	4	Risk Score	2
Original Risk Date	09-Sep-2020	Date Reviewed	10-Oct-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> • Failure of democratic process • Failure to understand or respond adequately to new or changing legislation or regulation • No horizon scanning /awareness of legislative changes • Out of date/unclear policies, procedures and documentation • Lack of capacity to meet changing demands and priorities • Not enough capacity to plan ahead proactively due to reactive nature of business activity 		Consequences	<ul style="list-style-type: none"> • Prosecution of individuals • Adverse impact on Tamworth residents • Increase in costs, Legal and settlement as well as potential rectification of non-compliance • Potential harm to vulnerable persons, employees and commercial relationships • Legal action • Financial penalties • Reputational damage 	

	<ul style="list-style-type: none"> • Decisions made by Members could impact current planned work • Insufficient direction for strategic priorities – may not be fit for purpose which leads to lack of clarity with planning. • Inadequate training • Poor communication • Insufficient resources (budget constraints/understaffing/inadequate technology • Ineffective leadership • Lack of accountability • Weak risk management • Organisational culture is resistant to change • Lack of clarity of roles and responsibilities 		<ul style="list-style-type: none"> • Difficulties quantifying what success of objectives/priorities will look like • Impede work that is underway or already planned • Additional effort if required to manage workloads from already stretched services • Unable to effectively priorities objectives and workloads • Potential to mis-align resources • Breach of statutory duties • Disruption of services • Media scrutiny • Employee morale decline • Increase in staff turnover leading to loss of knowledge & experience • Government intervention • Regulatory enforcement • Loss of partnership working • Restricted funding opportunities • Poor inspection / audit ratings • Increased scrutiny
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Latest Risk Note	Risk measure updated but the risk remains as significant but unlikely. Causes and Consequences reviewed.	14 Oct 2024	Pardeep Kataria
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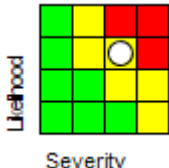
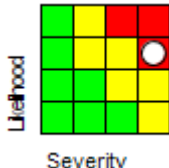
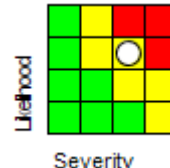
Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM2a 2024-25 Audit and Scrutiny Committees	<div style="border: 1px solid black; width: 80px; height: 20px; background-color: #4f81bd; color: white; display: inline-block; padding: 2px;">50%</div>	31-Mar-2025	Regular meetings in place, training plan for Audit Committee members being developed.	16-Oct-2024	Joanne Goodfellow

			Training session provided August 2024.		
RCM2b 2024-25 Policies and Procedures		31-Mar-2025	AD Policy and Performance recruitment underway Project to compile a central repository of policies and strategies underway	22-Oct-2024	Zoe Wolicki
RCM2c 2024-25 Governance arrangements		31-Mar-2025	Title changed of RCM2c to "Governance arrangements" Annual review of the constitution to audit and governance committee Feb 2025 (and full council May 2025) Clearly defined Roles and responsibilities for statutory roles Member and officer protocol Annual governance statement Committee report templates	14-Oct-2024	Anica Goodwin; Nicola Hesketh
RCM2d 2024-25 Comments, Compliments and Complaints		31-Mar-2025	Ombudsman accepted submission and confirmed compliant Action plan developed to improve compliance with statutory timescales	22-Oct-2024	Zoe Wolicki

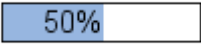

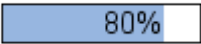
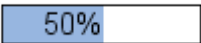
<p>RCM2e 2024-25 Use of insight</p>		<p>31-Mar-2025</p>	<p>Model and systems for data collection and analysis to be developed.</p> <p>System for learning from complaints to be developed improved data analysis around complaints.</p> <p>new AD Policy and Performance to be recruited with a focus on data and insight</p>	<p>14-Oct-2024</p>	<p>Zoe Wolicki</p>
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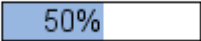

3 Promoting Community Resilience and Cohesive Communities 2024/25

Generated on: 28 October 2024

Risk Title	Failure to understand Borough issues that may lead to community cohesion challenges and community resilience issues affecting Tamworth 'the place'		Assigned To	Rob Barnes; Hannah Peate; Joanne Sands	
Risk Code	CR2024/25_3.1	Categories	Priority1: The Environment Priority4: Living in Tamworth Priority5: Town Centre		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	3	Severity	4	Severity	3
Likelihood	3	Likelihood	3	Likelihood	3
Risk Score	9	Risk Score	12	Risk Score	9
Original Risk Date	09-Sep-2021	Date Reviewed	24-Sep-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> . Lack of strong local leadership (political, community etc) . Failure to provide or signpost support for the most vulnerable in our communities . Lack of communication activity/strategy to engage with local communities . Lack of partnership working and initiatives . Failure to understand local issues . Lack of sustainable approach to community engagement and development which is inclusive and embraces diversity . Poor educational outcomes and job opportunities . Failure to engage with other statutory agencies 		Consequences	<ul style="list-style-type: none"> . May be unable to support the vulnerable leading to wider demands on public services . Wider health and employment inequality . Rise in crime or perception of crime . Increased levels of community tensions . Rise in environmental crime? . Lack of civic pride Lack of aspiration 	

Latest Risk Note	Community recovery fund plan to be formulated - Cabinet proposal 21 November 2024	18 Oct 2024	Joanne Sands
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM3a 2024-25 Wellbeing Strategy		31-Mar-2025	Further work to be done on JSNA now published, Agenda item for the TSP on 14th November	18-Oct-2024	Joanne Sands
RCM3b 2024-25 Commissioning of debt/advice services		31-Oct-2024	Contract in place until March 2027 with citizens advice Mid Mercia. (JS)	15-Oct-2024	Joanne Sands
RCM3b 2024-25 Development of a new equality and diversity strategy		31-Dec-2024	Equality Strategy in draft, consultation with /heads of Service and CMT undertaken. On forward plan for cabinet in November and full council in December for approval.	14-Oct-2024	Zoe Wolicki
RCM3c 2024-25 Quality open spaces		31-Mar-2025	The Street Scene team continue to work hard to delivery quality open spaces for our residents. Staffordshire Wildlife Trust continue to support the range of volunteer networks who so diligently help to maintain the Local Nature Reserves in the borough.	14-Oct-2024	Hannah Peate

RCM3d 2024-25 Strong Community Safety Partnership in place		31-Oct-2024	Updated community safety partnerships in place in place as per the launch of the strategic partnership in Sep 2024 (JS)	15-Oct-2024	Joanne Sands
RCM3d 2024-25 Wide range of arts, sporting and community events		31-Mar-2025	We Love Tamworth events along with bandstand concerts, and the use of the castle grounds by a range of external partners have all taken place within this last quarter. The Comedy Festival attracted a range of both local and nationally well-known comedians.	14-Oct-2024	Hannah Peate
RCM3e 2024-25 Strong partnership working with Staffordshire County Council around strategic issues affecting Tamworth communities.		31-Mar-2025	Continued links to all relevant community safety groups, priority working areas including Directors Health Inequalities group. (JS)	15-Oct-2024	Joanne Sands
RCM3f 2024-25 Support for the Voluntary Sector		31-Mar-2025	Ongoing community and councillor grants schemes in place administered by Staffordshire community foundation. (JS)	15-Oct-2024	Joanne Sands

4 Inability to meet social housing targets and deliver affordable housing 2024/25


Generated on: 28 October 2024


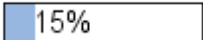
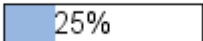


Risk Title	Failure to deliver a new Local Plan by 2031 and failure to deliver affordable housing.		Assigned To	Rob Barnes; Anna Miller; Paul Weston	
Risk Code	CR2024/25_4.1	Categories	Priority2: The Economy Priority1: The Environment Priority3: Infrastructure Priority4: Living in Tamworth Priority5: Town Centre		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	2	Severity	3	Severity	2
Likelihood	3	Likelihood	2	Likelihood	2
Risk Score	6	Risk Score	6	Risk Score	4
Original Risk Date	11-Sep-2024	Date Reviewed	16-Oct-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> Lack of available land Limited finances for investment in affordable housing Lack of effective partnerships with other Social Housing providers Lack of engagement with funders and strategic partners including Homes England Staff resources within the team Lack of experience within the team Inability to procure consultants to collect critical 		Consequences	<ul style="list-style-type: none"> Programme slippage Loss of local control over managing change through the planning applications process Inability to support other corporate priorities e.g. climate change, adaptation and delivery of affordable housing. Missed opportunities to work with partners to deliver infrastructure. Changes to approach lead to challenging policy decision making including using greenbelt land and 	

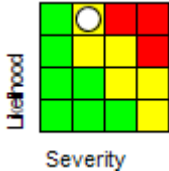
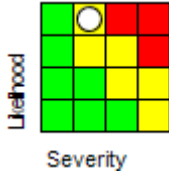
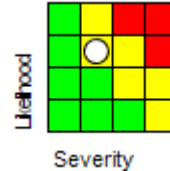
	<p>evidence to support the development of the plan</p> <ul style="list-style-type: none"> • Introduction of new plan-making system by Government • Revisions to National Planning Policy Framework • New administration/political inexperience • Strategies and policies not in line with corporate objectives • Cross-boundary co-operation failure • Lack of engagement from partners • Capacity of PINS and other agencies to deal with demand • Legal Challenge • Insufficient budget • Additional budget is not authorised • Lack of greenfield land for general market housing of which affordable homes provide a component • Delivering affordable homes on brownfield land is challenged by the viability of bringing these sites forwards 		<p>where to locate housing to meet Tamworth's need</p> <ul style="list-style-type: none"> • Inability to meet affordable housing needs and targets • Increase in unmet demand
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Latest Risk Note	<p>The risk around the Local Plan is if the situation arises when the Local Authority doesn't have a Local Plan. This eventuality would only arise if the new Local Plan is not prepared and adopted in advance of the existing Local Plan expiring, the date for which is 2031.</p> <p>The severity associated with the Local Authority not having a Local Plan is 3. The reason it is not higher is because the decision-making default position is to rely on national policies and statements which will provide the up-to-date policy position.</p> <p>In addition, the further a new Local Plan goes through the preparation process, the more weight can be attached to decision making. A plan that's not adopted but has been through examination, for example, would have substantial weight.</p> <p>The Likelihood of not adopting a new Local Plan before the expiry of the current</p>	16 Oct 2024	Pardeep Kataria
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	<p>one is considered to be 1. The reason for this is because a new Local Plan is already under review and there are 7 years until the existing Local Plan expires.</p> <p>Work is underway to increase partnership working with other provider.</p> <p>The Council is also engaging with Home England to open discussions in relation to the opportunities for new affordable housing within the borough.</p>		
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
<p>RCM4.1a 2024-25 Preparation of new Local Plan</p>		31-Mar-2025	<p>The current Local Development Scheme (LDS) does not reflect the delay introduced by the Government with their consultation on the NPPF. A new LDS will be adopted at Cabinet in the new year following the Governments response to the consultation.</p> <p>In accordance with the new transitional arrangements, the Local Plan is on track to meet the Government deadlines.</p> <p>The preparation of the new Local Plan is also on track to be adopted in advance of the expiry of the existing Local Plan.</p>	16-Oct-2024	Anna Miller

RCM4.1b 2024-25 Local Plan Communications Plan		31-Mar-2025	Preparation underway for the plan (AM)	18-Oct-2024	Anna Miller
RCM4.1c 2024-25 Local Plan Monitoring Report		31-Mar-2025	This is prepared annually (AM)	16-Oct-2024	Anna Miller
RCM4.1d 2024-25 Housing Strategy		31-Mar-2025	Trueman Change have been commissioned to undertake this work. (JS)	16-Oct-2024	Joanne Sands
RCM4.1e 2024-25 RCM 2024-25 Management of Assets - deliver Corporate Capital Strategy and Asset Management Strategy actions		31-Mar-2025	Draft strategy with Asset Strategy Steering Group awaiting approval before submission to Cabinet for formal adoption. (PW)	16-Oct-2024	Paul Weston
RCM4.1f 2024-25 Continued coordination with neighbouring authorities to deliver Tamworth's housing need		31-Mar-2025	At a strategic level Local Planning Authorities are expected to discuss strategic planning matters where there are cross-border implications (AM)	16-Oct-2024	Anna Miller

Risk Title	Failure to meet the Regulator Social housing consumer standards		Assigned To	Tina Mustafa	
Risk Code	CR2024/25_4.2	Categories	Priority2: The Economy		
			Priority1: The Environment		
			Priority3: Infrastructure		
			Priority4: Living in Tamworth		
			Priority: Organisation		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
	Severity		2		Severity
Likelihood	4	Likelihood	4	Likelihood	3
Risk Score	8	Risk Score	8	Risk Score	6
Original Risk Date	16-Oct-2024	Date Reviewed	16-Oct-2024	Target Date	31-Mar-2025
Causes	• Capacity to delivery key requirements		Consequences	• Reputational risk • Regulatory intervention by the RSH	

Latest Risk Note	Notes: Detailed risk map forms part of the programme and is reported to the housing board (TM)	16 Oct 2024	Pardeep Kataria
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM4.2a 2024-25 Social Housing Regulatory Programme	<div style="width: 26%; background-color: #4f81bd; height: 15px; display: inline-block;"></div> 26%	31-Mar-2025	There is a comprehensive Social Housing Regulatory Programme organisational wide with external support	18-Oct-2024	Tina Mustafa

			driving a robust and focused improvement plan. Internal audit is set to review December 2024 with mock inspection programmed also (TM)		
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5 Organisational Resilience 2024/25

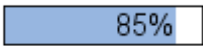
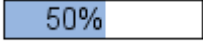
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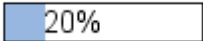
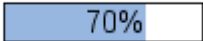
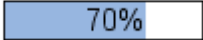
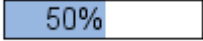
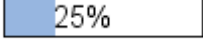
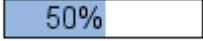

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Risk Title	Failure to provide services or maintain the continued wellbeing and operations within the Borough and be resilient to the unprecedented changes of the future. Lack of resources, capacity and right skills in place to deliver corporate objectives		Assigned To	Rob Barnes	
Risk Code	CR2024/25_5.1	Categories	Priority2: The Economy Priority4: Living in Tamworth Priority: Organisation		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	3	Severity	3	Severity	2
Likelihood	4	Likelihood	3	Likelihood	2
Risk Score	12	Risk Score	9	Risk Score	4
Original Risk Date	09-Sep-2020	Date Reviewed	14-Oct-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> * Significant event outside of our control e.g. major disaster, pandemic etc. * Staff not aware of action to be taken in the event of an emergency/disaster * Lack of sufficient agile operational options * Lack of corporate overview to understand and effectively prioritise workloads, resource allocation and understand where cross-function collaboration stands. * National and local political interference may impede planning and priorities * Executive staff turnover may lead to experience/ 		Consequences	<ul style="list-style-type: none"> * Services not delivered * Reduced 'economic attractiveness' * Loss of reputation * Potential to misalign resources * Governance does not provide the full picture * Negative public perception may damage Council's reputation * Difficulties retaining staff – they may look more external opportunities * Costs of turnover and retraining new starters * Potential for noncompliance with specific roles that 	

	<p>knowledge loss</p> <p>*Inability to drive public engagement and manage increase in demand/ expectations</p> <p>*Lack of succession planning</p> <p>*Aging profile of organisation</p> <p>*Lack of incentive for young people to work for council</p> <p>*Competitive salary market impedes finding right candidates including not enough applicants for vacant roles</p> <p>*Increased workloads may not leave enough capacity to complete all in a timely manner</p> <p>*Lack of capacity to respond to changes regulations due to delays in releasing from the Gov and staff already stretched with current workloads.</p> <p>* Failure to have the organisational structure and a skilled and motivated workforce</p> <p>* Ineffective project management and governance *</p> <p>Ineffective performance management</p>		<p>require accreditation or specific skills</p> <p>*Ability to respond to regulatory/ statutory changes may be inefficient</p> <p>*Working to prioritised work/ leader decisions</p> <p>* Unable to deliver organisational strategies</p> <p>* Increased turnover/absenteeism</p> <p>Service failure leading to ombudsman intervention and increased compensation claims</p> <p>* Decreased staff engagement and satisfaction resulting in poor performance. Impact on health and wellbeing of existing staff</p>
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Latest Risk Note	<p>Updating of the Corporate plan underway to provide strategic direction and objectives. Local plan in development. Peer Challenge will be completed in October, to identify organisational strengths and to support future planning. Emergency planning and business continuity plans in place. A range of other strategic plans are in development including asset management strategy.</p>	21 Oct 2024	Pardeep Kataria
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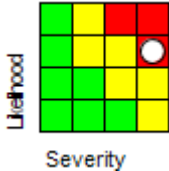
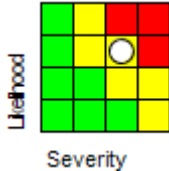
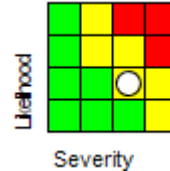
Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM5a 2024-25 Business Continuity Planning		31-Mar-2025	Initial plans have been drafted and work continues to develop through to final completed plan. Once completed testing will be needed.	21-Oct-2024	Paul Weston
RCM5b 2024-25 Delivery of People and Organisational Strategy		31-Mar-2025	Strategy and action plan to be refreshed 2024/25 aligned to the new	14-Oct-2024	Zoe Wolicki

			corporate plan and to take into account learning from corporate peer challenge.		
RCM5c 2024-25 Develop Project management skills for key staff		31-Mar-2025	procurement to take place in Q3	14-Oct-2024	Zoe Wolicki
RCM5d 2024-25 Effective employee relations		31-Mar-2025	Ombudsman accepted submission and confirmed compliant Action plan developed to improve compliance with statutory timescales	22-Oct-2024	Anica Goodwin; Zoe Wolicki
RCM5e 2024-25 Emergency Planning		31-Mar-2025	CCU continue to accelerate the emergency planning improvement plan with routine reports to CMT.	16-Oct-2024	Hamid Khan; Tina Mustafa
RCM5f 2024-25 Monitoring of staff turnover		31-Mar-2025	6 monthly updates to appointments and staffing committee on starters, leavers, transfers, secondments etc. Staffing turnover reported annually on Pentana	22-Oct-2024	Anica Goodwin; Zoe Wolicki
RCM5g 2024-25 Training plan resourced		31-Mar-2025	Head of HR and OD met with ADs to prioritise for service areas Procurement commenced for priority requirements	22-Oct-2024	Zoe Wolicki
RCM5h 2024-25 Workforce plan in place		31-Mar-2025	Plan to be developed by 31 March 2025.	14-Oct-2024	Zoe Wolicki
RCM5i 2024-25 Personal		31-Mar-2025	Over 90% now completed	14-Oct-2024	Zoe Wolicki


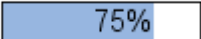
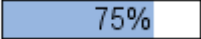
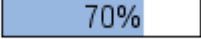
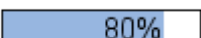

Development Reviews (Annual Appraisals)					
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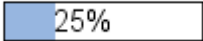
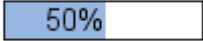
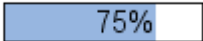
6 Failure to meet climate change ambitions / meet net zero targets and plan for major weather impacts and force majeure 2024/25

Generated on: 28 October 2024

Risk Title	Failure to meet climate change ambitions/ meet net zero targets and plan for major weather impacts		Assigned To	Rob Barnes	
Risk Code	CR2024/25_6.1	Categories	Priority1: The Environment Priority4: Living in Tamworth		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	4	Severity	3	Severity	3
Likelihood	3	Likelihood	3	Likelihood	2
Risk Score	12	Risk Score	9	Risk Score	6
Original Risk Date	19-Aug-2023	Date Reviewed	14-Oct-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> * Staff not aware of action to be taken in the event of an emergency/disaster * Global warming/climate change - severe weather impacts to the Borough * Failure to plan ahead financially for cost implications * Not having the specialist skills in place to develop adverse climate resistant infrastructure * Lack of trained staff to deal with emergencies and over reliance on 3rd parties. * Lack of funding/finance 		Consequences	<ul style="list-style-type: none"> * Life and property put in harms way * Extreme weather conditions/impact on business's & communities * Failure to have a plan for recovery/ repairs/ public support * Impact on vulnerable people Unable to deliver services 	
Latest Risk Note	The Borough Council has declared a climate change emergency and appointed a		21 Oct 2024	Pardeep Kataria	

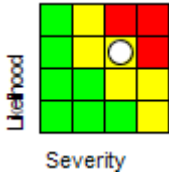
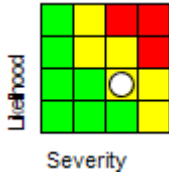
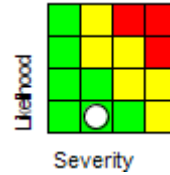
	<p>climate change officer in February 2024 to accelerate efforts towards meeting net zero targets and addressing bad weather events. Following a 2022 baseline report, an action plan and a climate change adaptation plan are being prepared, with workshops held to inform these efforts. Both reports will be available by the end of the year.</p> <p>The climate change officer has also formed a working group and started community engagement. Climate change is now a key consideration in procurement processes. With resources allocated and a better understanding of the tasks ahead, the risk is rated 3 for both severity and likelihood.</p> <p>The Council is also working with the environment agency on flood defence plans.</p>		
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM6a2024-25 Deliver against the Nature Recovery Declaration		31-Mar-2025	The Nature Recovery update report was tabled at ISAG in August with the Biodiversity Consideration being adopted by Cabinet in early October.	14-Oct-2024	Hannah Peate
RCM6b 2024-25 Delivery of a communications plan for climate change		01-Feb-2025	This work is underway and will be completed 24/25	09-Jul-2024	Anna Miller
RCM6c 2024-25 Delivery of Climate Adaptation Plan		01-Feb-2025	Going to scrutiny in December (AM)	15-Oct-2024	Anna Miller
RCM6d 2024-25 Delivery of training and induction into climate change		31-Mar-2025	Ongoing, still working on this action (AM)	15-Oct-2024	Anna Miller
RCM6e 2024-25 Development of infrastructure for acting on Climate Change		31-Mar-2025	No change from last note, Imminent delivery of EV charging hub at Riverdrive (AM)	15-Oct-2024	Anna Miller
RCM6f 2024-25 Embed climate change into		31-Dec-2024	Climate change has gone into Procurement	15-Oct-2024	Anna Miller

procurement processes			processes, awaiting committee. (AM)		
RCM6g 2024-25 Embed climate change into the Local Plan review		31-Mar-2025	Work ongoing with Local plan team (AM)	15-Oct-2024	Anna Miller
RCM6h 2024-25 Severe Weather Emergency Protocol		31-Mar-2025	The protocol used routinely reported to the portfolio holder as part of the winter relief and homelessness prevention actions by TMM and SF (TM)	16-Oct-2024	Hamid Khan; Tina Mustafa
RCM6i 2024-25 Delivery of Climate Change Action Plan		01-Feb-2025	Going to Scrutiny in December (AM)	15-Oct-2024	Anna Miller

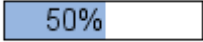
7 Information and Data Management 2024/25

Generated on: 28 October 2024

Risk Title	Effective data management		Assigned To	Anica Goodwin	
Risk Code	CR2024/25_7.1	Categories	Priority2: The Economy Priority1: The Environment Priority3: Infrastructure Priority4: Living in Tamworth Priority: Organisation Priority5: Town Centre		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	3	Severity	3	Severity	2
Likelihood	3	Likelihood	2	Likelihood	1
Risk Score	9	Risk Score	6	Risk Score	2
Original Risk Date	19-Aug-2023	Date Reviewed	10-Oct-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> Isolated systems may not support sharing information Lack of joined up systems Non-user-friendly systems may inhibit competency/confidence Unable to keep up with costs of updating systems System obsolescence 		Consequences	<ul style="list-style-type: none"> Lack of insight from information and data systems could impede effective decision making and affect systems viability Missed or gaps in data could impede tracking progress of work and / or lead to inaccurate decisions being made Not paying for updates to systems could result in vulnerabilities and non-compliance Potential for cyber-attacks Reduced operational efficiency (leading to a lack of 	

			responsiveness, inability to forecast • Financial consequences (e.g. missed revenue opportunities) • Regulatory and compliance risks (i.e. Data breach) • Loss of stakeholder trust • Organisational stagnation (lack of innovation/missed opportunities) • Poor service delivery and impact on reputation • Sanction from regulatory body • Ineffective use of resources
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Latest Risk Note	This risk remains as serious in terms of impact but unlikely. It is anticipated that with the recruitment of the new Assistant Director Policy and Performance that the impact of this risk will be reduced.	14 Oct 2024	Pardeep Kataria
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM7a 2024-25 Data Protection		31-Mar-2025	Policies and procedures in place for data protection. Clearly defined roles and responsibilities. Record of Processing Activity (RoPA) Information Asset register and retention schedule. Internal procedure for incident management and data protection complaints process and associated systems to ensure they remain up to date.	14-Oct-2024	Zoe Wolicki

			Review of Data Protection Impact Assessment process. Review of Privacy notices.		
RCM7b 2024-25 Appointment of new policy & performance director	50%	31-Dec-2024	Scoping current position with regard to data management	14-Oct-2024	Zoe Wolicki

8 Inability to deliver economic growth, sustainability and prosperity in the Borough 2024/25

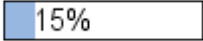
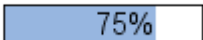
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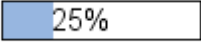
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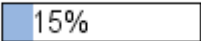
Risk Title	Lack of economic growth, sustainability and prosperity in the Borough at the levels required		Assigned To	Rob Barnes; Anna Miller	
Risk Code	CR2024/25_8.1	Categories	Priority2: The Economy Priority1: The Environment Priority3: Infrastructure Priority4: Living in Tamworth Priority5: Town Centre		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
Severity	4	Severity	3	Severity	2
Likelihood	3	Likelihood	3	Likelihood	2
Risk Score	12	Risk Score	9	Risk Score	4
Original Risk Date	21-Aug-2023	Date Reviewed	14-Oct-2024	Target Date	31-Mar-2025
Causes	<ul style="list-style-type: none"> Lack of investment in the Borough General downturn in the economy due to factors beyond our control Failure to recognise economic changes The uncertainty and financial disruption from External Economic influences and current cost / inflationary pressures (and potential contractual cost increases) Changes in Job market Inadequate business continuity plans 		Consequences	<ul style="list-style-type: none"> Economic prosperity declines Deprivation Reduced Business Rates income Tamworth not seen as a positive place to live or invest in Lack of economic and commercial growth Unable to recruit key/essential skills Failure to deliver project outcomes Failure to deliver corporate plan 	

	<p>* Lack of economic development strategy * Reliance on small number large income generators/operators/town centre facilities* community cohesion and a negative perception of Tamworth as a place to do business</p> <p>*Uncertainty around the opportunities/risks associated with devolution deal proposals.</p> <ul style="list-style-type: none"> • 		<p>* Government intervention * Increased customer dissatisfaction * Unrealised benefits *Negative public perception may damage Council's reputation</p>
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Latest Risk Note	<p>The Council is commissioning a town centre regeneration strategy which includes engagement with elected members and others to develop a vision of the future town centre.</p> <p>In addition, the council is commissioning an economic development strategy which will be completed by end of March 2025.</p>	21 Oct 2024	Pardeep Kataria
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM8a 2024-25 3A - Local plan to improve infrastructure, evening economy and transport links		31-Mar-2025	Work ongoing for local plan preparation for draft plan. (AM)	15-Oct-2024	Anna Miller
RCM8b 2024-25 Delivery of Future High Streets Fund		31-Mar-2025	<p>Peel Cafe is well advanced with Nationwide completing the fit out works in December.</p> <p>TEC 2 is progressing well with likely TBC occupation from early 2025.</p> <p>The Flex building has started following</p>	15-Oct-2024	Anna Miller

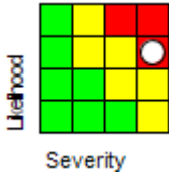
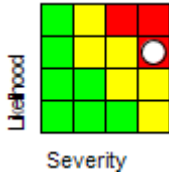
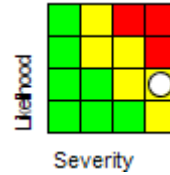
			<p>demolition with a likely TBC occupation Spring 2025.</p> <p>The remaining projects are all now in contract.</p> <p>Enabling works have been completed for the Market Street properties. (AM)</p>		
RCM8c 2024-25 Delivery of Gungate project (North and South)		31-Mar-2025	<p>Acquisition of Gungate North likely by the end of 2024. Discussions have resumed with ATIK following a change of ownership.</p> <p>On Gungate South there has been developer interest in the site.(AM)</p>	15-Oct-2024	Anna Miller
RCM8d 2024-25 Development of business initiatives to promote start up and growth		31-Mar-2025	<p>The Borough Council has a business grant combined with UKSPF funding to deliver town centre activities that increase footfall across the town and support the town centre economy.</p> <p>The FHSF is delivering a project called the FLEX which will be entrepreneurial space/pop up space that can be flexibly managed, creating conditions for new businesses to try and</p>	15-Oct-2024	Anna Miller

			establish themselves in the town. (AM)		
RCM8e 2024-25 Management of Assets - deliver Corporate Capital Strategy and Asset Management Strategy actions		31-Mar-2025	Draft strategy with Asset Strategy Steering Group awaiting approval before submission to Cabinet for formal adoption on the 21st of November 2024	21-Oct-2024	Paul Weston
RCM8f 2024-25 Economic Development Strategy		31-Mar-2025	This workstream is out to tender, due November 24 (AM)	15-Oct-2024	Anna Miller

9 Cyber Security 2024/25


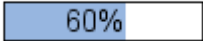
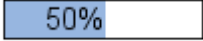
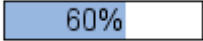
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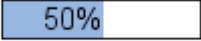
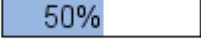
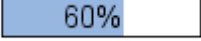
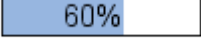
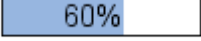
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Risk Title	To ensure the council is resilient against Cyber security threats		Assigned To	Anica Goodwin	
Risk Code	CR2024/25_9.1	Categories	Priority2: The Economy		
			Priority1: The Environment		
			Priority3: Infrastructure		
			Priority4: Living in Tamworth		
			Priority: Organisation		
Original Matrix		Current Risk Matrix		Target Risk Matrix	
	Severity		4		Severity
Likelihood	3	Likelihood	3	Likelihood	2
Risk Score	12	Risk Score	12	Risk Score	8
Original Risk Date	10-Oct-2024	Date Reviewed	10-Oct-2024	Target Date	10-Oct-2025
Causes	<ul style="list-style-type: none"> • Network compromise/external attack • Denial of service • Data Leaks • Credential compromise • Cloud supplier compromised • Malware/phishing attack • Lost device/mobile media • Insider Threat (staff) 		Consequences	<ul style="list-style-type: none"> • Loss of sensitive data, financial loss, reputational damage. • Risk to confidentiality and integrity of data (data breach). • Data encryption/corruption causing operational disruption. • Unauthorized access to data. • Service downtime. • Personal harm. 	

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Latest Risk Note	This risk remains high given the current climate, macro events, frequency of cyber-attacks, and the evolving threat landscape. The impact also remains high given the reliance on technology and information to provide statutory services. There are robust cybersecurity and data management measures, processes and procedures in place along with associated controls (data and budgetary), but the risk remains likely given the current climate. (GY)	11 Oct 2024	Pardeep Kataria
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Linked RCM Action	Progress	Due date	Latest note	Latest note date	Action AD
RCM9a 2024-25 Regular, mandatory cyber security training and cyber security awareness updates to Infozone		31-Mar-2025	Cyber security training updated and issued annually. Cyber Security awareness updated on InfoZone bi-monthly using various trusted sources	11-Oct-2024	Zoe Wolicki
RCM9b 2024-25 Network penetration testing, proactive vulnerability management policy and processes and Phishing tests. PSN Compliance		31-Mar-2025	Pen test completed April 24, associated mitigation approaching completion. Patch management processes in place. PSN compliance on-going.	11-Oct-2024	Zoe Wolicki
RCM9c 2024-25 Network backups, disaster recovery testing		31-Mar-2025	Network backups performed nightly. Selective backup recovery testing performed monthly	11-Oct-2024	Zoe Wolicki
RCM9d 2024-25 Strong password policy with multi		31-Mar-2025	Password policy updated following cyber audit. MFA	11-Oct-2024	Zoe Wolicki

factor authentication enforced where necessary			enforced for all remote connections		
RCM9e 2024-25 Anti-virus/anti-malware software in place with regular signature updates		31-Mar-2025	AV/anti-malware installed on all endpoints; updates applied immediately as available	11-Oct-2024	Zoe Wolicki
RCM9f 2024-25 Appropriate access controls with least privilege approach, regular access reviews		31-Mar-2025	Access controls for applications and data in place based on least privilege	11-Oct-2024	Zoe Wolicki
RCM9g 2024-25 Utilise NCSC Active Cyber Defence tools		31-Mar-2025	TBC signed up to all NCSC cyber defence services	11-Oct-2024	Zoe Wolicki
RCM9h 2024-25 Information security policies, distributed to all staff and DR/BC/cyber incident response plans in place		31-Dec-2024	All associated policies in place, up to date and distributed	11-Oct-2024	Zoe Wolicki
RCM9i 2024-25 Physical security controls in place for data centre access		31-Mar-2025	Restricted access in place for data centre to ICT technical staff only	11-Oct-2024	Zoe Wolicki

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Tamworth Borough Councils 2024/25 Risk Profile

Key to Corporate Risk Headings

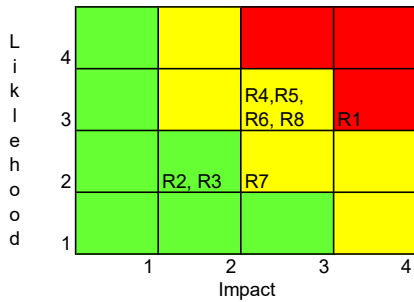
- R1 Finance/Financial stability
- R2 Governance
- R3 Promoting community resilience and cohesive communities
- R4 Inability to meet social housing targets, deliver affordable housing and meet the requirements of the social housing regulations.
- R5 Organisational Resilience
- R6 Failure to meet climate change ambitions/ meet net zero targets and plan for major weather impacts
- R7 Information and Data Management
- R8 Inability to deliver economic growth, sustainability and prosperity in the Borough
- R9 Cyber Security

Key to Likelihood & Impact Scoring

- Likelihood Criteria
- 4 – Very likely
 - 3 - Likely
 - 2 - Unlikely
 - 1 – Very unlikely

- Impact Measure
- 4 - Major
 - 3 - Serious
 - 2 - Significant
 - 1 - Minor

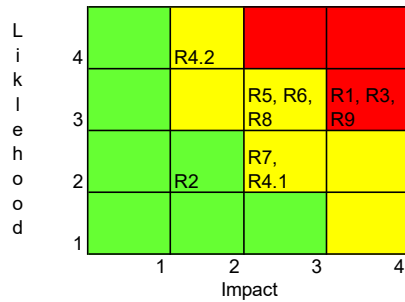
Quarter 1 Risk Summary



Risk profile

High risk	12.5%
Medium risk	62.5%
Low Risk	25.0%

Quarter 2 Risk Summary



Risk profile

High risk	30%
Medium risk	60%
Low Risk	10%

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Community Impact Assessment

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	2024/25 Qtr. 2 Corporate Risk Reporting to Audit & Governance.	
Date Conducted	28/10/2024	
Name of Lead Officer and Service Area	Jo Goodfellow, ED Finance	
Commissioning Team (if applicable)		
Director Responsible for project/service area	Jo Goodfellow, ED Finance	
Who are the main stakeholders	Corporate Management Team (CMT) and Elected Members	
Describe what consultation has been undertaken. Who was involved and what was the outcome	Corporate Management Team have reviewed the Qtr.2 Corporate Risk Report and provided updates.	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	<input type="checkbox"/>
	A Strategy/Policy/Procedure	X
	A function, service or project	<input type="checkbox"/>
What kind of assessment is it? Indicate with an 'x' which applies	New	<input type="checkbox"/>
	Existing	<input type="checkbox"/>
	Being reviewed	<input type="checkbox"/>
	Being reviewed as a result of budget constraints / End of Contract	<input type="checkbox"/>

Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

To submit the Qtr. 2 Corporate Risk Report to the audit & governance committee for endorsement.

Who will be affected and how?

If risk is not managed effectively all stakeholders could be affected.

Are there any other functions, policies or services linked to this impact assessment?

Yes

No

If you answered 'Yes', please indicate what they are?

Risk Management Strategy

All services/ functions are covered by this report

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Gender Reassignment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Marriage and Civil Partnership	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Pregnancy & Maternity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Race	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Religion or belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Sexual orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Sex	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Gypsy/Travelling Community	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Those with caring/dependent responsibilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report

Those having an offending past	<input type="checkbox"/>	X	No impact as a direct result of this report
Children	<input type="checkbox"/>	X	No impact as a direct result of this report
Vulnerable Adults	<input type="checkbox"/>	X	No impact as a direct result of this report
Families	<input type="checkbox"/>	X	No impact as a direct result of this report
Those who are homeless	<input type="checkbox"/>	X	No impact as a direct result of this report
Those on low income	<input type="checkbox"/>	X	No impact as a direct result of this report
Those with drug or alcohol problems	<input type="checkbox"/>	X	No impact as a direct result of this report
Those with mental health issues	<input type="checkbox"/>	X	No impact as a direct result of this report
Those with physical health issues	<input type="checkbox"/>	X	No impact as a direct result of this report
Social inclusion Please include refugees and asylum seekers,	<input type="checkbox"/>	X	No impact as a direct result of this report
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered	<input type="checkbox"/>	X	No impact as a direct result of this report
Health and Wellbeing	<input type="checkbox"/>	X	No impact as a direct result of this report
Climate Change	<input type="checkbox"/>	X	No impact as a direct result of this report

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
N/A		

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
N/A	Outcomes and Actions entered onto Pentana			

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

AUDIT & GOVERNANCE COMMITTEE

13th November 2024

Report of the Interim Executive Director Finance

FINANCIAL WAIVERS TO 30th SEPTEMBER 2024

EXEMPT INFORMATION

None

PURPOSE

For the Audit & Governance Committee to note the waivers to the Council's procurement processes as set out in Financial Guidance for the period 1st July to 30th September 2024, for the reasons as set out, and to advise if any further information is required.

RECOMMENDATION

That the Committee note the waivers approved to the procurement processes as set out in the Council's Financial Guidance.

EXECUTIVE SUMMARY

As part of the core functions under terms of reference, this Committee is empowered to maintain an overview of the Council's Financial Guidance. One of the improvement recommendations included within Grant Thornton's Auditor's Annual Report for 2022/23, was that the Council should report on the number and value of waivers to Audit & Governance Committee on a quarterly basis. This is the second such report this financial year, covering the period from 1st July to 30th September 2024.

The contracts procedure rules state that best value and value for money must be sought in all procurement activities. Financial Guidance requires that quotations/estimates must be obtained for spend of up to £5,000, these may be verbal for values to £1,999, but any spend between £2,000 and £4,999 must have a minimum of 3 written quotations/estimates.

Any spend of £5,000 and above should be conducted using either the Quick Quote or tender process, and be tendered electronically using the Council's e-tendering system In-Tend. This is a secure portal which suppliers can use to view and respond to any advertised tenders and contracts, which also links to the Government's Contracts Finder and Find a Tender services as required by Public Contracts Regulations for tenders above a certain threshold. The In-Tend system is used for the initial advertisement, expressions of interest, invitation to tender/quote, submission of tenders/quotes by prospective suppliers, opening of tenders/quotations and contract award.

The requirements of Public Contract Regulations **must** be followed in all cases where the anticipated value of a contract is close to or exceeds the thresholds set out in legislation. The current thresholds (incl VAT) are as follows:-

Thresholds	Supplies & Services	Works/Concessions
Contract Value	£214,904	£5,372,609

For contracts below these values, there may be occasions where it is not considered to be appropriate or best value for money to follow the Council's procurement processes, for example, where there is only one supplier for a particular service, or where a company is already on site. As set out in Financial Guidance, in these circumstances the Executive Director Finance has authority to waive compliance and limits where necessary.

The waivers approved during the second quarter are set out in Appendix 1.

RESOURCE IMPLICATIONS

None as a direct result of this report.

LEGAL/RISK IMPLICATIONS

None as a direct result of this report.

EQUALITIES IMPLICATIONS

None as a direct result of this report

ENVIRONMENT AND SUSTAINABILITY IMPLICATIONS (INCLUDING CLIMATE CHANGE)

None as a direct result of this report

BACKGROUND INFORMATION

None

REPORT AUTHOR

If Members require further information, please contact Jo Goodfellow, Interim Executive Director Finance on ext 241.

LIST OF BACKGROUND PAPERS

None

APPENDICES

Appendix 1 Financial Waivers Approved 1st July – 30th September 2024.

APPENDIX 1

FINANCIAL WAIVERS 1ST JULY – 30TH SEPTEMBER 2024

Ref	Date	Service Area	Amount	Company/Contract	Reason
2024/08	01/07/2024	Castle	£30,000	Motionhouse Production Company	Grant from GBSLEP received for Aethelfest Anglo Saxon Heritage Festival project. Grant conditions require that we work with Arts Council NPO Motion House specifically for this purpose.
2024/09	23/07/2024	Streetscene	£2,581	Richard C Bircher	Continuation of lease rental agreement for Forst Woodchipper for a further year, pending tender process for new chippers planned to be delivered May 2025.
2024/10	31/07/2024	Finance	£33,000	Link Asset Management	IFRS 16 leasing software provided by Link Asset Services. As part of the Treasury Management support services contract recently re-tendered and awarded to Link, they already provide leasing advice and hold the data on the leases which they have arranged. The purchase of the software supports implementation of the accounting standard and will reduce in-house resources required to input/calculate the required data.
2024/11	01/08/2024	Streetscene	£6,400	Daysfleet	Addition of a 3.5t flatbed tipper with tail lift to be added to existing lease agreement with Daysfleet. Daysfleet have already supplied 26 vehicles through a framework, economies of scale and less administrative burden to keep all vehicle leases together.
2024/12	01/08/2024	Housing	£11,412	Open View	Existing supplier required to replace equipment for door entry fob system as needs to be compatible with existing high rise door entry system
2024/13	30/08/2024	Growth & Regeneration	£56,900	Cadence Projects	Continuation of contract with experienced FHSF Programme Manager to run to May 2025 in line with expected programme timetable, not feasible or practical to bring in another Programme Manager at this stage of the project.
2024/14	30/09/2024	Disabled Facilities Adaptations	Max £370k up to 5 years	OT Support and Training	Approved by SoD on ModGov 30 September - direct award for support and training - EXEMPT REPORT. Max contract value includes grant amounts payable to client.

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Wednesday, 13 November 2024

Report of the Leader of the Council / Monitoring Officer

Member Enquiries Update

Exempt Information

None

Purpose

This report provides an overview of member enquiries received by the Information Governance team for the period 1 April 2024 – 30 September 2024. It aims to update members on the member enquiry process, the types of enquiries received, the response times and the future developments identified to improve the process.

Recommendations

It is recommended that committee:

1. Endorse the contents of the report.
2. Approve the activities detailed in the future developments section of this report for implementation.

Introduction

Member Enquiry Process

The council uses the member enquiry process to facilitate issues raised by elected members. This process involves several stages, which may vary depending on the nature of the enquiry received. The stages are as follows:

1. **Enquiry Submission:** An elected member raises an enquiry.
2. **Initial Review:** The Information Governance team reviews the enquiry to ensure it is sent to the relevant team and meets data protection requirements. This includes adherence to the [Authority to Release process](#), which was reviewed and endorsed by the Cabinet in 2023.
3. **Logging and Acknowledgement by central team:** Enquiries are logged, and an acknowledgement sent to the elected member within 5 working days.
4. **Forwarding to Relevant Service Area:** The enquiry is sent to the appropriate service area for further review and to provide a response to the elected member within 10 working days.
5. **Response:** The relevant service area is requested to provide a direct response to the elected member, with a copy sent to the Information Governance team for records.
6. **Closure:** When a response is received, the record is closed.

Consent from constituents

A local authority generally does not need an individual's consent to share their personal information with an elected member, provided the Authority to Release (ATR) requirements are satisfied. However, both the Elected Member and the Council must demonstrate compliance with Data Protection principles. As a local authority, we are responsible for the

information we provide to Elected Members and for ensuring they understand how it can be used.

Obtaining consent provides evidence of compliance and supports lawful data practices, ensuring data minimisation. Relying solely on implied or verbal consent could expose the Council or the Elected Member to complaints of inadequate data handling, potentially initiating an ICO investigation.

When an enquiry is received and additional information is needed, this is communicated to the Elected Member. For instance, if personal information about a constituent is requested, the Information Governance team will verify the following:

- The elected member represents the ward where the individual resides.
- The elected member clearly states they are representing the individual in any request for their personal information to the local authority and
- The information is necessary to address the individual’s complaint.

All requests received by Elected Members are forwarded to the relevant service area. If data protection requirements have not been met (e.g. the team is waiting for the authority to release form), a more generic response is provided to prevent delays in supporting our customers, residents, and tenants.

Enquiries which fall under another process

When enquiries are received that should follow a different process, the Elected Member is informed accordingly. For example, if the Information Governance team receives a report of fly-tipping they will forward the request to the Customer Service team for recording and a reference number provided to the Elected Member. The Elected Member’s enquiry is closed, and the fly-tipping process is initiated and followed.

Benefits of a centralised process

Centralising the process has created a single point of contact for Elected Members to raise issues. This ensures that all issues are recorded, forwarded to the relevant team, and monitored until completion. This approach supports Elected Members by ensuring that requests are addressed in a timely manner.

Data Analysis

For the period 1 April 2024 – 30 September 2024 the Information Governance team recorded 293 member enquiries, a summary of which can be found below.

TEAM	Count
Adaptions	3
ASB	10
Assembly Rooms	1
Car Parks	1
Castle	4
CCTV	2
Commercial Assets	8
Council Tax & Revenues	1
Customer Services	5
Democratic Services	1

Environmental Health	15
Housing Repairs	21
Housing Repairs Gas	1
Housing Repairs Planned	3
Housing Solutions	38
ICT	2
Joint Waste	8
Land Charges / Legal (Right to Buy)	1
Partnerships	4
Planning & Development	5
Private Sector	4
SCC	16
Street Scene	121
Tenancy Management	18
TOTAL	293

The service areas which received the highest amount of member enquires is Street Scene. This followed by Housing Solutions, Housing Repairs, Tenancy Management and enquires relating to a service within the remit of Staffordshire County Council.

Of the 293 enquires received, 292 were passed to the relevant service area within 5 working days, this equates to a percentage of 99.66%, and 231 of the member enquiries received are recorded as closed. This equates to a percentage of 78.84%.

Future development

Having a centralised team to manage member enquiries enables effective data analysis and the identification of potential improvements. While the process generally functions well, it is acknowledged and the Information Governance team have identified several areas for enhancement, and these include, but are not limited to:

- Reviewing the process to ensure it remains fit for purpose.
- Conducting a questionnaire for members and officers to gather feedback on the process and understand their needs.
- Evaluating the ICT system to better support the case management of member enquiries.
- Introducing guidance for both members and officers.
- Recording reasons for member enquiries enabling service improvements to be identified for recurring themes.

Resource Implications

There are no finance or human resource implications as a result of this report.

Legal/Risk Implications

There are no direct risks from this report.

Equalities Implications

A CIA has been completed and is available at **Appendix 1**

Environment and Sustainability Implications (including climate change)

There are no environmental or sustainability implications as a result of this report.

Report Author

Nicola Hesketh – Information Governance Manager (Monitoring Officer / Data Protection Officer)

List of Background Papers

None

Appendices

Appendix 1 – Community Impact Assessment (CIA)

Community Impact Assessment

Part 1 – Details	
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Update on the Member Enquiry process
Date Conducted	25 October 2024
Name of Lead Officer and Service Area	Nicola Hesketh – Information Governance Manager (DPO/Monitoring Officer)
Commissioning Team (if applicable)	N/A
Director Responsible for project/service area	Anica Goodwin - Executive Director Organisation
Who are the main stakeholders	Elected Members
Describe what consultation has been undertaken. Who was involved and what was the outcome	None. This report is an update on the process for member enquiries.
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service <input type="checkbox"/>
	A Procedure <input checked="" type="checkbox"/>
	A function, service or project <input type="checkbox"/>
What kind of assessment is it? Indicate with an 'x' which applies	New <input type="checkbox"/>
	Existing <input checked="" type="checkbox"/>
	Being reviewed <input type="checkbox"/>
	Being reviewed as a result of budget constraints / End of Contract <input type="checkbox"/>

Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

To provide Audit & Governance Committee with an update on the member enquiry process.

Who will be affected and how?

All of the organisation is impacted by the report and its findings; residents, businesses, visitors, voluntary sector and partner organisations.

Are there any other functions, policies or services linked to this impact assessment?

Yes x No

If you answered 'Yes', please indicate what they are?

All services are potentially covered by this report.

Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation)
Age	<input type="checkbox"/>	x	No impact as a direct result of this report
Disability	<input type="checkbox"/>	x	No impact as a direct result of this report
Gender Reassignment	<input type="checkbox"/>	x	No impact as a direct result of this report
Marriage and Civil Partnership	<input type="checkbox"/>	X	No impact as a direct result of this report
Pregnancy & Maternity	<input type="checkbox"/>	X	No impact as a direct result of this report
Race	<input type="checkbox"/>	X	No impact as a direct result of this report
Religion or belief	<input type="checkbox"/>	X	No impact as a direct result of this report
Sexual orientation	<input type="checkbox"/>	X	No impact as a direct result of this report
Sex	<input type="checkbox"/>	X	No impact as a direct result of this report
Gypsy/Travelling Community	<input type="checkbox"/>	X	No impact as a direct result of this report

Those with caring/dependent responsibilities	<input type="checkbox"/>	X	No impact as a direct result of this report
Those having an offending past	<input type="checkbox"/>	X	No impact as a direct result of this report
Children	<input type="checkbox"/>	X	No impact as a direct result of this report
Vulnerable Adults	<input type="checkbox"/>	X	No impact as a direct result of this report
Families	<input type="checkbox"/>	X	No impact as a direct result of this report
Those who are homeless	<input type="checkbox"/>	X	No impact as a direct result of this report
Those on low income	<input type="checkbox"/>	X	No impact as a direct result of this report
Those with drug or alcohol problems	<input type="checkbox"/>	X	No impact as a direct result of this report
Those with mental health issues	<input type="checkbox"/>	X	No impact as a direct result of this report
Those with physical health issues	<input type="checkbox"/>	X	No impact as a direct result of this report
Social inclusion Please include refugees and asylum seekers,	<input type="checkbox"/>	X	No impact as a direct result of this report
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered	<input type="checkbox"/>	X	No impact as a direct result of this report
Health and Wellbeing	<input type="checkbox"/>	X	No impact as a direct result of this report
Climate Change	<input type="checkbox"/>	X	No impact as a direct result of this report

Part 4 – Risk Assessment

From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations

This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.

Impact Area	Details of the Impact	Action to reduce risk
<i>Eg: Families</i>	<i>Families no longer supported which may lead to a reduced standard of living & subsequent health issues</i>	<i>Signposting to other services. Look to external funding opportunities.</i>

Part 5 - Action Plan and Review

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
	Outcomes and Actions entered onto Pentana			

Date of Review (If applicable)

Guidance and form updated July 2023 following CMT approval.

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Audit & Governance Committee

2024 - 2025

Functions of the Committee:

Those functions conferred on the Council in relation to Audit and Governance matters including Audit Activity, Regulatory Framework and Accounts.

To advise the council on the adoption or revision of its Code of Conduct.

To monitor and advise the council about the operation of its Code of Conduct in the light of best practice and in terms of the Localism Act 2011. To assist members and co-opted members of the authority.

To ensure that all members of the Council have access to training in all aspects of the member Code of Conduct, that this training is actively promoted, and that members are aware of the standards expected from local councillors under the Code.

Other functions:

Functions relating to standards of conduct of members under any relevant provision of, or regulations made under, the Localism Act 2011 including complaints against members and co-opted members of the Council for breach of the Code of Conduct; and the granting of dispensations pursuant to section 33, Localism Act 2011.

The Council's complaints procedure.

Membership: Councillors: C Adams (Chair), A Wells (Vice Chair), C Bain, M Couchman, S Doyle, P Turner, J Wadrup

ROLLING AUDIT & GOVERNANCE TIMETABLE OF PLANNED REPORTS TO AUDIT AND GOVERNANCE COMMITTEE

2024/25 Year

Note: Audit & Governance Committee training is planned for 4th June 2024, additional training will be provided to Committee members during the year (dates to be agreed).

	Report	Committee Date	Report of	Comments
1.	Internal Audit Quarterly Update Q2	13 th November 2024	Audit Manager	
2.	Counter Fraud update	13 th November 2024	Audit Manager	
3.	Outstanding Audit Recommendations	13 th November 2024	Audit Manager	
4.	Risk Management Quarterly Update	13 th November 2024	Assistant Director – Finance	
5.	Quarterly update - Financial Waivers	13 th November 2024	Assistant Director – Finance	
6.	Member Enquiries Update	13 th November 2024	Monitoring Officer	
7.	Annual Statement of Accounts	13 th November 2024	Executive Director Finance	
8.	Audit Findings Report and Management Representation Letter	13 th November 2024	Azets	
	Report	Committee Date	Report of	Comments

1.	Internal Audit Quarterly Update Q3	5 th February 2025	Audit Manager	
2.	Risk Management Quarterly Update	5 th February 2025	Assistant Director – Finance	
3.	Audit Committee Effectiveness	5 th February 2025	Audit Manager	
4.	Future High Street Fund Risk Report	5 th February 2025	Assistant Director, Growth & Regeneration	
5.	Quarterly update - Financial Waivers	5 th February 2025	Assistant Director – Finance	
6.	Complaints Update	5 th February 2025	Assistant Director - People	
7.	Review of the Constitution and Scheme of Delegation for Officers	5 th February 2025	Monitoring Officer	
8.	Councillor Code of Conduct	5 th February 2025	Monitoring Officer	
	Report	Committee Date	Report of	Comments
1.	Audit and Governance Committee update	19 th March 2025	Azets	
2.	Internal Audit Charter and Audit Plan 2025/26	19 th March 2025	Audit Manager	
3.	Final Accounts – Accounting Policies and Action Plan	19 th March 2025	Assistant Director of Finance	
4.	Private meeting of Internal and External Auditors and Committee members	19 th March 2025		

	Report	Committee Date	Report Of	Comments
1.	Public Sector Internal Audit Standards/Quality Assurance and Improvement Programme	15th April 2025	Audit Manager	
2.	Annual Report of the Chair of Audit & Governance Committee	15th April 2025	Audit Manager / Chair	
3.	Review of Financial Guidance	15th April 2025	Assistant Director Finance	
4.	Review of the Treasury Management Strategy Statement, Minimum Revenue Provision Policy Statement and Annual Investment Statement and the Treasury Management Strategy Statement and Annual Investment Strategy Mid-Year Review Report	15th April 2025	Executive Director Finance	
5.	Auditor's Annual Report	15th April 2025	Azets	
6.	Audit Findings Report	15th April 2025	Azets	

Portfolio Holder: The Leader of the Council (Operations/Finance/Cost of Living)

Matters Considered

	Report	Committee Date	Report of	Comments
1.	Internal Audit Annual Report and Quarterly Update for 2023/24	26 th June 2024	Audit Manager	
2.	Annual Governance Statement and Code of Corporate Governance	26 th June 2024	Chief Executive/Audit Manager	
3.	Risk Management Quarterly Update	26 th June 2024	Assistant Director, Finance	
4.	Future High Street Fund Risk Report	26 th June 2024	Assistant Director, Growth & Regeneration	
5.	Audit Committee Effectiveness (Skills Audit) and Independent Member update	26 th June 2024	Audit Manager	
1.	Members Training Session	14 th August 2024	Zurich/ Executive Director Finance	
1.	Regulatory Investigatory Powers Act 2000 (RIPA) Annual Update	25 th September 2024	Assistant Director, Partnerships	
2.	Modern Slavery and Human Trafficking Statement	25 th September 2024	Assistant Director – Partnerships	
3.	Local Government Ombudsman’s Annual Review and Report 2023/24	25 th September 2024	Assistant Director – People	
4.	Internal Audit Quarterly Update Q1	25 th September 2024	Audit Manager	

5.	Financial Waivers to 30th June 2024	25th September 2024	Assistant Director – Finance	
6.	Risk Management Quarterly Update	25th September 2024	Assistant Director – Finance	
7.	Annual Report on The Treasury Management Service and Actual Prudential Indicators 2023/24	25th September 2024	Executive Director Finance	
8.	Audit & Governance Committee update	25th September 2024	Azets	
9.	Private meeting of Internal and External Auditors and Committee members	25th September 2024		