Broxtowe Borough COUNCIL

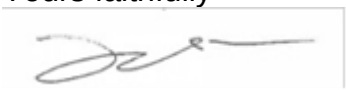
Friday, 11 September 2026

Dear Sir/Madam

A meeting of the Governance, Audit and Standards Committee will be held on Monday, 21 September 2026 in the Council Chamber, Council Offices, Foster Avenue, Beeston NG9 1AB, commencing at 6.00 pm.

Should you require advice on declaring an interest in any item on the agenda, please contact the Monitoring Officer at your earliest convenience.

Yours faithfully



Zulfiqar Darr
Chief Executive

To Councillors:

S J Carr (Chair)
C Carr (Vice-Chair)
M Brown
R Bullock
A Cooper
J Couch
S Dannheimer
K A Harlow
S P Jeremiah
A Kingdon
J M Owen
S Webb
E Winfield

A G E N D A

1. Apologies

To receive apologies and to be notified of the attendance of substitutes.

2. Declarations of Interest

Members are requested to declare the existence and nature of any disclosable pecuniary interest and/or other interest in any item on the agenda.

Further information can be found at: Member Code of Conduct of Broxtowe Borough Council

3. Minutes (Pages 5 - 10)

The Committee is asked to confirm as a correct record the minutes of the meeting held on Monday, 20 July 2026.

4. Audit of Accounts and Associated Matters

To receive a verbal update from the Council's external auditors on the progress made with the 2025/26 audit of accounts.

5. Review of Strategic Risk Register (Pages 11 - 30)

To approve the amendments to the Strategic Risk Register and the action plans identified to mitigate risks.

6. Regulator Update (Pages 31 - 58)

To review and scrutinise the refreshed Service Improvement Plan and relevant documents to ensure appropriate action is aligned with the Regulator of Social Housing standards and outcomes.

7. Community Governance Review Update

The Committee will receive a verbal update on the latest position regarding the proposed Community Governance Review following the Work of the Review Group.

8. Complaints Report Quarter 1 (Pages 59 - 88)

To provide Members with a summary of complaints made against the Council.

9. Member Code of Conduct Annual Complaints Report (Pages 89 - 96)

To report to the Committee a summary of complaints under the Members' Code of Conduct between 1 April 2025 to 31 March 2026 and declarations of Gifts and Hospitality.

10. Annual Constitution Review (Pages 97 - 110)

To consider amendments to the Constitution as recommended by the Constitution Task Group at its meeting on 8 June 2026, in addition to a proposed change to Financial Regulations and an update on the legislative changes to the Planning Committee's responsibilities.

11. Work Programme (Pages 111 - 112)

To consider items for inclusion in the Work Programme for future meetings.

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GOVERNANCE, AUDIT AND STANDARDS COMMITTEE

MONDAY, 20 JULY 2026

Present: Councillor S J Carr, Chair

Councillors: C Carr (Vice-Chair)
M Brown
A Cooper
S Dannheimer
S P Jeremiah
A Kingdon
J M Owen
P J Owen (Substitute)
P A Smith (Substitute)
S Webb

Apologies for absence were received from Councillors R Bullock, J Couch, K A Harlow and E Winfield

8 DECLARATIONS OF INTEREST

There were no declarations of interest.

9 MINUTES

The minutes of the meeting held on 18 May 2026 were confirmed and signed as a correct record.

10 AUDIT OF ACCOUNTS AND ASSOCIATED MATTERS

The Committee noted the latest Audit Progress Report from the Council's external auditors, Forvis Mazars, and noted progress made with the 2025/26 audit. Members noted that the Council had published its draft Statement of Accounts for 2025/26 on 29 June 2026, in advance of the 30 June statutory deadline, and that these had been shared with the external auditors, with a final report expected for the Committee's meeting in November 2026.

The Committee noted that the audit certificate for 2024/25 had been issued on 1 July 2026, following confirmation from the National Audit Office that no further work was required in respect of the Whole of Government Accounts, finalising the 2024/25 audit. In respect of the 2025/26 audit, the external auditors had updated their materiality levels following receipt of the draft accounts, and reported that no further significant risks had been identified from a review of the draft accounts at this stage. Work on the value for money arrangements was in progress and nothing had been identified to report at this time.

11 STATEMENT OF ACCOUNTS 2025/26 - GOING CONCERN

The Committee noted the assessment by the designated Section 151 Officer of the Council's Going Concern status for the purposes of the Statement of Accounts 2025/26. Members were advised that the assessment had had regard to the Council's current and projected financial position, its governance arrangements, and the regulatory and control environment, and that on this basis the Council's financial position remained sound and it continued to be regarded as a going concern.

Members raised concerns regarding the potential impact of Local Government Reorganisation (LGR) on service delivery and questioned whether the Council's reserves might be used for the benefit of Broxtowe residents in advance of any transfer to a new unitary authority. The Section 151 Officer confirmed that LGR was not, at this stage, considered to have an impact on the Council's going concern status, and that the transfer and use of reserves and balances under LGR would be considered further through work with other finance officers in the run up to vesting day, whilst continuing to safeguard public funds and maintain a sustainable financial position.

Members also queried the potential impact of staff turnover linked to uncertainty over LGR, and were advised that this was being managed as a strategic risk through the Strategic Risk Register, to be considered later in the meeting.

12 INTERNAL AUDIT REVIEW 2025/26

The Committee received the Chief Audit and Control Officer's Annual Assurance Opinion and noted the work of Internal Audit during 2025/26. Members noted that 96% of planned audits had been completed or were awaiting finalisation by the year end, above the 90% target, and that it was the opinion of the Chief Audit and Control Officer that the current internal control environment was satisfactory to maintain the overall adequacy and effectiveness of the Council's framework of governance, risk management and control.

In response to a question regarding the high priority actions arising from the Stores and Commercial Property Management audits, officers confirmed that all previously agreed actions from those audits had since been completed, and that there were no audit actions currently outstanding.

13 INTERNAL AUDIT PROGRESS REPORT

The Committee noted the recent work completed by Internal Audit. Officers confirmed that there were no audit actions currently outstanding from previously agreed audits, and no significant issues arising from audits completed in the period. Members noted that, since the report had been written, the Planning Income and New Pavilion at Hickings Lane, Stapleford audits had both been completed with no significant issues to report.

14 REVIEW OF STRATEGIC RISK REGISTER

The Committee considered the proposed amendments to the Strategic Risk Register following a meeting of the Strategic Risk Management Group in June 2026. Members noted the proposal to remove the risk relating to the Government's welfare reform agenda, on the basis that this could now be managed operationally as part of business-as-usual activity, and the addition of two new strategic risks relating to failure to deliver weekly food waste collections and failure to deliver the Kimberley Depot office replacement and redevelopment programme.

Members held an extensive discussion on the highest-rated risks in the register, including: the risk relating to the Housing Revenue Account Business Plan, noting that the minimum reserve balance had fallen below £1 million and that officers were working on a Business Strategy to address income, efficiencies and cost reduction; the risk relating to strategic leisure initiatives, including an update on progress with the replacement Bramcote Leisure Centre, where the construction contract and the licence agreement with the school in respect of temporary car parking arrangements were both close to being finalised; the risk relating to crime and disorder, in respect of which Members raised concerns about levels of antisocial behaviour; the risk relating to recruitment and retention of staff with the required skills and expertise, including in relation to environmental health posts; and the risk relating to failure to respond to the outcomes of Local Government Reorganisation, including the potential implications for joint use leisure facilities where sites are linked to schools that may become academies.

RESOLVED that the amendments to the Strategic Risk Register and the actions to mitigate risks as set out be approved.

15 COMPLAINTS REPORTS 2025/26

The Committee received a summary of complaints made against the Council for 2025/26. Members noted that, of 552 stage 1 complaints received overall, 102 were investigated under the stage 2 complaints procedure and 12 were investigated by the Local Government Ombudsman (LGO); under the stage 2 procedure, 57 complaints (56%) were not upheld, 42 (41%) were upheld and one was withdrawn (3%).

Members queried the process where a compensation offer had been made, and were advised that acceptance of a stage 2 compensation payment did not preclude a complainant from subsequently referring their complaint to the Ombudsman. In response to questions regarding external wall insulation, officers confirmed there were no concerns regarding the contractors used for previous installation programmes, but that a small number of cases had arisen where subsequent repairs work had affected the integrity of insulation; work was underway to survey affected properties and to improve communication with tenants and repairs staff on this issue.

Members raised concerns regarding the trend analysis at Appendix 1, noting a deterioration in complaint themes such as communication, delays and follow-up monitoring between quarter 3 and quarter 4. Officers advised caution in drawing conclusions from a single year of trend data, given that complaints are not always made in the quarter in which the underlying issue arose, and noted that additional resources had been approved for both the Complaints Team and the Housing Repairs Team, together with a restructure of the Housing Repairs service, which were

expected to support improved performance. Officers also noted that some of the increase in complaints relating to capital works reflected improved recording of complaints, rather than a decline in service, and that a recent change of pest control contractor had contributed to a number of complaints which were expected to reduce as the new arrangement embedded.

16 REGULATOR OF SOCIAL HOUSING - SERVICE IMPROVEMENT PLAN REVIEW

The Committee noted its first report reviewing and scrutinising the Housing and Asset Management Service Improvement Plan, developed following the judgement of the Regulator of Social Housing (RSH) in October 2025, this Committee having been added to the scrutiny arrangements for the Plan alongside the Housing Improvement Board and Cabinet, in response to feedback from the RSH that scrutiny in this area required strengthening.

Members raised a number of detailed questions on progress against actions in the Service Improvement Plan and the Safety Performance Report, including: stock condition data, noting this had improved from 63% at the time of the RSH inspection to 74% currently, with a target of 100% by the end of the year; the number of outstanding fire risk assessment remedial actions, which officers reported had reduced from 3,117 at the start of the year to 1,866 at the time of the meeting, as a result of a themed and prioritised programme of work; electrical compliance, where officers reported ongoing difficulties gaining access to a number of properties, that new legislation from May 2026 had introduced a legal obligation (previously good practice) enabling the Council to pursue injunctions and powers of entry through the courts, and that 99 properties remained outstanding as at May 2026; damp and mould, where officers reported a reduction in outstanding cases from 233 in February 2026 to 106 in May 2026; and asbestos and Legionella risk management, where officers undertook to provide further detail outside the meeting.

Members raised concerns regarding the pace of progress against some actions and the clarity of the reporting, and officers acknowledged the feedback and undertook to bring updated and clearer reports to future meetings, including more recent data than that included in the appendices to this report.

17 WORK PROGRAMME

The Committee considered additions to the Work Programme, including the addition of a regular Regulator of Social Housing - Service Improvement Plan Review report.

Members discussed the implications of Local Government Reorganisation for parish and town council arrangements, including the likelihood of requests for new parish or town councils, and the position of Greasley Parish Council, whose area would otherwise be split between different local authority areas under LGR proposals. It was agreed that the Governance Review Task and Finish Group should be resurrected to consider these and related governance matters arising from Local Government Reorganisation.

RESOLVED that the work programme, with the addition of a regular Regulator of Social Housing - Service Improvement Plan Review report be added to the work programme and the establishment of a Governance Review Task and Finish Group, be approved.

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Report of the Deputy Chief Executive

Review of Strategic Risk Register

1. Purpose of report

To approve the amendments to the Strategic Risk Register and the action plans identified to mitigate risks.

2. Recommendation

The Committee is asked to RESOLVE that the amendments to the Strategic Risk Register and the actions to mitigate risks as set out be approved.

3. Detail

In accordance with the corporate Risk Management Strategy, the Strategic Risk Management Group met on 20 August 2026 to review the Strategic Risk Register. General Management Team (GMT) has since considered the proposals made by the Group. The objectives of the review were to:

- Identify the extent to which risks included in the register are still relevant
- Identify any new strategic risks to be included in the register
- Review action plans to mitigate risks.

A summary of the risk management process is included in **Appendix 1**. The Risk Management Strategy includes a '5x5' risk map matrix to assess both the threats and opportunities for each strategic risk in terms of both the likelihood and impact. The risk map is included to assist the understanding of the inherent and residual risk scores allocated to each strategic risk. These scores will be considered further and amended as necessary in due course.

Details of the proposed amendments to the Strategic Risk Register and actions resulting from the process are attached in **Appendix 2**. This includes a proposal to remove the risk relating to 'failure to mitigate the impact of the Government's welfare reform agenda'. In view of the progress made, and its direct impact on the Council, it is considered that this risk can now be managed operationally as part of 'business-as-usual' activity and is no longer considered a strategic risk.

The full Strategic Risk Register incorporating the proposed amendments is available on the intranet. An extract from the register of the entries relating to the highest rated 'red' risks are included in **Appendix 3**.

4. Financial Implications

The comments from the Assistant Director Finance Services were as follows:

There are no direct financial implications that arise from this report. Any future additional budgetary requirements will be considered separately by Cabinet.

5. Legal Implications

   The comments from the Head of Legal Services and Deputy Monitoring Officer were as follows:

   The Strategic Risk Register is the main mechanism used by the Council to identify, assess and monitor key risks. Whilst there are no direct legal implications arising from this report, it is important to assess whether the risks identified are being effectively mitigated and managed.

6. Human Resources Implications

   There were no comments from the Human Resources Manager.

7. Union Comments

   There were no Union comments in relation to this report.

8. Data Protection Compliance Implications

   There are no Data Protection issues in relation to this report.

9. Climate Change Implications

   Climate Change is considered in this report as a strategic risk.

10. Equality Impact Assessment

    As there is no change to policy an equality impact assessment is not required.

11. Background Papers

    Nil

Appendix 1

Review of Strategic Risk Register

Introduction

The corporate Risk Management Strategy aims to improve the effectiveness of risk management across the Council. Effective risk management will help to ensure that the Council maximises its opportunities and minimises the impact of the risks it faces, thereby improving its ability to deliver priorities, improve outcomes for residents and mitigating legal action and financial claims against the Council and subsequent damage to its reputation.

The Strategy provides a comprehensive framework and process designed to support both Members and Officers in ensuring that the Council is able to discharge its risk management responsibilities fully. The Strategy outlines the objectives and benefits of managing risk, describes the responsibilities for risk management, and provides an overview of the process that the Council has in place to manage risk successfully. The risk management process outlined within the Strategy should be used to identify and manage all risks to the Council's ability to deliver its priorities. This covers both strategic priorities, operational activities and the delivery of projects or programmes.

The Council defines risk as "the chance of something happening that may have an impact on objectives". A risk is an event or occurrence that would prevent, obstruct or delay the Council from achieving its objectives or failing to capture business opportunities when pursuing its objectives.

Risk Management

Risk management involves adopting a planned and systematic approach to the identification, evaluation and control of those risks which can threaten the objectives, assets, or financial wellbeing of the Council. It is a means of minimising the costs and disruption to the Council caused by undesired events.

Risk management covers the whole range of risks and not just those associated with finance, health and safety and insurance. It can also include risks as diverse as those associated with reputation, environment, technology and breach of confidentiality amongst others. The benefits of successful risk management include:

- Improved service delivery with fewer disruptions, efficient processes and improved controls
- Improved financial performance and value for money with increased achievement of objectives, fewer losses, reduced impact and frequency of critical risks
- Improved corporate governance and compliance systems with fewer legal challenges, robust corporate governance and fewer regulatory visits
- Improved insurance management with lower frequency and value of claims, lower impact of uninsured losses and reduced premiums.

Risk Management Process

The Council's risk management process has five key steps as outlined below.

Process Step	Description
Risk Identification	Identification of risks which could significantly impact the Council's aims and objectives – both strategic and operational.
Risk Analysis	Requires consideration to the identified risks potential consequences and likelihood of occurring. Risks should be scored against the Council's risk matrix
Risk Treatment	Treat; Tolerate; Transfer; Terminate – Identify which solution is best to manage the risk (may be one or a combination of a number of treatments)
Completing the Risk Register	Document the previous steps within the appropriate risk register. Tool for facilitating risk management discussions. Standard template to be utilised to ensure consistent reporting.
Monitoring, reporting and reviewing the risks	Review risks against agreed reporting structure to ensure they remain current and on target with what is expected or manageable.

Risk Matrix

Likelihood	Risk – Threats					
	Almost Certain – 5	5	10	15	20	25
	Likely – 4	4	8	12	16	20
	Possible – 3	3	6	9	12	15
	Unlikely – 2	2	4	6	8	10
	Rare – 1	1	2	3	4	5
		Insignificant – 1	Minor – 2	Moderate – 3	Major – 4	Catastrophic – 5
		Impact				

Risk Rating	Value	Action
Red Risk	25	Immediate action to prevent serious threat to provision and/or achievement of key services or duties
	15 to 20	Key risks which may potentially affect the provision of key services or duties
Amber Risk	12	Important risks which may potentially affect the provision of key services or duties
	8 to 10	Monitor as necessary being less important but still could have a serious effect on the provision of key services
	5 to 6	Monitor as necessary to ensure risk is properly managed
Green Risk	1 – 4	No strategic action necessary

Appendix 2

Strategic Risk Register – Summary of Proposed Changes

Inherent Risk – Gross risk **before** controls and mitigation

Residual Risk – Risk remaining **after** application of controls and mitigating measures

Risk	Inherent Risk	Residual Risk	Changes
1. Failure to maintain effective corporate performance management and implement change management processes *The position with regards to this risk is **unchanged**.*	20	**4** **Green**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk. The challenges of Local Government Reorganisation (LGR) and changes at GMT could impact on this risk.
2. Failure to obtain adequate resources to achieve service objectives *The position with regards to this risk is **unchanged**.*	20	**16** **Red**	Ongoing challenges surrounding the local government finance means that this remains a high-rated residual risk. A new action was added to monitor the financial impact of LGR transition costs before vesting day that may have to be shared by the Council. The resourcing impacts arising from transitional arrangements in the run-up to LGR continues to be monitored.
3. Failure to deliver the Housing Revenue Account (HRA) Business Plan ***The residual risk score has been revised after it was considered that the position with regards to this risk had worsened.***	25	**16** **Red**	The HRA financial balance had dipped below £1.0m at March 2026. The HRA is a ring-fenced fund and must be maintained in a surplus position. There is no specific statutory minimum working balance, so whilst the current position can be tolerated in the short-term, sustained efforts are required to bring the working balance back up above the minimum level. **In view of the financial position, and before agreeing a Business Strategy to manage costs and achieve efficiencies to increase the working balance, the residual risk score is increased from 12 (Amber Risk) to 16 (Red Risk).** A new action was added to deliver the plan to provide an updated comprehensive stock condition survey for all the housing portfolio.

Risk	Inherent Risk	Residual Risk	Changes
4. Failure to deliver a Housing Repairs and Compliance Service which meets Right to Repair and Compliance legislation *The position with regards to this risk is **unchanged**.*	20	**16** Red	The actions to update Lettable Standard for void properties and to obtain legal advice to progress with 'no access' cases relating to compliance works have both been completed.
5. Failure of strategic leisure initiatives *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **improved.***	25	**20** Red	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
6. Failure of Liberty Leisure (LLL) trading company *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **improved***	25	**9** Amber	A new action was added to progress the scheme to provide a new canopy and associated lighting to the Padel courts at Hickings Lane Community.
7. Not complying with legislation *The position with regards to this risk is **unchanged**.*	25	**6** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
8. Failure of financial management and/or budgetary control and to implement agreed budget decisions *The position with regards to this risk is **unchanged**.*	25	**4** Green	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
9. Failure to maximise collection of income due to the Council *The position with regards to this risk is **unchanged***	20	**9** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
10. Failure of key ICT systems *The position with regards to this risk is **unchanged***	25	**9** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.

Risk	Inherent Risk	Residual Risk	Changes
11. Failure to implement Private Sector Housing Strategy in accordance with Government and Council expectations *The position with regards to this risk is **unchanged***	20	**9** **Amber**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
12. Failure to engage with partners/community to implement the Broxtowe Borough Partnership Statement of Common Purpose *The position with regards to this risk is **unchanged***	15	**4** **Green**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk. The risk from LGR will be monitored.
13. Failure to contribute effectively to dealing with crime and disorder *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **worsened***	15	**3** **Green**	This relates to the Council contributing effectively to dealing with crime and disorder, rather than the overall level of crime and ASB in the Borough. Several new key controls were added including the Prevent Duty and Action Plan; Substance Misuse Strategy; Hate Crime Strategy; Serious Organised Crime Strategy; ASB Policy and Protocol; Sex Work Harm and Exploitation Reduction Panel; Multi Agency Risk Assessment Conference; Multi Agency Public Protection Arrangements; and Implement the Fraud Charter. Three news actions were added to deliver the Serious Violence Duty; to deliver the ASB Protocol; and to deliver the Prevent Duty. The action to implement the Home Office's 'Surveillance Camera Code of Practice has been completed. The potential risks from LGR, including governance and reporting lines and the co-location with the Police will be monitored.
14. Failure to provide housing in accordance with the Local Development Framework *The position with regards to this risk is **unchanged***	20	**12** **Amber**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.

Risk	Inherent Risk	Residual Risk	Changes
15. Natural disaster or deliberate act, which affects major part of the Authority *The position with regards to this risk is **unchanged***	15	**12** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
16. Failure to manage the Beeston town centre development *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **improved***	25	**9** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
17. Failure to maximise opportunities and to recognise the risks in shared services arrangements *The position with regards to this risk is **unchanged***	20	**9** Amber	The action to undertake a review of the shared surveillance camera system arrangements and associated contract has been completed. A new action was added to monitor new out of hours arrangements and the associated contract.
18. Corporate and/or political leadership adversely impacting upon service delivery *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **worsened***	20	**12** Amber	The action to complete the transition from interim senior management arrangements to a permanent structure was completed. A new action was added to complete the recruitment of new directors to the permanent establishment.
19. High levels of sickness *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **worsened***	16	**9** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
20. Inability to recruit and retain staff with required skills and expertise to meet increasing demands and expectations. *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **worsened***	20	**9** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk. The increased risk from LGR continues to be monitored.

Risk	Inherent Risk	Residual Risk	Changes
21. Failure to comply with duty as a service provider and employer to groups such as children, the elderly, vulnerable adults etc. *The position with regards to this risk is **unchanged***	20	**4** **Green**	High-Risk Violence and Exploitation Panels has been replaced as a key control by the Multi Agency Child Exploitation and Missing Persons Panel. Other additions to key controls include Substance Misuse Strategy; Sanctuary Policy; Fraud Charter; Venue Hire Guidance; and Taxi Driver Training.
22. Unauthorised access of data *The position with regards to this risk is **unchanged***	20	**12** **Amber**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
23. High volumes of employee or client fraud *The position with regards to this risk is **unchanged***	20	**4** **Green**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.
24. *Failure to achieve commitment of being carbon neutral for the Council's own operations by 2027* *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **worsened***	20	**12** **Amber**	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk. Changes to the definition of 'carbon neutrality', which includes Scope 3, has significantly impacted on the opportunity for the Council to be considered carbon neutral by December 2027.
25. Failure to respond to the outcomes of Local Government Reorganisation in Nottingham and Nottinghamshire ***The residual risk score has been revised after it was considered that the position with regards to this risk had improved.***	25	**16** **Red**	A new action was added to monitor the operational risk and impact on internal resources that will be diverted to support LGR project management transitional workstreams and projects. **In view of the current position, with strategic/operational engagement following the announcement of the Government's decision for LGR in Nottinghamshire, the residual risk score should be reduced from 20 to 16 (Red Risk).**

Risk	Inherent Risk	Residual Risk	Changes
26. Failure to deliver weekly food waste collections in accordance with the government and public expectations *Although the residual risk score does not need to change, it was considered that the position with regards to this risk had **worsened***	16	**12** Amber	The action to develop and deliver a trial rollout of food waste collection in September 2026 has been delayed.
27. Failure to deliver the Kimberley Depot office replacement and redevelopment programme	20	**12** Amber	No significant changes were proposed to the key controls, risk indicators and action points for this strategic risk.

Appendix 3

Extract from the Strategic Risk Register – September 2026 – Entries Relating to the Highest Rated 'Red' Risks

Risk 2 - Failure to obtain adequate resources to achieve service objectives

Risk Owner(s)	Inherent Risk	Residual Risk
Deputy Chief Executive (s151 Officer) **Assistant Director Finance Services**	**20**	**16**

Key Controls

- Medium Term Financial Strategy
- Business Strategy
- Economic Regeneration Strategy
- Procurement and Commissioning Strategy
- Capital Strategy and Treasury Management Strategy
- Asset Management Strategy
- Energy Procurement Strategy
- Commercial Strategy
- Land Disposals Policy

Risk Indicators

- Local Government Finance Settlement
- Budget gap
- Fuel and energy prices
- Fees and charges and other income levels
- Failed bids for external funding
- General economic indicators
- Interest rates
- Compliance with grant funding conditions
- Fluctuations in planning application fee income
- Cost of planning appeal decisions

Action Points

1. Review service objectives in response to changing resources.

2. Identify and assess external funding opportunities and ensure that accompanying targets are met.

3. Investigate and develop opportunities for shared service collaboration.

4. Monitor the impact of the collection of Business Rates on the resources available to the Council.

5. Seek the disposal of surplus assets to generate additional capital receipts.

6. Be alert to potential funding opportunities for town centre regeneration initiatives and other capital investment schemes.

7. Identify potential budget savings and maximise income generating opportunities.

8. Maximise income from commercial properties and industrial units.

9. Work collaboratively with Nottinghamshire local authorities to maximise the recovery of business rates income.

10. Produce a new Commercial Strategy that will support the Business Strategy being refreshed as part of the annual budget setting process.

11. Progress with the delivery of the Stapleford Towns Fund project.

12. Progress with the delivery of the Kimberley Mean Business project.

13. Develop a Town Investment Plan for Eastwood.

14. Complete the full recovery of the agreed tram compensation claim against Nottingham City Council.

15. Monitor the impact of inflation and the cost of living on the Council's service provision and its financial position.

16. Assess the impact of the government's food waste policies and the potential receipt of New Burdens Funding to meet the additional capital and revenues costs associated with its delivery.

17. Monitor progress made by the DWP on the migration of existing Housing Benefit cases onto Pension Credit.

18. Be mindful of budget risks arising from planning appeal decisions and to report any uplift in costs to GMT at the earliest opportunity.

19. Monitor the funding implications of the increasing scope of Domestic Homicide Reviews being completed by the Community Safety Partnership.

20. Monitor the resourcing impacts arising from transitional arrangements in the run-up to Local Government Reorganisation.

21. Monitor the financial impact of LGR transitional costs pre-Vesting Day that may have to be shared by the Council.

Risk 3 – Failure to deliver the Housing Revenue Account (HRA) Business Plan

Risk Owner(s)	Inherent Risk	Residual Risk
Director of Housing, Environmental Health & Communities / Assistant Director Housing	**25**	**16**

Key Controls

- Plan in place based on comprehensive stock condition survey
- Membership of Association of Retained Council Housing (ARCH)
- Membership of Chartered Institute of Housing (CIH)
- Asset Management Plan for the Council's housing stock
- Housing Revenue Account (HRA) Business Plan
- Housing Strategy
- Rent Income Management Policy
- Allocations Policy
- Void Management Policy
- Garage Management Policy
- Acquisitions Policy
- Rent Setting Policy
- Right to Buy Policy
- Housing Business Plan
- Use of consultants on business planning issues
- Gas and Electrical Policies
- Temporary Accommodation Policy

Risk Indicators

- HRA Working Balance
- Progress against Decent Homes targets
- Progress against Broxtowe Standard
- Stock condition surveys
- Level of expenditure on the approved HRA capital programme
- Interest rate levels

Action Points

1. Ensure sufficient resources exist to keep all homes decent.

2. Monitor progress in the delivery of the HRA Business Plan and provide updates to Cabinet on the action plans.

3. Ensure ongoing compliance with legislation in the Social Housing (Regulation) Act 2023.

4. Ongoing development of the Housing Delivery Programme, seeking suitable resolution to progress schemes and to monitor progress through the Housing Delivery Group.

5. Review the 30-year Housing Asset Management Plan to incorporate the results of the stock condition survey.

6. Purchase former ‘Right to Buy’ and other properties in accordance with the available budget and the Acquisitions Policy.

7. Utilise external funding for heating replacements and other energy efficiency works on the Council’s housing stock.

8. Progress with the development of HRA rented and shared ownership properties on land at Coventry Lane (Hemlock Gate).

9. Monitor the impact of inflation and the cost of living on the HRA service provision and financial position.

10. Assess the impact of the Government’s rent setting policy.

11. Monitor the impact of the Government’s policy changes to the level of Right to Buy discounts in terms of both revenue and capital budgets and its ability to generate capital receipts for future investment.

12. Consider and respond to the outcomes of the Regulator for Social Housing inspection and develop and deliver on any subsequent action plans.

13. Prepare an HRA Medium-Term Financial Strategy and Business Strategy with a view to managing costs and achieving efficiencies to increase the working balance back above the minimum recommended level.

14. Prepare a report to consider the impact of applying an exemption of leaseholder service charges for the cost of significant capital works being undertaken relating to fire risk management programme.

15. Deliver the plan to provide an updated comprehensive stock condition survey for all of the housing portfolio.

Risk 3a - Failure to deliver a Housing Repairs and Compliance Service which meets Right to Repair and Compliance legislation

Risk Owner(s)	Inherent Risk	Residual Risk
Director of Housing, Environmental Health & Communities / Assistant Director Housing	**25**	**16**

Key Controls

- Membership of Association of Retained Council Housing (ARCH)
- Membership of Chartered Institute of Housing (CIH)
- Housing Strategy
- Housing Revenue Account (HRA) Business Plan
- Repairs Policy
- Void Management Policy
- Garage Management Policy
- Gas Servicing Policy
- Electrical Servicing Policy
- Fire Safety Policy
- Asbestos Policy
- Damp and Mould procedure
- Tenant Satisfaction Measures

Risk Indicators

- Gas Servicing compliance
- Electrical Servicing compliance
- Fire Risk Assessment compliance
- Completion of asbestos surveys
- Number of unallocated jobs
- Number of appointments made and kept
- Number of repairs completed at first visit

Action Points

1. Complete training programmes for new and existing employees.

2. Review and retender clean and clearance contract.

3. Review access procedures and use of legal powers.

4. Monitor the position with regards to Housing Disrepair claims and to respond efficiently and effectively to claims being received.

5. Consider the outcome of the consultation on proposed new time limits for repairs and begin to implement changes to meet expectations of proposed legislation.

6. Ensure that the required fire risk assessments for Council properties (including housing dwellings) are completed and to review the outcomes to ensure compliance with the respective regulations.

7. Ensure that the required Asbestos surveys are completed and to review the outcomes in order to ensure compliance with the respective regulations.

8. Monitor the effectiveness of the Recharges Policy to increase the resources available to the HRA.

9. Consider and respond to the outcomes of the Regulator for Social Housing inspection and develop and deliver on any subsequent action plans.

10. Ensure ongoing compliance with new legislation in the Social Housing (Regulation) Act 2023.

11. Implement the agreed establishment structure changes for the Housing Repairs and Compliance Service.

Risk 5 - Failure of strategic leisure initiatives

Risk Owner(s)	Inherent Risk	Residual Risk
Director of Environment and Leisure **Leisure Client Officer**	**25**	**20**

Key Controls

- Leisure Facilities Strategy
- Leisure and Culture Service Specification
- Liberty Leisure Limited Business Plan
- External legal advice and support

Risk Indicators

- Results of consultation exercises
- Progress against Business Plans
- Progress against the Capital Programme
- Events impacting upon any Joint Use Agreements
- Visitor numbers at leisure facilities
- Income at leisure facilities
- Financial viability of Liberty Leisure Limited

Action Points

1. Determine future strategy for investment in leisure facilities.

2. Review leisure opportunities arising from major developments.

3. Utilise external legal advice and support as required.

4. Work with Chilwell School to assess leisure facilities options at Chilwell Olympia Sports Centre and report back to Cabinet.

5. Forward plan any necessary capital repair works anticipated at Bramcote Leisure Centre and to submit, consider and profile the financial impact as part of the proposed Capital Programme.

6. Establish a cross-party members group, supported by key officers in leisure, property and regeneration, to identify leisure opportunities in the north of the Borough.

7. Seek funding opportunities to progress with the development of the DH Lawrence Healthy Lifestyle Centre complex on Walker Street in Eastwood

8. Progress with the construction and delivery stages of the new replacement Bramcote Leisure Centre project.

Risk 25 – Failure to respond to the outcomes of Local Government Reorganisation in Nottingham and Nottinghamshire

Risk Owner(s)	Inherent Risk	Residual Risk
Chief Executive / All Chief Officers	**25**	**16**

Key Controls

- Council and Cabinet (Members)
- Leader of the Council and the Chief Executive
- LGR Management and Planning Groups
- Nottinghamshire Finance Officers Association (NFOA)
- External Consultants reports from PWC and CIPFA

Risk Indicators

- Political acceptance or non-acceptance of the LGR option proposals
- Recent MHCLG ministerial letter outlining spending restrictions on local authorities progressing through LGR (Structural Change Order) expected next year, including requirements for approvals for capital expenditure over £1m, recruitment to senior permanent roles and limits on surplus/disposal assets
- Potential pause/slowdown in the delivery key strategic priorities, e.g. new leisure centre, affordable housebuilding, economic regeneration
- Potential challenge in recruiting to vacant senior posts – impact on service delivery and additional agency costs
- Potential to pause/slowdown of investment in ICT, thereby impacting on improvements to efficiency and output productivity.

Action Points

1. Establishment of an internal LGR Implementation Group to plan and co-ordinate the Council's response to LGR.
2. Regular update reports provided to Members through Cabinet and Council.
3. Council LGR intranet webpages developed to continually engage with staff.
4. Staff engagement sessions planned to provide updates on LGR developments.
5. Chief Executive staff weekly briefings to includes regular updates on LGR.
6. Ensure that the Council is fully engaged and represented at a strategic level and on the various programme groups for key workstreams set up to develop the proposed LGR outcomes.
7. Monitor the impact on internal resources that will be required to support LGR project management transitional workstreams and projects.

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Governance, Audit and Standards Committee 21 September 2026

Report of the Interim Director of Housing, Environmental Health and Communities

Regulator of Social Housing - Service Improvement Plan Review

1. Purpose of Report

To review and scrutinise the refreshed Service Improvement Plan and relevant documents to ensure appropriate action is aligned with the Regulator of Social Housing standards and outcomes

2. Recommendation

The Committee is asked to NOTE the information in Appendix 1 and CONSIDER Appendices 2, 3 and 4 and provide guidance on the level of scrutiny being provided by Housing Improvement Board (HIB) aligned to compliance and RESOLVE accordingly.

3. Detail

The Council continues to implement actions within the refreshed Housing and Asset Management Service Improvement Plan following the inspection from the Regulator for Social Housing (RSH) in October 2025. Progress continues to be made to meet the Regulator requirements and improve service delivery.

Recent feedback from the RSH suggests that the scrutiny of Housing, Repairs and Asset Management performance requires strengthening. As such, it has been requested that this Committee reviews and scrutinises the Service Improvement Plan and relevant documents to ensure that action is aligned with the Regulator of Social Housing standards and outcomes.

The following are attached to this report:

- **Appendix 1:** The Service Improvement Plan that has been refreshed following the last GAS meeting
- **Appendix 2**: The agenda for HIB on 13 August 2026
- **Appendix 3:** Minutes from the 13 August 2026 HIB
- **Appendix 4:** The Safety Performance Report that was shared with HIB on 13 August 2026

4. Financial Implications

   The comments from the Assistant Director Finance Services were as follows:

   TBC

5. Legal Implications

   The comments from the Head of Legal Services were as follows:

   TBC

6. Human Resources Implications

   N/A

7. Union Comments

   N/A

8. Climate Change Implications

   The climate change implications are contained within the report.

9. Data Protection Compliance Implications

   This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

    As this is a change to policy / a new policy an equality impact assessment is included in the appendix to this report.

11. Background Papers

    These are papers that you have used to inform your recommendation that haven't been published as part of the report.

Code	Action	Priority	RAG	Lead Officer	Target Date	Project Plan required?	Progress	RSH judgement feedback	We know we will have achieved this when…
SIP 01(a)	**Implement the approved restructure, filling critical posts and establishing clear roles, responsibilities and reporting lines to strengthen compliance and service delivery.**	High		Rachel	31/10/2026	No	Cabinet approved the restructure on the 30th June 2026. Action taking place to implement (e.g. consultation / job adverts / interviews)	Fire safety: a lack of clarity about the length of time the outstanding remedial actions (3000+) had been open, as well as a lack of evidence of mitigations in place while these actions remain outstanding. Compliance data quality: Lack of assurance of data quality across areas of health and safety. Lack of clarity on the responsibility of C3 actions from EICR services	Critical posts are filled, staff understand their roles and responsibilities, governance and reporting arrangements are operating effectively, and the service has the capacity and capability to deliver regulatory requirements, improve performance and achieve better outcomes for tenants.
SIP 01(b)	**Implement Fire Risk Assessment (FRA), asbestos and smoke / heat / Carbon Monoxide (CO) action plans to…** *** improve the accuracy and completeness of compliance data (aligned with KIM actions)** *** mitigate outstanding actions** *** maintain statutory compliance** *** ensure the agreed remedial actions are completed within timescales**	High		Darren	30/09/2026	Yes	Action plans for FRA, asbestos, smoke etc have been developed and are currently being implemented.	Fire safety: a lack of clarity about the length of time the outstanding remedial actions (3000+) had been open, as well as a lack of evidence of mitigations in place while these actions remain outstanding. Compliance data quality: Lack of assurance of data quality across areas of health and safety.	Statutory compliance is maintained, outstanding and overdue compliance actions have been reduced to agreed levels, remedial actions are completed within target timescales, compliance data is accurate and reliable, and tenants have confidence that their homes are safe.
SIP 01(c)	**Implement an independent auditing and assurance framework for Fire Safety, Asbestos and smoke / heat / CO compliance by the agreed date (reflecting Gas, EICR, Legionella and LOLER).** **Introduce additional lines of defence through dip-sampling and sub-contractor assurance reviews (where appropriate).**	High		Tuesday	31/12/2026	No	Meeting scheduled for 11/09/26 to agree the scope and the methodology of the required audits.	Compliance data quality: Lack of assurance of data quality across areas of health and safety.	Independent assurance confirms that statutory compliance is being maintained, compliance data is accurate and reliable, contractor performance is effectively monitored, and identified issues are promptly addressed through robust audit, assurance and oversight arrangements.

SIP 02	**Implement a Tenant Insight and Inclusion Plan to improve our understanding of the diverse needs of all tenants. The plan to include the collection, maintenance and use of tenant data and protected characteristic information. This insight will be utilised to tailor services, improve equitable access to services and engagement opportunities, and demonstrate fair and equitable outcomes for tenants.** **The plan to align with key improvement activities within the Service Improvement Plan (e.g. Total Mobile) and ensure activities cut across relevant functions, including;** *** customer services** *** complaints** *** repairs** *** damp and mould** *** anti-social behaviour**	High		Kim D	31/12/2026	Yes	AC and KD met on the 14/07/2026 to formulate the plan. More detailed plan has been drafted.	Compliance data quality: Lack of assurance of data quality across areas of health and safety. Stock Condition: Lack of accurate and up to date information on the quality of all of its tenants' homes (including any potential hazards in homes). Engagement activities: Due to the lack of data on its tenants, we cannot provide equitable access to tenant engagement activities. does not hold data on the protected characteristics of its tenants	We have a comprehensive understanding of the diverse needs of our tenants, supported by accurate and up-to-date tenant data, and can demonstrate that services are being tailored to meet those needs. Tenants are able to access services and engagement opportunities equitably, service improvements are informed by tenant insight, and outcomes are consistent with the Regulator of Social Housing Consumer Standards and improvements in relevant Tenant Satisfaction Measures.
SIP 03	**Implement a Knowledge and Information Management (KIM) improvement plan to enhance data governance, data quality and reporting. The plan to align with key improvement activities within the Service Improvement Plan.**	Medium		Andy	31/12/2026	Yes	AC and KD met on the 14/07/2026 to formulate the plan. More detailed plan has been drafted.	general feedback from RSH	Data is accurate, complete and trusted, governance arrangements are embedded, performance reporting supports effective decision-making, and information is consistently used to improve services, demonstrate compliance and deliver the outcomes set out in the Service Improvement Plan.
SIP 04	**Strengthen governance and scrutiny of Housing and Asset Management services. This will be achieved through various channels including;** *** enhancing the level of detail within performance reports (including ensuring the annual Housing report has the desired level of performance information)** *** sharing detail with Housing Improvement Board, Governance, Audit and Standards, and Cabinet for scrutiny** *** providing Member training on regulatory and health and safety responsibilities**	Medium		Rachel	30/09/2026	No	Detailed performance reports continue to be shared with Housing Improvement Board. This gives the Portfolio Holder for Housing more information to scrutinise performance of Housing and Asset Management Some positive activities have been implemented, including minuted meeting with Portfolio holder Monthly report being shared with Cabinet Quarterly reports being shared with GAS. Member training to be organised	general feedback from HQN	Members receive meaningful performance and compliance information, governance bodies provide effective scrutiny and challenge, regulatory and health and safety responsibilities are clearly understood, and there is demonstrable assurance that housing services are delivering safe, compliant and continuously improving outcomes for tenants.

							External Consultant re-hired on 6 month basis		
SIP 05	**Strengthen tenant influence and scrutiny through the Housing Influence Panel (HIP) by;** *** agreeing with HIP and implementing a performance reporting framework** *** revisiting and agreeing with HIP an annual programme of service reviews** *** working with HIP to develop and review service standards for key housing services**	Medium		Kim D	30/09/2026	No	AC and KD met on the 14/07/2026 to formulate the informal plan. Performance reporting framework has been agreed (shared in HIP update at HIB on 13/08/2026).	general feedback from HQN	Tenants have meaningful opportunities to influence housing services, the Housing Influence Panel is actively scrutinising performance and reviewing priority service areas, service standards are shaped by tenant feedback, and there is clear evidence that tenant views are informing service improvements and positive changes in customer outcomes.
SIP 06	**Implement a complaints improvement plan to;** *** improve complaints responded to within target timescales** *** improve Tenant Satisfaction Measures relating to complaints handling (Peer median: 93.9%)** *** establish a system to capture and act on learning from complaints** *** ensure tenants can easily access information on how to raise a complaint.**	Medium	-	Jeremy	31/12/2026	Yes	AC and JW met on the 21/07/2026 to formulate the plan. More detailed plan has been drafted.	Diverse needs: does not fully understand the diverse needs of all its tenants. no evidence of a formal plan or targets for how we will collect data for all tenants. does not hold data on the protected characteristics of its tenants unable to proactively tailor services to meet all tenants' needs, or demonstrate that tenants are receiving fair and equitable outcomes (relies on tenants to inform of additional needs when they report a repair or require another service).	Complaints are responded to within target timescales, tenant satisfaction with complaints handling has improved, lessons learned from complaints are consistently used to improve services, and tenants can easily access information and have confidence that their concerns will be listened to and acted upon.

SIP 07	**Develop and implement a Tenant Satisfaction Measures (TSM) Improvement Plan to support delivery of this Service Improvement Plan (focussing on any gaps) and improve customer outcomes. Publish the TSM Action Plan, TSM results and progress updates to demonstrate how tenant feedback is driving service improvements.**	Medium	-	Kim D	31/12/2026	yes	TSM information can be found on the website and is also shared via current communication channels AC and KD met on the 14/07/2026 to formulate the plan. More detailed plan requires drafting.	We also found weaknesses in the council's approach to collecting and providing performance information to tenants; there was limited performance information accessible for tenants to scrutinise the housing service's performance	Tenant Satisfaction Measures have improved in priority areas, the TSM Improvement Plan is embedded within delivery of the Service Improvement Plan, tenants can see how their feedback has influenced service improvements, and TSM results, action plans and progress updates are regularly published to demonstrate transparency, accountability and improved customer outcomes.
SIP 08	**Implement Total mobile to improve the delivery and management of repairs and maintenance services, strengthen compliance monitoring, enhance data quality and operational efficiency, and provide better information to support asset management, investment forecasting and service improvement.**	Medium		Andy	31/03/2027	yes	Project team and goverance established Data gathering exercise commenced 'Plan on a page' created by TM Workshops arranged / commenced for config and system overview	Compliance data quality: Lack of assurance of data quality across areas of health and safety. Stock Condition: Lack of accurate and up to date information on the quality of all of its tenants' homes (including any potential hazards in homes). Complaints: limited evidence of how we identify and share lessons learnt	Repairs and maintenance services are delivered more efficiently, compliance information is available in real time, data quality has improved, operational processes are streamlined, and managers are able to use trusted information to support asset management, investment planning, performance reporting and improved outcomes for tenants.
SIP 09	**Continue delivery of the 2025–2030 Asset Management Strategy, using stock condition data to prioritise investment, inform repairs and maintenance programmes, and support long-term asset planning and forecasting to improve the quality, safety and sustainability of homes.**	Medium		Darren	31/12/2026	No	Asset Management 'away-day' completed with colleagues to review progress of the strategy, identify barriers that are restricting progress and opportunities for improvement A further 220 stock condition surveys have been completed New Housing Development Manager recruited	general feedback from RSH	Investment decisions are informed by accurate stock condition data, homes remain safe and well maintained, repairs and maintenance programmes are delivered effectively, asset performance and future investment needs are better understood, and there are improvements in the quality of homes, compliance outcomes and relevant Tenant Satisfaction Measures.
SIP 10	**Implement and resource the Damp and Mould Policy to ensure compliance with Awaab's Law, including the timely identification, assessment and resolution of damp and mould cases, supported by clear performance measures and regular monitoring of service delivery and outcomes.**	Medium		James	31/12/2026	No	Interim senior inspector has been recruited to whilst the restructure is being implemented. Review of D&M currently taking place, with findings to be shared at September HIB.	(example) Stock Condition: Lack of accurate and up to date information on the quality of all of its tenants' homes (including any potential hazards in homes).	Damp and mould cases are identified, assessed and resolved within required timescales, compliance with Awaab's Law can be demonstrated, performance is routinely monitored and reported, and tenants have confidence that concerns about damp and mould are taken seriously and addressed promptly and effectively.
SIP 11	**Implement an estate walkabout improvement plan, with clear processes for recording and resolving issues, accurate updating of housing records, and regular communication of outcomes and improvements to tenants.**	Medium		Kim D	31/12/2026	yes	Currently reviewing best-practice examples from other authorities to ascertain how to improve current process Pilot to commence in Sept 2026	Stock Condition: Lack of accurate and up to date information on the quality of all of its tenants' homes (including any potential hazards in homes).	Estate walkabouts are taking place regularly, issues identified during visits are recorded and resolved in a timely manner, housing records are accurate and up to date, and tenants can see and understand the improvements made as a result of their feedback and involvement.

SIP 12	**Implement an ASB Improvement Plan by to;** *** improve tenant awareness and reporting** *** ensure timely and appropriate case management** *** improve Tenant Satisfaction Measures relating to neighbourhood management and the Council's contribution to neighbourhoods.** **Establish clear performance and assurance arrangements to monitor response times, outcomes and customer satisfaction.**	Medium		Louise	31/12/2026	Yes	Website search terms have been simplified The link to the Housing section is more prominent on the home page Further communications being developed to highlight improvements and achievements Meeting with AC and LG arranged for 09/09/26 to refresh the plan	ASB: the accessibility of information available for tenants reporting ASB and hate crime, and how we take prompt and appropriate action. there are weaknesses in the accessibility of information available for tenants reporting ASB and hate crime, and how it is assured that it is taking prompt and appropriate action	Tenants understand how to report anti-social behaviour, cases are responded to and managed within agreed timescales, residents are satisfied that appropriate action is being taken, and there are measurable improvements in Tenant Satisfaction Measures relating to neighbourhood management and the Council's contribution to neighbourhoods. Robust performance and assurance arrangements provide confidence that ASB cases are being managed effectively and consistently.
SIP 13	**Implement a People and Culture Development Programme to establish clear behavioural expectations, develop workforce skills and competencies, and improve collaboration across housing services, ensuring employees are equipped to meet regulatory standards, deliver high-quality services and support continuous improvement.**	Medium		Kim D	31/03/2027	yes	AC to meet with KD to plan the next steps	Internal feedback	Employees understand the behaviours expected of them, have the skills and competencies required for their roles, and work collaboratively across services to deliver consistent, high-quality outcomes for tenants. Workforce development is embedded within the service, regulatory expectations are met, and there is evidence of continuous improvement in performance, culture and customer satisfaction.
SIP 14	**Implement a policy documentation review by the agreed date, including a complete register of required documents and a review process to ensure all policies are reviewed, updated, adopted or replaced at least every three years.**	Low		Andy	31/03/2027	No	To commence in October 2026	general feedback from HQN	A complete and up-to-date register of housing policies and procedures is in place, policies are reviewed and approved within agreed timescales, staff can easily access current documents, and there is assurance that governance, compliance and service delivery are supported by clear, relevant and regularly updated policies.
SIP 15	**Review and improve the adaptations service by the agreed date, establishing clear service standards and performance measures with tenants, and monitoring delivery, timeliness and customer satisfaction to improve outcomes for residents requiring adaptations.**	Low		Darren	31/03/2027	yes	AC to meet with Assistant Director of Asset Management to plan the next steps	general feedback from HQN	Tenants have helped to define the standards they can expect from the adaptations service, adaptations are delivered within agreed timescales, performance is routinely monitored, customer satisfaction has improved, and residents can demonstrate that adaptations have enabled them to live safely, independently and comfortably in their homes.

SIP 16	**Develop and implement an annual tenancy sustainability report by the agreed date to monitor tenancy outcomes, identify trends and inform service improvements, including analysis of evictions, cases progressing to bailiff stage, failing tenancies, and introductory tenancies that are subsequently abandoned.**	Low		Louise	31/03/2027	No	AC to meet with LG to agree the next steps	general feedback from HQN	The Council has a clear understanding of tenancy outcomes and the factors contributing to tenancy failure, with trends regularly reported and used to inform service improvements. There is evidence of early intervention and support being targeted effectively, resulting in improved tenancy sustainment and better outcomes for tenants.

HOUSING IMPROVEMENT BOARD AGENDA.13.08.26

No	Item	
1.	**Welcome / apologies**	**ZD**
2.	**Minutes of last meeting**	**ZD/ all**
3.	**Compliance updates:** ○ **Review and scrutiny of the Safety Performance Report** ○ **Asbestos dip test report** ○ **Compliance non-access** ○ **Changes to use of Warrant**	**all**
4.	**Review of the revised Service Improvement Plan (SIP):**	**AC / all**
5.	**Discussion points:** ○ **Run through of the Insight and Inclusion plan** ○ **update on the D&M review** ○ **lessons learned / root cause exercise**	**KD** **AC** **All**
6.	**Housing Influence Panel (HIP) feedback:** ○ **Review of the submitted report**	**AH**
7.	**Any other business**	**all**
8.	**Private and Confidential matters**	**GMT / AC / VS**

Next meeting – Thursday 17.09.26 4pm.

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HOUSING IMPROVEMENT BOARD (HIB)

MEETING MINUTES 13.08.2026

Present

- Vanessa Smith, VS (Councillor, Portfolio Holder for Housing)
- Rachel Shaw, RS (Interim Director of Housing, Environmental Health and Communities)
- Zulf Darr, ZD (Chief Executive)
- Emma Georgiou, EG (Assistant Director of Environment)
- Andy Culshaw (Change Delivery Manager)
- Stuart Tyler, ST (Tenant representative)
- Kim Dawson, KD (Housing Services & Strategy Manager)
- Clare Goodall, CL (Senior Solicitor)
- Richard Fletcher, RF (Democratic Services & Complaints Officer)

Apologies:

- Darren Ibell, DI (Assistant Director of Asset Management)
- Martin Paine, MP (Interim Deputy Chief Executive)
- April Hatcher, AH (Engagement Manager)
- Tuesday Hanley, TH (Head of Health, Safety, Compliance and Emergency Planning)
- Razina Ayoub, RA (Head of Legal Services)
- Patrisha Clay, PC (Tenant representative)

No	Item	Lead
2	**Open actions from previous meeting / minutes of the previous meeting** **Total Mobile (TM)** ● AC confirmed that TM have provided two project plans. One very detailed (and internally focussed) and one high level (plan on a page). ● In summary: workshops are continuing, with a few more scheduled this month; Academy Build sessions will train staff to configure specific modules; further training and User Acceptance Testing (UAT) will take place in December; and launch prior to the new financial year is the goal. **Complaints performance report** ● AC updated that he is working with Arron on the quarterly report, which will be brought forward to next month. RS noted a meeting had been held on this. KD said she had not been involved in those meetings and suggested one meeting should involve everybody, noting that different people are currently producing the same reports, including those going to GMT and Cabinet.	**ZD/All**

	ACTION: Review ongoing involvement in meetings and reports regarding complaints and who is responsible (RS) **FRA anniversary report to GMT** ● EG confirmed she had picked this up with TH. RS said this action can now come off the list, as the team is proceeding as required. Complete. **Tap / water butt / hosepipe communication** ● Confirmed this will be communicated as an article in the tenants' magazine, as previously agreed. **Equalities Working Group (resident participation)** ● RS updated that the internal working group is managed by HR, with the disability forum being looked at for participation. After the summer holidays, Comms will be relaunching the group and will contact KD and AH to discuss. Numbers on the forum had dwindled, though residents remain interested. Action to come off the list.	
3	**Compliance updates: Review and scrutiny of the Safety Performance Report** ● It was noted by VS that some of the KPIs in the report do not have a RAG. AC explained that the measures with a RAG are the ones to focus on. **FRA** ● AC noted two fire risk assessments (FRAs) had not been completed. A question was asked by VS as to why these had been missed. Following discussion and reflection on anniversary dates, it was agreed the FRA assessor should stick to anniversary dates. Unfortunately the reflection period meant that 2 anniversary dates were missed. The two are booked in, with 39 remaining to complete this year; anniversary dates will continue to be met. ● To help avoid duplication of actions, one option raised was setting up a monthly meeting with Savills. All actions are being logged into Risk Hub to maintain an audit trail; as Savills carried out the last assessment and are completing the current round. Notes will be added within the system to reflect this. ● Numbers are expected to rise slightly as a result of the new round of FRAs. ● FRA overdue actions have dropped to 51, a significant reduction, although more are at risk of becoming overdue. DI's team are monitoring these and holding regular meetings with contractors. AC explained that an earlier	**All**

reference to 'cladding' in a previous report should have read External Wall Construction.

- Workplans have been sent to the Regulator detailing the order of rollout.

ACTION:

- **Include the fire workplans in the report to the next HIB meeting. (DI/AC)**
- **Monthly meeting with FRA Assessor to be established (DI)**

- A review of the 2024 Firntec data is also being reviewed to ensure that all historic actions have been addressed

- ZD, noting Capital Works sits on the client side, asked which elements of contractor performance are / are not working and raised concern about the upcoming spike in actions at risk of becoming overdue. RS responded that one advantage of the restructure is that compliance will sit under the new compliance team, allowing Capital Works to focus on ensuring work is actually delivered.

- VS echoed ZD's comments that, although good progress has been made, momentum needs to be maintained. AC noted a lesson learned around the need for regular review and refresh of workplans.

- A question was asked as to whether it is known how many actions a contractor can realistically deliver.

ACTION: Provide a report to the next HIB meeting with a detailed overview of contractor performance (DI)

Changes to use of Warrant (Gas)

- RS stated that Gas servicing arrangements are set to change significantly from a legality viewpoint. The Council has previously relied on warrants for access; new guidance means warrants can no longer be used, and an injunction route must be used instead. A warrant can typically be obtained within a few days via court, whereas an injunction can take several months, though a lifetime injunction can be secured for a property. This reflects updated guidance to judges and courts, which previously relied on case law; courts are now being advised not to issue warrants.
- The Board was asked to consider the underlying reasons for non-access.

Damp and Mould

	• Cases are down 50%; technical/admin support has been utilised and the team is in a better position. As at the latest figures, D&M cases outstanding stood at 64, with the number outstanding over 12 weeks down to 20. • A question was asked by KD as to whether the scope of Awaab's Law will be expanded to include this report. AC stated this will be picked up as part of the Damp and Mould review later in the meeting. **Asbestos dip-test information** • EG gave an overview of the report. Results were not positive: of 10 properties tested, 9 were found to be inconsistent, with only 1 consistent. • ST questioned whether a set procedure exists to manage this area. • RS stated that the results are disappointing, though this is the reason the dip-test was requested; that current processes are not working (cloned data); and that the Board had previously been told old reports had been deleted, which had clearly not happened. Frustration was expressed at how long this had taken to come to light. It was agreed HIB's role is to provide this oversight and scrutiny, and that the officer and working group will discuss further outside the meeting. **ACTION: Form a working group of key officers to resolve this issue and report back through HIB. Priority for DI in his first week back (EG)** **Compliance non-access** • RS had covered most elements of this earlier in the meeting (see Changes to use of Warrant, above). In addition, Iqra has set up a monthly meeting to coordinate non-access issues across the various work streams (e.g. Gas / EICR / Stock Con) • Tenant vulnerability is being considered within the monthly meeting. Teams are requested to check for vulnerabilities prior to legal escalation. Where potential vulnerabilities are identified, Legal will pause action and colleagues work with the tenant.	
4	**Review of the revised Service Improvement Plan (SIP)** • AC presented the redesigned plan, which amalgamates actions from 25 down to 18, ranked in order of priority (Compliance / Insight and Inclusion). • A review meeting is scheduled with senior management to review progress of the plan (09/09/2026); members were encouraged to review the revised plan and feed back to AC directly. • The plan has been mapped against the regulator's requirements and is structured similarly to the Tenant Satisfaction Measures. Fire safety was identified as a top priority (1a, 1b, 1c) and could be combined together alongside Insight and Inclusion. A meeting with the regulator is scheduled for Friday, at which feedback will be received.	**AC/All**

5	**Discussion points** **Insight and Inclusion plan** ● KD shared the detailed plan with HIB. A new Data Officer has been recruited. The team continues to identify what needs to be completed, with a focus on future-proofing the Council's ability to collect data; inductions and training are planned. ● ZD asked how many tenants require contact. ● KD stated around 1,000 records remain to be completed out of just over 4,000 tenants. ● The importance of building tenant trust that data will not be misused was highlighted; the regulator had previously raised concerns regarding diversity data, so progress on the plan was welcomed. Quick wins will be presented back to tenants to demonstrate effective use of data. **Update on the D&M review** ● AC summarised the team's current work, with a comprehensive report due in September. This is being combined with input from RF and Democratic Services, to consider how it can have a positive impact re complaints. ● A more robust complaints methodology is being developed to capture the root cause behind themes and identify actions; the D&M team is analysing areas, trends and patterns to inform next steps. ● James has developed a process document, aligned with Council policy, setting out the steps to follow when a case of damp and mould is reported; customer service officers will be able to use a script when a tenant contacts the Council. Where a tenant is not making use of heating, a referral will be made to Financial Inclusion. ● Further information will be provided in September. ● A question was raised by KD regarding the draft script, specifically protected characteristics. ● AC stated that the draft scripts will be shared with key stakeholders for verification. **ACTION: D&M scripts to be shared for review. (AC)** ● The Board asked to see, at future meetings, the actions and progress made; a breakdown of cases by category and those being dealt with by contractors; assurance of compliance with Awaab's Law; and the number of emergency/significant hazards. This is part of what Bradley Amies is helping with regarding the Tracker. **ACTION: provide an update on the tracker and share the level of detail requested (AC)**	**KD/AC /All**

	Lessons learned / root cause exercise ● A couple more interviews remain to be completed; these will be shared with RS. The report will be brought to a future HIB meeting.	
6	**Housing Influence Panel (HIP) feedback: review of the submitted report** ● ST gave an overview of the report ● RS thanked ST for the clear report and the actions highlighted ● AC noted the clarity on the performance information HIP are requesting.	**ST/KD**
7	**AOB** ● AC proposed bringing back Chris Lambert (external consultant), who has worked with the team previously. This is to provide additional assurance and challenge, especially during the transition to the new compliance restructure. The Board agreed.	**All**
8	**Private and confidential matters** None recorded.	

Date of next meeting: 17.09.2026

ACTION TABLE

Agenda Item	Action	Responsible	Deadline
Complaints	Review ongoing involvement in meetings and reports regarding complaints and who is responsible	RS	17.09.2026
Compliance (FRA)	Include the fire workplans in the report to the next HIB meeting.	DI/AC	17.09.2026
Compliance	Monthly meeting with FRA Assessor to be established	DI	17.09.2026
Compliance (Fire)	Provide a detailed overview of contractor performance	DI	17.09.2026
Compliance (Asbestos)	Form a working group of key officers to resolve asbestos data/process issues and report back through HIB.	EG	Priority: first week back from DI leave
Compliance (D&M)	D&M scripts to be shared for review	AC	17.09.2026
Compliance (D&M)	provide an update on the tracker and share the level of detail requested	AC	17.09.2026

Compliance	RS to liaise with Full Council regarding the option to receive training on Regulator and H&S responsibilities (strengthening scrutiny)	RS	17.09.2026
Complaints	AC to review complaints performance report options and report back to next meeting	AC	17.09.2026
HIP	AH to communicate Tap / Water Butt / hosepipe clarification via (e.g.) the tenants' magazine (once clarification received)	AH	17.09.2026
Compliance	DI to provide GMT report re: AICO pilot and funding	DI	17.09.2026
SME	To send closure report to March HIB.	CL	Complete
Compliance	Communication message re: staff / data quality - information being in the right place.	RS	Complete
Compliance	Tenant Data Project Update	RS	Complete
	AC to Include Damp and Mould update	AC	Complete
HIP	To collaborate with the new member, train and invite to observe the board in March, and become a full member in April.	AH	Complete
HIP	For GMT to attend a future Housing Influence Panel to meet the member	GMT	Complete
	AC to liaise with Milan re: options for D&M policy approval	AC	Complete
Compliance	AC to share contractor run rates and continue to develop graph in FRA report	AC	On-going
HIP	Create a 1-page summary of HIB for HIP members going forward.	AH	On-going
Service Improvement Plan	To share updates and plans for Service Improvement Plan at the next Housing Improvement Board	AC	On-going
Compliance	Review the refreshed RAs (when available)	SK	BAU
Compliance	Provide a full breakdown of the overdue FRA actions for review at the May HIB.	DI / AC	On-going
Compliance	Action: AC to develop FRA mitigation plan following the management meeting on the 18th March)	AC	11.06.2026

Compliance	DI to pause introducing external resource and review viability of internal capacity first	DI	11.06.2026
Compliance	DI to provide full asbestos report for next meeting.	DI	10.06.2026
Compliance	AC to provide a monthly appendix summarising overdue actions and trends.	AC	10.06.2026
D&M	AC to report back next month on Damp & Mould stock volumes and case assurance	AC	10.06.2026
Compliance	TH to share a report of Asbestos (similar format to other compliance reports) – Q4	TH	11.06.2026
Compliance	DI / team to coordinate non-access with Matt Yates and legal team	DI / Team	On-going
Compliance	RS to liaise with Iqra re: clarity on a simultaneous approach to injunction / tenancy breach	RS	11.06.2026
Compliance	report back next month on Damp & Mould stock volumes and case assurance.	AC	11.06.2026
Compliance	DI to share portal re: AICO pilot	DI	11.06.2026
Compliance	DI to provide full asbestos report for next meeting**.**	DI	11.06.2026
Complaints	AC to review performance report options and report back at next meeting.	AC	11.06.2026
Compliance	AC to liaise with SK and RA to arrange the non-access meeting	AC	13.08.2026
Compliance	DI to share details of Yew-Tree roof	DI	9.07.2026
Compliance	DI to share / present portal re: AICO pilot to tenants at a separate meeting	DI	13.08.2026
Compliance	RS to liaise with Iqra re: clarity on a simultaneous approach to injunction/tenancy breach	RS	13/08/2026
Total Mobile	Provide update on the forward plan re: Total Mobile	AC	11.06.2026

Compliance	EG to liaise with TH re: suggested amendments to the Asbestos dip-test report	EG	9.07.2026
Compliance	EG to arrange a meeting to review Alpha Tracker and refresh the draft dip-test information.	EG	13.08.2026
Compliance	EG to liaise with TH about timing of report to GMT on FRA anniversaries.	EG	13.08.2026
Compliance	VS asked that a draft report on Damp and Mould is brought to August HIB to update members on how this is progressing, get feedback on this to feed into the September report.	AC	13.08.2026
HIP	RS to pick up the resident participation in the Equalities Working Group with Faye Jenkins.	RS	13.08.2026
HIB	AC to share these questions (root cause analysis) with RS and tenant representatives before forming these into a report for the RSH for September.	AC	13.08.2026

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Safety Performance Report

1. Purpose of Report

To provide Housing Improvement Board with an update on key areas of Housing and Asset management, including the 'Big 6' compliance themes (plus Damp & Mould).

2. Recommendation

To NOTE the contents of the report and provide guidance on the considerations within 'additional information' sections

3. Detail

Figure 1: Month end figures

		Feb 26	Mar 26	Apr 26	May 26	Jun 26	Jul 26	Aug 26	RAG
1(a).	FRA % compliance (assessment)	100	100	100	100	100	99		
1(b).	FRA % compliance (action)	95	95	95	95	94	97		
1(c).	FRA No. outstanding (action)	3,117	2,876	2,691	2,447	2,330	1,784		
1(d).	FRA No. overdue (action)	115	160	148	124	117	51		
2.	Gas % compliance	100	100	100	100	99.98	100		
3.	LOLER % compliance	100	100	100	100	100	100		
4.	Legionella % compliance	100	100	100	100	100	100		
5.	Electrical % compliance	98.1	98.3	98.38	97.91	98.21	98.10		
6(a).	Asbestos % communal compliance (assessment)	100	100	100	100	100	100		
7(a)	D&M No. outstanding	233	142	104	106	101	64		
7(b)	D&M No. outstanding >12 weeks	119	41	30	31	22	20		
7(c)	D&M No. new cases reported	60	67	43	26	51	25		

Fire Risk Management

1. Detail

Figure 2 highlights (as of 07/08/26) the number of current actions related to the prioritisation and risk level identified by Savills Any information in 'red' identifies the categories where actions are overdue. These actions (51 in total) are being acted upon as a matter of urgency.

Priority	Responsible function	Risk Level 1	Risk Level 2	Risk Level 3	Totals
U	Urgent	1 day (0)	1 day (0)	1 day (0)	**0**
A	Contractor	3 months (15 / 15)	6 months (3 / 1)	12 months (330 / 12)	348
B	Contractor	12 months (50 / 4)	18 months (4)	24 months (299)	353
C	Contractor	18 months (43)	24 months (5)	30 months (110)	158
R	Contractor Recommended	Unlimited (23)	Unlimited (1)	Unlimited (67)	91
Man1	Management function	1 month (0)	1 month (0)	1 month (0)	0
Man2	Management function	3 months (41 / 19)	12 months (4)	24 months (786)	831
Man3	Management function	6 months (0)	18 months (0)	30 months (0)	0
ManR	Management function (Recommended)	Unlimited (0)	Unlimited (0)	Unlimited (3)	3
	total	172	17	1,595	**1,784**

Figure 3 highlights the current state of actions.

Item	Feb 26	Mar 26	Apr 26	May 26	Jun 26	Jul 26	Aug 26
Contractor actions	1683	1440	1319	1134	1148	950	
A	(606)	(487)	(476)	(473)	(445)	(348)	
B	(620)	(539)	(492)	(466)	(434)	(353)	
C	(316)	(276)	(248)	(195)	(170)	(158)	
R	(141)	(138)	(102)	(98)	(99)	(91)	
(overdue)	(19)	(32)	(29)	(32)	(50)	(32)	
(overdue <60 days)	(34)	(16)	(15)	(3)	(9)	(196)	
Management actions	1434	1,436	1,372	1,215	1,182	834	
Man 1	(15)	(23)	(16)	(6)	(3)	(0)	
Man 2	(1,413)	(1,407)	(1,350)	(1,203)	(1,176)	(831)	
Man 3	(0)	(0)	(0)	(0)	(0)	(0)	
Man R	(6)	(6)	(6)	(6)	(3)	(3)	
(overdue)	(96)	(128)	(119)	(92)	(67)	(19)	
(overdue <60 days)	(52)	(16)	(2)	(38)	(8)	(23)	
Total	**3,117**	**2,876**	**2,691**	**2,447**	**2,330**	**1,784**	

2. Additional information

- **Mitigation**
  - There has been a strong emphasis on performance scrutiny and Risk Hub data analysis over the last month, which has contributed to a significant reduction in actions. The scrutiny and analysis includes…
    - Holding contractors and colleagues to account on over-due actions
    - Contractors focusing on remedial action aligned to compartmentation
    - Completion of a number of actions aligned to signage
  - An agreement has been reached with our FRA Assessor (Savills) regarding the approach to mitigating actions aligned to external wall construction. Savills have been commissioned to undertake a review of the 270 actions aligned to wall construction and report either confirming the external walls present no / limited risk or recommend that further investigation is required. The review is to take approximately 8 to 12 weeks to complete.
  - The work plans created earlier in the year have been assessed and redeveloped to ensure actions are in sequence.
  - A desktop exercise is also taking place to map the high-priority actions within the 2024 Firntec spreadsheet with Risk Hub

- **Risks / Issues**
  - A total of 41 FRAs are to be completed before the end of the calendar year. These assessments may generate additional actions to be completed.
  - There are 2 FRAs that are now overdue – these have been scheduled in with Savills
  - There are 51 overdue actions that require focus
  - There are 219 actions at risk of becoming overdue within the next 60 days

- **HIB to consider the following…**

  - Agreeing a plan for transition to the new compliance structure
  - There may be periods where the completion run rate may drop (e.g. the completion of more technical / structural actions)
  - Completion of some FRA actions may generate further work or follow-up recommendations (e.g. upgrading of emergency lighting)

Gas Servicing

1. Detail

Gas

100% compliance was achieved in this period.

2. Additional information

There were 570 completed services throughout the month. Three properties had a legal letter, but no cases required progression to court.

LOLER (Lifts)

1. Detail

100% compliance was achieved in this period.

2. Additional information

There were no lifts inspected in this period.

Legionella

1. Detail

100% compliance was achieved in this period.

2. Additional information

High risk actions will be completed within one month of the survey. Medium and low risk actions will be completed within three months of the survey. There are no concerns that these deadlines will not be met.

Electrical

1. Detail

98.10% compliance was achieved in this period.

2. Additional information

There are currently 90 properties overdue.

There are no communal areas overdue.

The team continues to work with Legal regarding non-access. To be discussed as part of the HIB agenda.

Asbestos

1. Detail

Please note – all work relating to asbestos has been temporarily paused (apart from any urgent work) until a decision is made regarding leaseholder consultation (September). Our Asset Management Consultants (Focus) will continue to work with MCP and the removals specialists EAS to plan and complete the remedial action following the above.

The rolling programme of re-inspection continues with our contractor MCP (as each report is valid for 12 months). A total of 190 surveys were completed in July.

Figure 4 highlights the status of the 17 areas of removal

Building Name	Location Description	Item	Material	Status
Block 6 Martell Court	External	Debris	Cement	Complete
1-15 Bradley Court	External	Profiled roof sheets	Cement	Complete
1-15 Bradley Court	External	Profiled roof sheets debris	Cement	Complete
2-12 Manor Road	Flat 2/4 Entrance Hall 1	Floor	Thermoplastic floor tiles & bitumen adhesive	Complete
Regency Court	Electric cupboard	Flue seal	Woven product	To be programmed
Blocks 1-4 Beacon Flats	Block 1	Cowls	Bituminous product	To be programmed
Blocks 1-4 Beacon Flats	Block 1	Undercloaking	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 1	Wall panels	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 2	Cowls	Bituminous product	To be programmed
Blocks 1-4 Beacon Flats	Block 2	Undercloaking	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 2	Wall panels	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 3	Cowls	Bituminous product	To be programmed
Blocks 1-4 Beacon Flats	Block 3	Undercloaking	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 3	Wall panels	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 4	Undercloaking	Cement	To be programmed
Blocks 1-4 Beacon Flats	Block 4	Wall panels	Cement	To be programmed
1-36 Yew Tree Court	External	Roof tiles	Cement	To be programmed

Damp and Mould

1. Detail

The Housing Repairs and Compliance Manager has commenced the review into performance of this workstream to ensure readiness for increased winter demand. The findings from the review are to be shared with HIB in September, however, please refer to the interim summary.

The team continue to focus on gaining a greater understanding of the cases over 12 weeks and have developed a programme to mitigate (20 remaining). A number of these cases are larger works (damp proof course) that require tenants to temporarily decant to another property. Other actions include repairing windows / trickle vents, extractor fans and mould treatments.

Whilst the service is responding effectively to the highest-risk cases, several operational challenges continue to affect overall performance and the Council's ability to adhere to policy timescales. Challenges include:

- Difficulties gaining entry into properties can delay inspections, surveys and remedial works (monthly meeting established to review with Legal)
- Decant processes can delay completion of works
- Aligning the functionality of the tracker with the Housing Management System to verify the performance data (meeting with Housing Performance Manager scheduled to resolve)

However, the team continue to work through cases (with the additional administration), which has helped to reduce the backlog by 50% from last month.

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Governance, Audit and Standards Committee 21 September 2026

Report of the Monitoring Officer

Quarter One Complaint Report

1. Purpose of Report

To provide Members with a summary of complaints made against the Council.

2. Recommendation

The Committee is asked to NOTE the report.

3. Detail

This report outlines the performance of the Council in dealing with complaints, including, at stage 1 those managed by the service areas, at stage 2, managed by the Complaints and Compliments Officer and at stage three passed to the Local Government Ombudsman (LGO) or Housing Ombudsman (HO).

- **Appendix 1** provides a trend analysis of complaints upheld at stage 2.
- **Appendix 2** provides a summary of the Council's internal complaints statistics.
- **Appendix 3** provides a summary of the complaints investigated by the Council formally under stage two of the Council's formal complaint procedure.
- **Appendix 4** provides a summary of the complaints determined by the Ombudsman.

2026/27

Of the 262 stage 1 complaints received overall, 36 were investigated under the stage 2 complaints procedure and 2 were investigated by the LGO. Under the stage 2 complaints procedure, 17 complaints (47%) were not upheld, 19 complaints (52%) were upheld and one was withdrawn (1%).

Further details can be found in **Appendix 2 and 3**. The Ombudsman investigated 12 complaints made against the Council. Two complaints were up held. Further details can be found in **Appendix 4**.

Included in **Appendix 1** is a trend analysis of the stage 2 complaints received that were upheld. Particular emphasis has been placed on identifying issues and reoccurring themes where complaints are upheld. Over the course of the 2026/27, the Complaints Team will further monitor these areas by department to embed learning and improve the Council's processes and practices.

2025/26

In 2025/26, for comparative data, of the 163 stage one complaints received overall, 25 were investigated under the stage 2 complaints procedure and three were investigated by the LGO. Under the stage 2 complaints procedure, 13 complaints (52%) were not upheld, 12 complaints (48%) were upheld.

4. Financial Implications

The comments from the Interim Deputy Chief Executive and Section 151 Officer were as follows:

The cost of compensation is charged either directly to the service or recognised in a central corporate budget. There are no additional financial implications associated with this report. Any significant additional budgets required, above virement limits, would require approval by Cabinet.

5. Legal Implications

The comments from the Head of Legal Services were as follows:

Whilst there are no direct legal implications arising from this report, it is important to note that the Council's approach to handling complaints is within the parameters of the following key pieces of legislation: Part III of the Local Government Act 1974 and Chapter 6 of the Localism Act 2011 (for Housing Services complaints).

6. Human Resources Implications

The comments from the Human Resources Manager were as follows:

Not applicable.

7. Union Comments

Not applicable.

8. Climate Change Implications

Not applicable.

9. Data Protection Compliance Implications

This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

Not applicable.

11. Background Papers

Nil.

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Appendix 1

Summary of complaints and compliments
1 April 2026 – 30 June 2026

Trend Analysis

The learning points show a clear pattern of recurring service issues across several teams. The dominant themes are communication failures, delays in service delivery, case management/monitoring weaknesses and complaint handling compliance.

Theme	Evidence	Frequency
Communication with residents	Reminders about responding to enquiries, acknowledging correspondence, keeping residents informed, explaining services clearly	Very High
Delays in service delivery	Follow-up repairs, pest control works, garden waste collections, contract works, escalation of cases	Very High
Case monitoring and record keeping	Monitoring repairs, action plans, ASB cases, record keeping, tracking follow-up actions	High
Complaint handling compliance	Adherence to Complaint Policy, Ombudsman Code, response times, administrative procedures	High
Staff knowledge/training	Correct diagnosis of repairs, providing accurate advice, use of correct wording with applicants	Medium
Cross-team working	Housing/Legal communication, Revenues/Customer Services coordination, tenancy/environmental issue coordination	Medium

1. Housing Operations is the highest recurring theme (5 learning actions)

- Communication with residents.
- ASB case handling and assessment.
- Complaint response times.
- Keeping residents updated on case progress.
- Clarifying service standards and expectations.

Trend:

The majority of learning points relate to **customer communication and expectation management**, rather than policy failures.

2. Housing Repairs is the second most common area (4 learning actions)

- Timely follow-up repairs.
- Pest control follow-on works.
- Damp and mould investigations.
- Managing contractor delays and customer communication.

Trend:

Housing Repairs complaints are primarily linked to **operational delays, case ownership, and communication with residents**. This suggests a need for stronger case tracking and contractor management processes.

3. Council Tax and Waste Services show emerging themes (2 learning actions each)

- Council Tax: record keeping, communication and complaint handling.
- Waste Services: timely collections, garden waste sticker delivery and assisted collections.

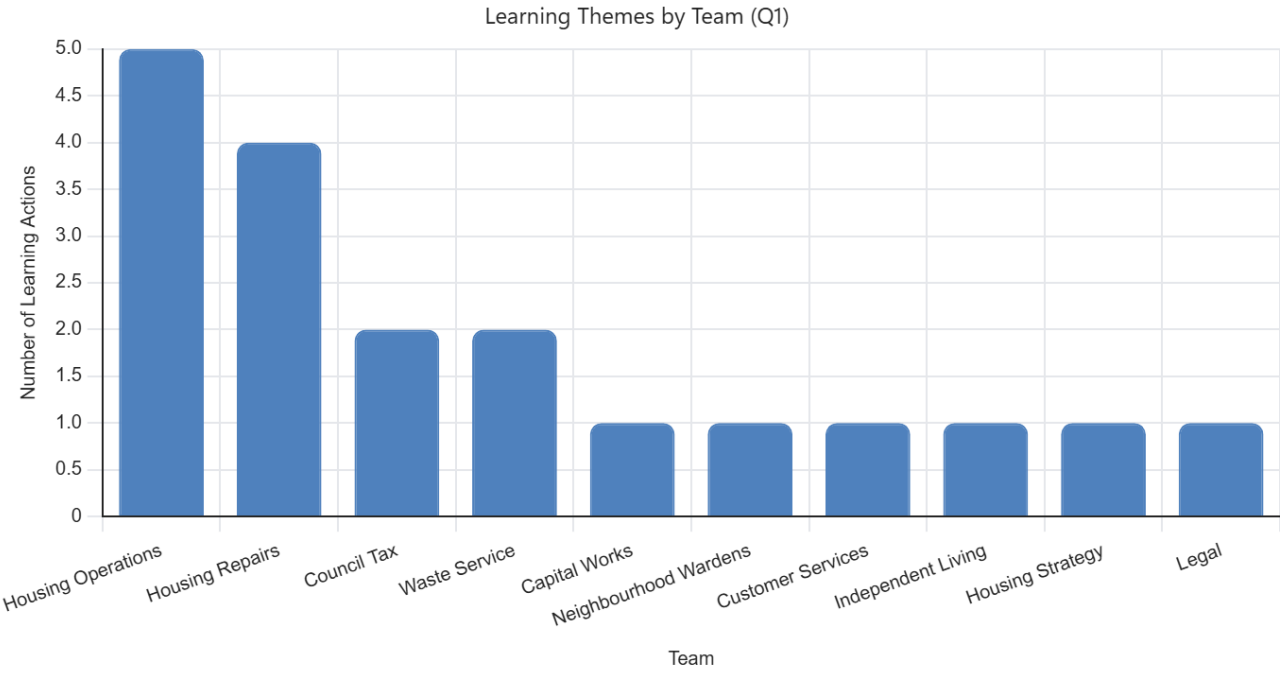
Trend:

Issues appear to stem from **administrative controls, customer responsiveness, service reliability and operational consistency**.

4. Single-occurrence learning areas

- Capital Works
- Neighbourhood Wardens
- Customer Services
- Independent Living
- Housing Strategy
- Legal

These tend to focus on communication, documentation, escalation processes and resident engagement.



Cross-Cutting Organisational Themes

Across almost all teams, the learning points can be grouped into four recurring themes:

Theme	Evidence
Communication	Most frequently recurring learning point across Housing Operations, Housing Repairs, Legal, Housing Strategy, Council Tax and Neighbourhood Wardens
Timeliness	Delays in repairs, complaints, follow-up actions and service delivery
Case Management	Monitoring cases, recording actions, escalation and follow-up
Complaint Handling	Compliance with Complaint Policy, Ombudsman Code and response times

Emerging Organisational Issues

A. Communication is the largest single cause of complaints. Learning related to:

- Responding to residents.
- Keeping customers informed.
- Explaining decisions.
- Managing expectations.
- Acknowledging correspondence.

Implication: Communication failures are likely driving complaint escalation even when operational actions are eventually completed.

B. Delays drive customer dissatisfaction and increase complaints. Learning related to:

- Repair follow-ups.
- Pest control follow-on works.
- ASB case progression.
- Contract work actions.
- Complaint responses.
- Waste collections.

Implication: Delays are often compounded by poor communication, creating a dual failure of service and customer care.

C. Complaint handling requires continued focus and several departments were reminded about:

- Complaint Policy compliance.
- Housing Ombudsman Complaint Handling Code.
- 10-day response targets.
- Following complaint procedures correctly.

Implication: Complaint handling remains a recurring organisational learning area and may benefit from periodic refresher training.

Positive Indicators

The learning demonstrates that the Complaints Team are:

- Identifying root causes.
- Reviewing procedures (e.g., pest control process).
- Introducing preventative controls.
- Improving inter-team coordination.
- Considering service specification reviews.
- Planning training and reminders for staff.

Recommendations

Immediate Priorities

1. Strengthen communication standards across all services.
2. Introduce mandatory updates to residents when service delays occur.
3. Improve monitoring of follow-up actions and contractor activity.
4. Reinforce complaint handling requirements and timescales.

Medium-Term Priorities

1. Develop consistent case-management tracking across Housing services.
2. Enhance cross-service communication between teams.
3. Review service descriptions provided to residents to manage expectations.
4. Deliver refresher training on customer communication and complaint handling.

Management Summary

The complaints learning data suggests that communication failures and delays in service delivery remain the primary drivers of learning outcomes, particularly within Housing Operations and Housing Repairs. Future improvement work should therefore focus on:

1. Strengthening resident communication standards.
2. Improving case tracking and follow-up processes.
3. Ensuring complaint-handling compliance.
4. Monitoring repair and ASB actions more proactively.

This would address the majority of the recurring themes identified in the Q1 learning dataset.

Appendix 2

Complaint Data

Departments should ensure that all complaints made to the Council are captured and recorded on the complaint database. This report includes statistics for quarter 1.

Breakdown of complaints over the last 3 years

Year	Stage 1	Stage 2	Ombudsman
2025/26	552	102	12
2024/25	429	81	7
2023/24	407	73	10

Breakdown of number of complaints upheld

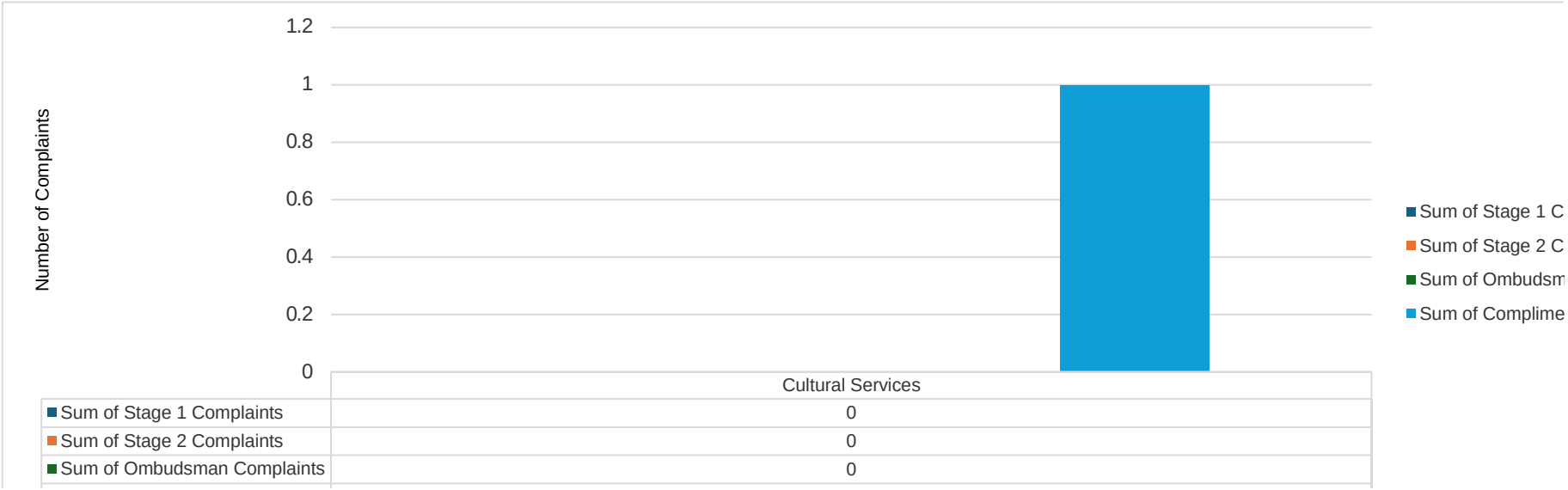
Determination	Stage 1	Stage 2	Ombudsman
Upheld	91 (39)	19 (12)	2 (1)
Not Upheld	171 (124)	17 (13)	0 (2)

Complaints received

	Total	Chief Executive	Interim Deputy Chief Executive	Interim Director of Housing, Environmental Health and Communities	Interim Director of Planning and Economic Development	Interim Director of Environment and Leisure	Monitoring Officer	LLeisure
Number of Stage One complaints	262 (163)	0	26	108	13	114	1	0
No. of complaints concluded under Stage Two	36 (25)	0	4	22	3	7	0	0
No. of complaints determined by the Ombudsman	2 (3)	0	0	2	0	0	0	0

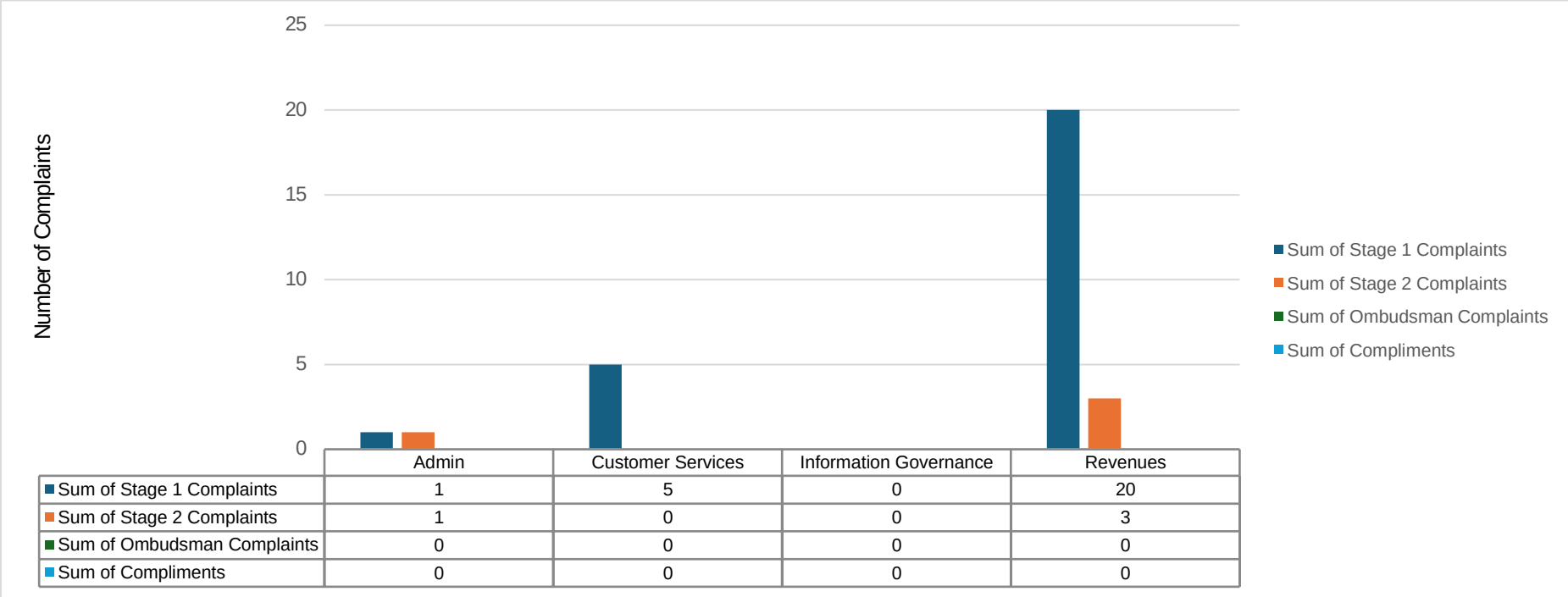
Breakdown of complaints and compliments by department and section

Chief Executive's Department



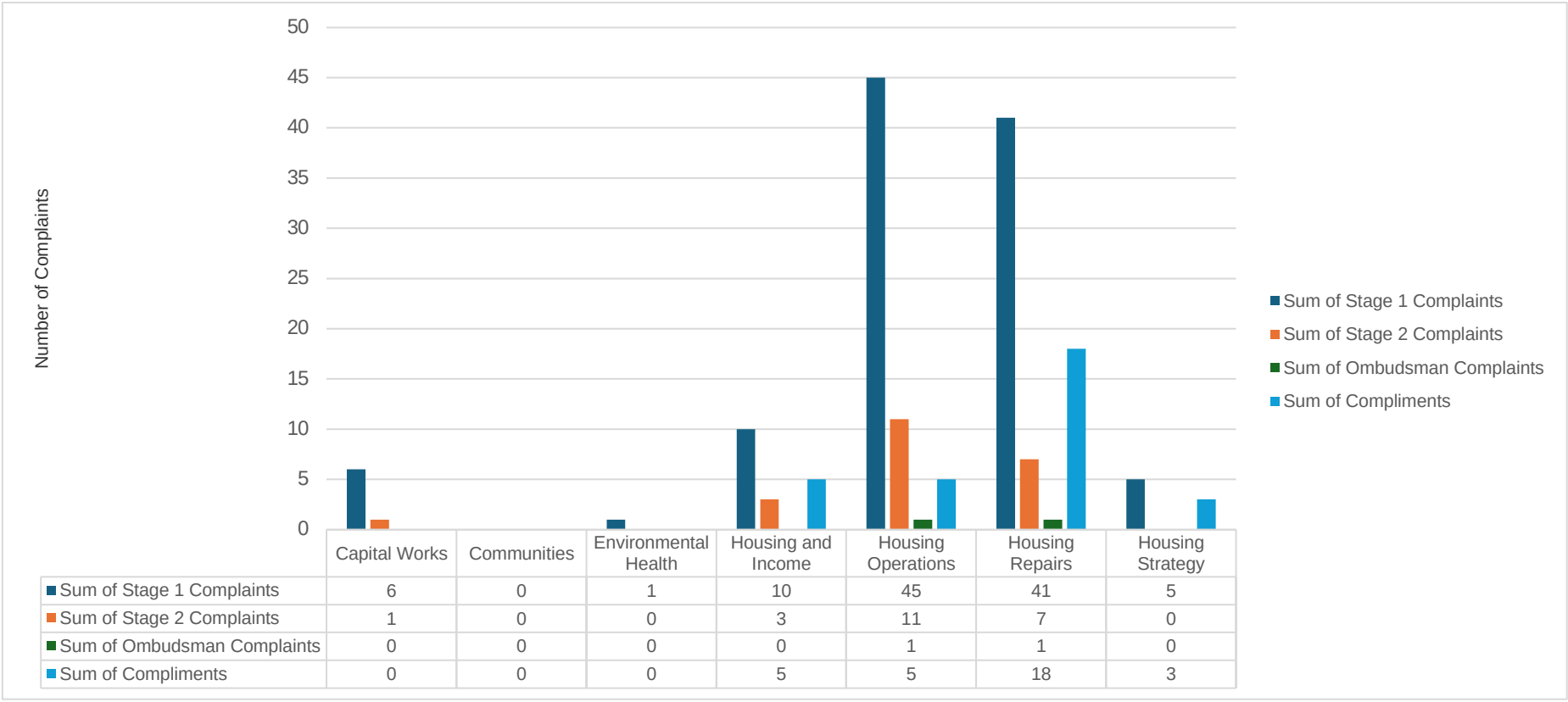
	Cultural Services
Sum of Stage 1 Complaints	0
Sum of Stage 2 Complaints	0
Sum of Ombudsman Complaints	0

Interim Deputy Chief Executive's Department



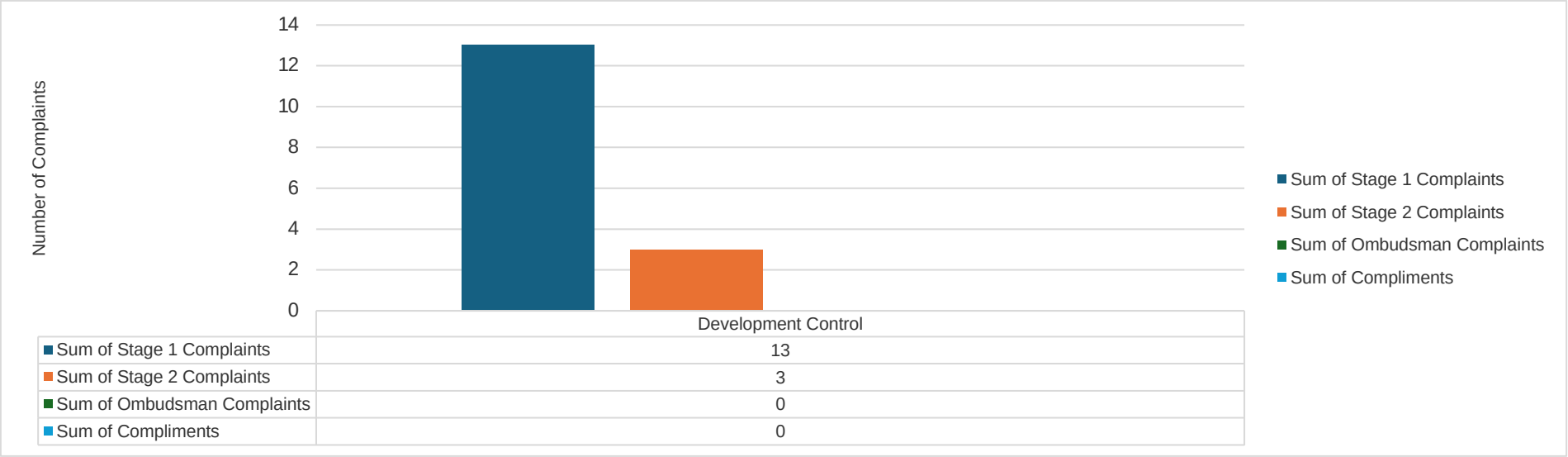
	Admin	Customer Services	Information Governance	Revenues
Sum of Stage 1 Complaints	1	5	0	20
Sum of Stage 2 Complaints	1	0	0	3
Sum of Ombudsman Complaints	0	0	0	0
Sum of Compliments	0	0	0	0

Interim Director of Housing, Environmental Health and Communities Executive's department



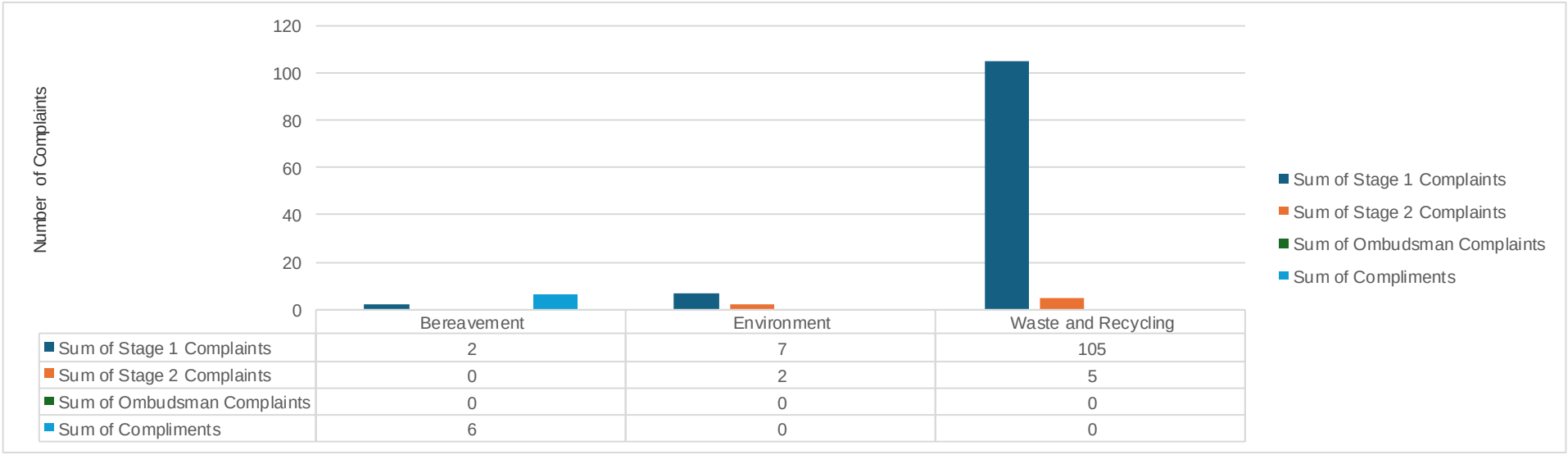
	Capital Works	Communities	Environmental Health	Housing and Income	Housing Operations	Housing Repairs	Housing Strategy
Sum of Stage 1 Complaints	6	0	1	10	45	41	5
Sum of Stage 2 Complaints	1	0	0	3	11	7	0
Sum of Ombudsman Complaints	0	0	0	0	1	1	0
Sum of Compliments	0	0	0	5	5	18	3

Interim Director of Planning and Economic Development



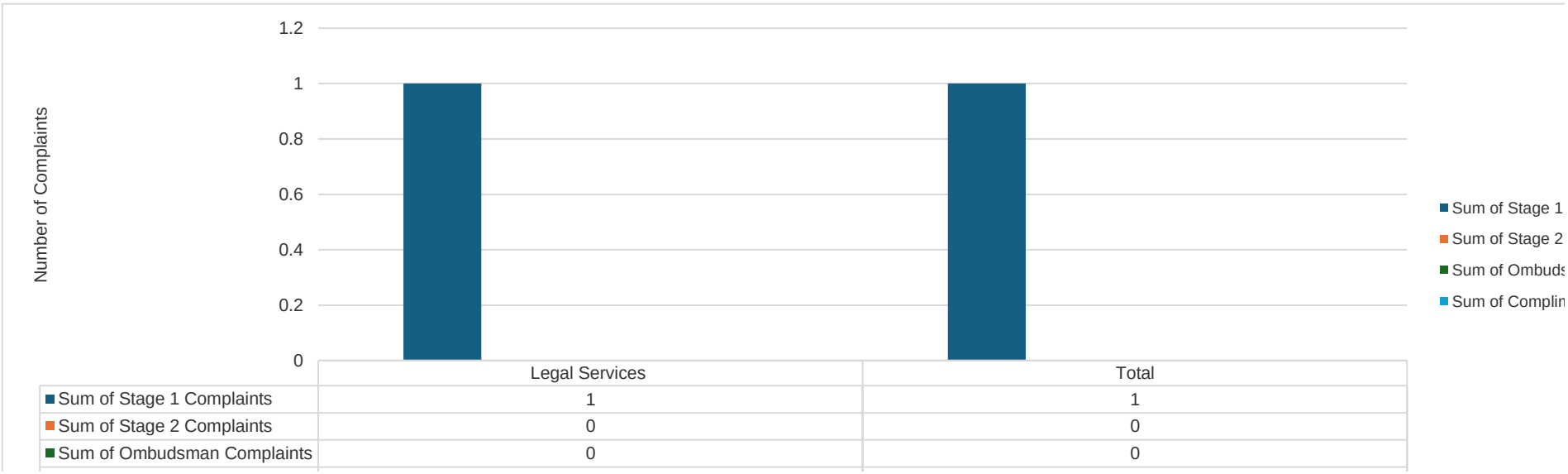
	Development Control
Sum of Stage 1 Complaints	13
Sum of Stage 2 Complaints	3
Sum of Ombudsman Complaints	0
Sum of Compliments	0

Interim Director of Environment and Leisure Director's Department



	Bereavement	Environment	Waste and Recycling
Sum of Stage 1 Complaints	2	7	105
Sum of Stage 2 Complaints	0	2	5
Sum of Ombudsman Complaints	0	0	0
Sum of Compliments	6	0	0

Monitoring Officer's Department



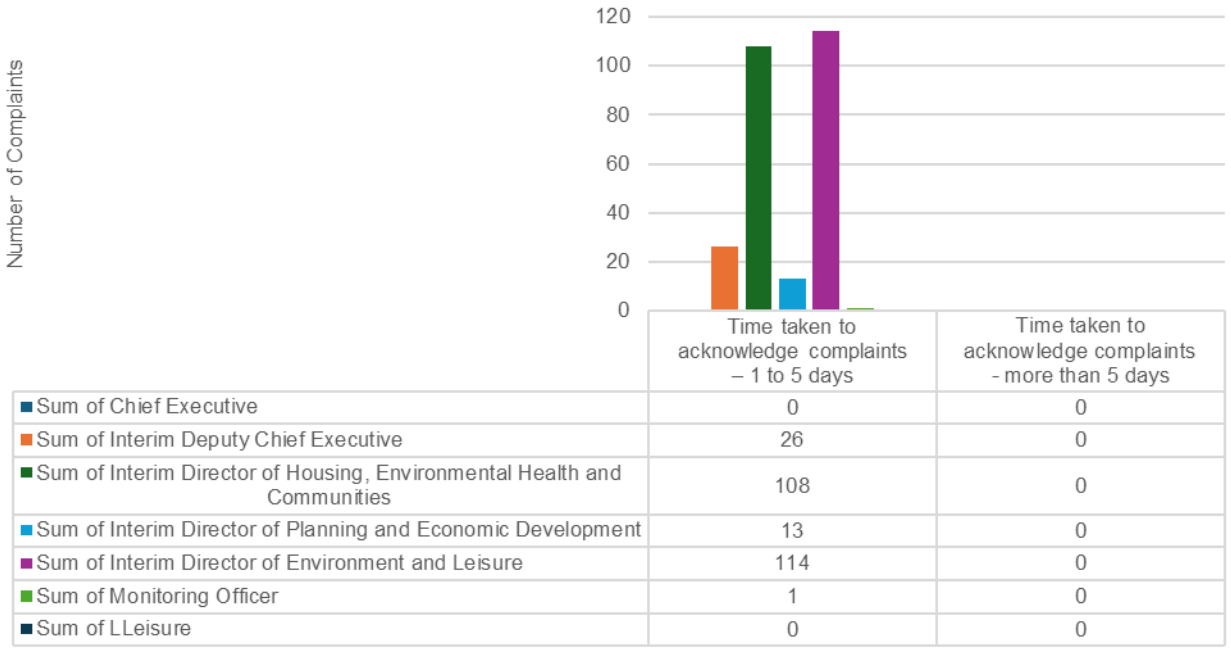
	Legal Services	Total
Sum of Stage 1 Complaints	1	1
Sum of Stage 2 Complaints	0	0
Sum of Ombudsman Complaints	0	0

Liberty Leisure Ltd

	Bramcote Leisure Centre	Chilwell Leisure Centre	Kimberley Leisure Centre	Total
Sum of Stage 1 Complaints	0	0	0	0
Sum of Stage 2 Complaints	0	0	0	0
Sum of Ombudsman Complaints	0	0	0	0
Sum of Compliments	0	0	0	0

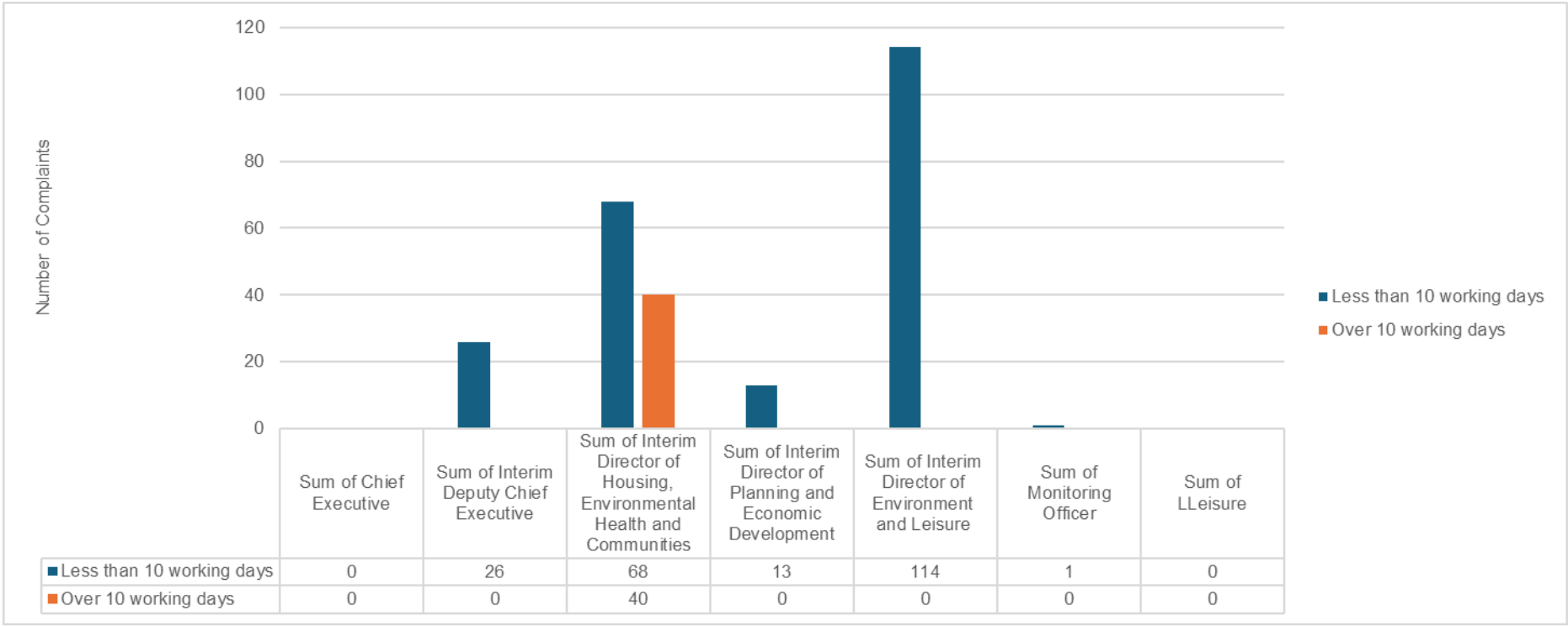
STAGE 1 - FORMAL COMPLAINTS TO THE SERVICE DEPARTMENT

Time taken to acknowledge receipt of stage one complaints:



	Time taken to acknowledge complaints – 1 to 5 days	Time taken to acknowledge complaints - more than 5 days
Sum of Chief Executive	0	0
Sum of Interim Deputy Chief Executive	26	0
Sum of Interim Director of Housing, Environmental Health and Communities	108	0
Sum of Interim Director of Planning and Economic Development	13	0
Sum of Interim Director of Environment and Leisure	114	0
Sum of Monitoring Officer	1	0
Sum of LLeisure	0	0

Time taken to respond to stage one complaints:



	Sum of Chief Executive	Sum of Interim Deputy Chief Executive	Sum of Interim Director of Housing, Environmental Health and Communities	Sum of Interim Director of Planning and Economic Development	Sum of Interim Director of Environment and Leisure	Sum of Monitoring Officer	Sum of LLeisure
Less than 10 working days	0	26	68	13	114	1	0
Over 10 working days	0	0	40	0	0	0	0

Directorate / Section	Interim Director of Housing, Environmental Health and Communities	
	Number responded to outside of 10 working days	**Number of complaints where an was extension sought**
Housing Operations	15	5
Housing Repairs	23	6
Housing Strategy	1	1
Housing Income	1	0
TOTAL	**40**	**12**

Compensation payments

The last three financial years compensation payment totals have been included below together with the current amount issued in 2026/27.

Year	Stage 1	Stage 2	Stage 3
2023/24	£3,500	£22,459	£6,270
2024/25	£3,100	£22,756	£4,400
2025/26	£24,685	£20,800	£1,000
2026/27	£8956.51	£3,600	£950

Appendix 3

Stage 2 - Formal Complaints

36 formal complaints have been responded to in the first quarter; all of which were acknowledged within the 5 working day timescale.

All complaints were responded to in 20 working days.

Time taken to respond to stage two complaints:

	Total	Chief Executive	Interim Deputy Chief Executive	Interim Director of Housing, Environmental Health and Communities	Interim Director of Planning and Economic Development	Interim Director of Environment and Leisure	Monitoring Officer	LLeisure
Less than 20 working days	36	0	4	22	3	7	0	0
Over 20 working days	0	0	0	0	0	0	0	0

Housing Repairs

Complaint Detail	Outcome	Learning	Compensation/Remedy
Resident experienced a roof leak, prolonged rodent infestation, delays in pest removal, delayed replacement of loft insulation, failure to identify and block access points and a two-month delay in registering the complaint.	**Upheld.** The Council accepted that incorrect advice at the outset caused delays to both roofing and pest-control works. The complaint was also not registered promptly.	Better diagnosis of repair issues on first visit; improved pest-control follow-up; ensure access points are identified and blocked; improve complaint handling processes.	**£1,000**
Resident reported a long-term rodent problem and believed neighbouring environmental issues contributed to the infestation. Environmental concerns at the neighbouring property were not addressed promptly.	**Upheld.** Whilst causation could not be definitively proven, the Council accepted delayed management of environmental concerns may have exacerbated the problem.	Improve environmental risk escalation, strengthen coordination between teams and monitor long-term cases more effectively.	**£300**
Complaint regarding failed flooring works, disposal of laminate flooring and allegedly removed paving slabs.	**Not Upheld.** The Council concluded replacement works were completed appropriately and found no evidence that officers acted incorrectly.	No significant learning identified.	Re-offer of **£350 goodwill payment** previously offered.
Resident alleged property taps or water supply caused skin irritation.	**Not Upheld.** Investigations and confirmation from Severn Trent found no fault with the water supply or taps.	None identified.	None
Delays in completing chimney repairs and rodent-proofing works after scaffolding could not initially be erected due to	**Upheld.** Repairs team failed to proactively progress outstanding works and failed to identify and block rodent	Improve repair monitoring and ensure pest-control recommendations are completed promptly.	**£500**

Complaint Detail	Outcome	Learning	Compensation/Remedy
vegetation. Follow-up actions were not monitored effectively.	ingress points.		
Resident dissatisfied with landscaping and garden works carried out by the Council.	**Not Upheld.** Investigation found the Council completed all works within its responsibility and no commitment existed for wider landscaping.	Inspection outcomes should be confirmed more clearly in writing.	None
Damp and mould complaint where specialist contractor recommendations were not acted upon promptly and damage to belongings was not properly recognised.	**Upheld.** Council accepted delays following contractor recommendations and acknowledged impact on resident's possessions.	Improve contractor management, damp investigations and communication where delays occur.	**£250**

Housing Operations

Complaint Detail	Outcome	Learning	Compensation/Remedy
ASB incidents involving a neighbour were reported but not properly assessed or progressed.	**Upheld.** Council accepted that reports were not correctly assessed despite appropriate referral to mediation.	Improve ASB decision-making and communication with residents.	**£100**
Complaint related to issues already investigated through previous complaints and Housing Ombudsman review.	**Not Upheld.** No new evidence identified.	None.	None
Resident's correspondence was repeatedly misdirected, sent to the wrong teams or lost entirely.	**Upheld.** Poor communication handling caused confusion and distress.	Customer Services reminded of responsibilities regarding correspondence handling.	**£200**
Housing and Legal teams failed to respond to enquiries fully or in a reasonable	**Upheld.** Communication standards fell below expectations.	Improve responsiveness and ensure enquiries are answered fully.	**£150**

Complaint Detail	Outcome	Learning	Compensation/Remedy
timeframe.			
Resident was given incorrect information during housing needs interactions following the death of a family member.	**Upheld.** Council accepted that incorrect information and wording had been used.	Staff reminder and additional training regarding communication with applicants.	**£250**
Complaint about homelessness application handling.	**Not Upheld.** Evidence showed repeated attempts to contact the applicant and the Council followed procedure.	None.	None
Resident dissatisfied with handling of ASB case and complaint process.	**Upheld.** ASB investigation itself was appropriate, but complaint handling was delayed and correspondence was not acknowledged.	Improve acknowledgement of diary sheets and communication during investigations.	**£100**
Resident sought permission for a shed larger than policy allowed and believed expectations had not been explained.	**Upheld.** Lack of verbal clarity identified, but Council policy had been applied correctly.	Improve information provided during property viewings and home visits.	None
Residents challenged communal cleaning service charges believing no cleaning service was provided.	**Upheld.** Charge was applied correctly, but communication regarding what the charge covered was poor.	Improve explanations of communal service charges.	None
Damp complaint subsequently withdrawn.	**Withdrawn.**	N/A	None
Complaint response exceeded statutory 10-day response timeframe and delay was not communicated.	**Upheld.** Complaint handling process was not followed correctly.	Strengthen monitoring of complaint deadlines and communication of delays.	**£50**

Housing Income

Complaint Detail	Outcome	Learning	Compensation/Remedy
Resident alleged the Housing Income Team cancelled direct debit payments.	**Not Upheld.** Evidence showed payments had been cancelled by the resident rather than officers.	Multiple account names may cause future payment processing issues.	None
Complaint about six-day telecare/Tunstall outage and alleged welfare concerns.	**Not Upheld.** Fault was attributable to Openreach infrastructure rather than the Council. Appropriate resident notification was provided.	None.	None
Challenge to tenancy termination debt after tenancy ended.	**Not Upheld.** Council followed correct legal process and liability remained valid.	None.	None

Council Tax / Revenues

Complaint Detail	Outcome	Learning	Compensation/Remedy
Council Tax enquiry was not answered directly and only addressed through complaint correspondence.	**Upheld.** Council accepted a more proactive response should have been provided.	Improve response times and ownership of customer enquiries.	Apology
Resident received court summons after communication failures between Revenues and Customer Services.	**Upheld.** Poor internal communication and record keeping resulted in unnecessary enforcement action.	Improve record keeping, inter-team communication and complaint administration.	Summons withdrawn and payment plan established
Resident disputed council tax recovery and enforcement action over multiple years.	**Not Upheld.** Investigation confirmed statutory notices were correctly issued and	None.	None

Complaint Detail	Outcome	Learning	Compensation/Remedy
	recovery procedures followed.		

Parks / Environment (Parks)

Complaint Detail	Outcome	Learning	Compensation/Remedy
Resident dissatisfied with delays in updates regarding enforcement action against a dog owner.	**Upheld.** Enforcement action was appropriate but communication was delayed.	Improve resident communications during investigations.	Apology
Complaint regarding installation of inclusive play equipment funded through a grant scheme.	**Not Upheld.** Decisions were made within approved funding frameworks.	Equality and diversity section added to future grant applications.	None
Objection to community events being held in a local park.	**Not Upheld.** Council balanced resident impact against wider community benefits.	None.	None

Environment (Waste)

Complaint Detail	Outcome	Learning	Compensation/Remedy
Complaint concerning refusal to collect tarmac and multiple missed-bin reports.	**Not Upheld.** Tarmac was correctly classified as non-household waste and procedures were followed.	None.	None
Resident experienced delays receiving a garden waste sticker and collection issues.	**Upheld.** Service standards were not met.	Improve sticker distribution and collection reliability.	Additional collection and hand-delivered sticker
Assisted collections were repeatedly missed and waste teams failed to collect several bins.	**Upheld.** Confusion regarding the property's location contributed to repeated service failures.	Reinforce assisted collection procedures.	**£150**
Complaint handling process failed because	**Upheld.** Administrative errors occurred although the	Improve complaint administration and	Apology

Complaint Detail	Outcome	Learning	Compensation/Remedy
acknowledgements were not sent and investigation was incomplete.	substantive issues were addressed.	investigation standards.	

Planning

Complaint Detail	Outcome	Learning	Compensation/Remedy
Objection to planning approval due to concerns regarding flooding risk.	**Not Upheld.** Planning officer correctly applied national and local planning policies.	None.	None
Complaint seeking removal or relocation of Virgin Media cabinets.	**Not Upheld.** Cabinets constituted permitted development and Council lacked powers sought by complainant.	None.	None
Resident dissatisfied with lack of updates on an ongoing planning enforcement investigation.	**Not Upheld.** Investigation remained active, however communication could have been better.	Introduce proactive six-monthly updates for open cases.	None

Capital Works

Complaint Detail	Outcome	Learning	Compensation/Remedy
During nearby development works, contractor entered resident's property, used water supply and restricted driveway access for an extended period. Residents also raised concerns regarding boundaries and vermin.	**Upheld.** Council accepted failures regarding access arrangements and contractor conduct but found no evidence of boundary encroachment or link to vermin.	Develop written access agreements and monitor resident impacts during construction projects.	**£200**, goodwill repairs and installation of privacy fencing

Administration

Complaint Detail	Outcome	Learning	Compensation/Remedy
Challenge to street naming and numbering arrangements for new-build properties.	**Not Upheld.** Council followed established addressing procedures correctly.	None.	None

Appendix 4

STAGE 3 – COMPLAINTS TO THE LOCAL GOVERNMENT OMBUDSMAN (LGO) /HOUSING OMBUDSMAN (HO)

Stage 3 - Ombudsman Complaint

1. Complaint against Housing Repairs (complaint concluded in 2024/25) – HO

Complaint Upheld.

Complaint

The concern raised was that the Council had not completed the damp and mould works at the complainants property.

Ombudsman's conclusion

The HO determined that Council arranged a damp and mould inspection for 27 November 2023.

This inspection was then completed on 19 January 2024 and a mould treatment carried out. This is a failing as the inspection was completed outside the landlord's policy timeframe. Although the damp and mould treatment was completed the same day, the delay in carrying out the inspection also meant this was not completed in a timely manner.

Additionally, the Council should have been more proactive in booking the appointment.

£500 was offered to complainant at stage 2 of the Council's complaint process. The HO requested that this be increased to £800. All actions were completed by the Council.

2. Complaint against Housing Repairs (complaint concluded in 2024/25) – HO

Complaint Upheld.

Complaint

The concern raised was that the Council had investigated their report of Anti-Social Behaviour (ASB) appropriately.

Ombudsman's conclusion

The HO determined that across the ASB cases, the Council took several reasonable steps in line with its policy and used a range of methods to try and assist the resident.

However, there were service failures in that the Council did not recognise the delays in acknowledging the resident's ASB reports and inconsistent explanations about what forms of evidence it would accept.

The Council were ordered to pay £150 compensation to the complainant which has been completed.

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Governance, Audit and Standards Committee 21 September 2026

Report of the Monitoring Officer

Member Code of Conduct Annual Complaints Report

1. Purpose of Report

To report to the Committee a summary of complaints under the Members' Code of Conduct between 1 April 2025 to 31 March 2026 and declarations of Gifts and Hospitality.

2. Recommendation

The Committee is asked to NOTE the report.

3. Detail

The Localism Act 2011 section 27 places the Council under a duty to promote and maintain high standards of conduct. In discharging this duty, the Council is required to adopt a Code dealing with the conduct that is expected of its Members and Co-opted Members.

The Council adopted, with minor variation, the new model Code of Conduct developed by the Local Government Association on 12 July 2023. This Code continues to be considered fit for purpose, provides clarity on the behaviour expected of Members and reflects public expectation.

A summary of complaints under the Members' Code of Conduct between 1 April 2025 to 31 March 2026 is attached at the **Appendix**, this appendix also includes information on declarations of Gifts and Hospitality.

4. Financial Implications

The comments from the Interim Deputy Chief Executive were as follows:

There are no financial implications to consider for this report.

5. Legal Implications

The comments from the Monitoring Officer/Head of Legal Services were as follows:

Section 27 of the Localism Act 2011 places the Council under a duty to have a code of conduct for Members. A review of the above summary allows the Council to ensure its current ethical framework is met within the parameters of the Localism Act 2011. It is also conducive to promoting and maintaining the standards expected by the public.

6. Human Resources Implications

Not applicable.

7. Union Comments

Not applicable.

8. Climate Change Implications

Not applicable.

9. Data Protection Compliance Implications

This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

As there is no change to policy an equality impact assessment is not required.

11. Background Papers

Nil.

Appendix

Update on Member Complaints and Gifts and Hospitality Declarations

The LGA states:

'More than 100,000 people give their time as councillors. The majority do so with the very best motives, and they conduct themselves in a way that is beyond reproach. However, public perception tends to focus on a minority who in some way abuse their positions or behave badly.

Even where behaviour does fall short most issues are resolved easily through a simple apology or through swift action from an officer, a political group or meeting chair. Reference to the Code of Conduct and a formal complaint are very much the last resort where issues remain unresolved.'

The Seven Principles of Public Life and the associated standards expected (The Nolan Principles) are: honesty, integrity, objectivity, accountability, selflessness, openness and leadership.

Section 28(7) of the Localism Act 2011 put in place a requirement for the authority to appoint at least one Independent Person whose views are to be sought, and taken into account, by the authority before it makes its decision on an allegation against a Member that it has decided to investigate.

However, the Council has taken on two Independent Persons, in line with Best Practice Recommendations to ensure the effective and timely handling of Code of Conduct complaints and to ensure the appropriate check and challenge is in place throughout the complaints process.

Code of Conduct Complaints Update for 2025/26

The number of Member Complaints received in 2025/26 has shown a increase in Borough complaints and a decrease in Parish complaints from those received in 2024/25. Further detail is provided in the tables below. Information on number of complaints for earlier three years has also been provided.

Number of Code of Conduct Complaints				
Type	**2022/23**	**2023/24**	**2024/25**	**2025/26**
Borough	2	7	2	8
Parish	6	17	7	5
Total	8	24	9	13

Origin of Borough Code of Conduct Complaints				
Type	**2022/23**	**2023/24**	**2024/25**	**2025/26**
Public	0	4	2	4
Member	1	3	0	1
Officer	1	0	0	3
Total	2	7	2	8

Origin of Parish Code of Conduct Complaints				
Type	**2022/23**	**2023/24**	**2024/25**	**2025/26**
Public	1	6	1	4
Member	2	6	6	1
Officer	3	5	0	0
Total	6	17	7	5

Type of Borough Code of Conduct Complaints (Multiple breaches can be alleged in one complaint)				
Type	**2022/23**	**2023/24**	**2024/25**	**2025/26**
Respect	0	3	0	5
Bullying, Harassment & Discrimination	1	1	0	1
Impartiality of Officers of the Council	1	4	0	1
Confidentiality & Access to Information	0	0	0	0
Disrepute	1	2	0	2
Use of Position	1	1	0	1
Use of Council Resources & Facilities	0	0	0	0
Making Decisions	0	2	2	2
Complying with the Code of Conduct	0	3	0	1
Interests	1	1	2	2
Gifts & Hospitality	0	0	0	0
Other (not an obligation under the Code)	0	0	0	0

Type of Parish Code of Conduct Complaints (Multiple breaches can be alleged in one complaint)				
Type	**2022/23**	**2023/24**	**2024/25**	**2025/26**
Respect	2	13	7	5
Bullying, Harassment & Discrimination	5	13	6	4
Impartiality of Officers of the Council	0	0	3	4
Confidentiality & Access to Information	0	9	2	0
Disrepute	1	8	4	4

Type of Parish Code of Conduct Complaints (Multiple breaches can be alleged in one complaint)				
Use of Position	0	10	3	0
Use of Council Resources & Facilities	0	0	0	0
Making Decisions	0	0	2	3
Complying with the Code of Conduct	1	10	5	4
Interests	0	2	0	1
Gifts & Hospitality	0	0	0	0
Other (not an obligation under the Code)	0	0	0	0

Outcome of Complaint				
Type	**2022/23**	**2023/24**	**2024/25**	**2025/26**
Failed initial intake test	1	1	0	4
No Further Action	2	17	5	6
Informal Resolution	2	2	4	0
Other Action	0	0	0	1
Formal Investigation	0	0	0	0
Ongoing	2	0	0	1
Withdrawn	1	4	0	1

The Independent Persons were involved in consideration of all the Member Code of Conduct complaints in line with the adopted arrangements for dealing with Member Code of Conduct complaints.

Gifts and Hospitality

Gifts and Hospitality acceptance rules and procedures are incorporated in the Member Code of Conduct at Chapter 5 – Part 1 of the constitution - obligation 11:

11.1 You will not accept gifts or hospitality, irrespective of estimated value, which could give rise to real or substantive personal gain or a reasonable suspicion of influence on my part to show favour from persons seeking to acquire, develop or do business with the Council or from persons who may apply to the Council for any permission, licence or other significant advantage.

11.2 You will register with the Monitoring Officer any gift or hospitality with an estimated value of at least £25 within 28 days of its receipt.

11.3 You will register with the Monitoring Officer any significant gift or hospitality with an estimated value of at least £25 that you have been offered but have refused to accept.

The intention of the rules governing Gifts and Hospitality are in place to ensure that the Council can demonstrate that no undue influence has been applied or could be said to have been applied by any service user, supplier or anyone else dealing with the Council and its stewardship of public funds.

There was one declaration made during 2025/26 by a Member and the value of the gift was £50, which was donated to the Mayor's fund.

Member Gifts and Hospitality Declarations:

Year	No of Member Declarations	Total Value
2025/2026	1	£50
2024/2025	1	£50
2023/2024	1	*£120
2022/2023	2	£35

*The gift was to attend an event on behalf of the Council.

Officers are also subject to restrictions on Gifts and Hospitality that are deemed to be acceptable under the Officers' Code of Conduct, which is set out in Chapter 5 Part 2 of the Constitution.

Each employee is personally responsible for the initial decision concerning the propriety of hospitality or gifts. Employees may accept offers of modest hospitality or gifts appropriate to the occasion and provided it is normal and reasonable in the circumstances. If there is any suggestion that improper motives may be construed they must be refused or employees must seek advice from a more senior member of management or the Chief Officer. There is no requirement to declare any gift or hospitality below the value of £25. Offers to attend purely social or sporting functions may be accepted when these are part of the life of the community or where the Council should be seen to be represented. All hospitality and gifts received personally (other than general token items, pens, diaries, etc) must be declared to the Monitoring Officer, who will note it in a register kept for that purpose.

When receiving authorised hospitality and gifts, employees must be particularly sensitive as to its timing in relation to decisions which the Council may be taking affecting those providing the hospitality or gifts. Acceptance by employees of hospitality through attendance at relevant conferences and courses is acceptable where it is clear the hospitality is corporate rather than personal.

There were ten declarations made during 2025/26 by Officers. These were small token gifts and two were to attend events, the total value was £285.There is no requirement to declare gifts and hospitality under £25, however, the declarations made by Officers often are for gifts and hospitality received under £25 and this information has been included in the update.

Officer Gifts and Hospitality Declarations

Year	No of Officer Declarations	Total Value
2025/2026	10	£285
2024/2025	7	£110
2023/2024	25	£264
2022/2023	18	£332

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Report of the Monitoring Officer

Annual Constitution Review

1. Purpose of Report

To consider amendments to the Constitution as recommended by the Constitution Task Group at its meeting on 8 June 2026, in addition to a proposed change to Financial Regulations and an update on the legislative changes to the Planning Committee's responsibilities.

2. Recommendation

The Committee is asked to:

1. **CONSIDER the amendments to the Constitution, as detailed in Appendix 2, and RECOMMEND to Council accordingly.**
2. **CONSIDER the proposed to amendment to the Financial Regulations and RECOMMEND to Council accordingly.**
3. **NOTE the legislative changes to the Planning Committee in Appendix 3, and the proposed amendments to the Constitution.**

3. Detail

Under its terms of reference, the Governance, Audit and Standards Committee is tasked with an overview of the Council's Constitution, consideration of proposed amendments or revisions and to recommend to Council amendments to this Constitution. A Task Group (the Group) was formed to consider a review of the Constitution. A number of issues were raised which resulted in recommendations for consideration at its meeting on 8 June 2026, these were timings for the Advisory Shareholder Sub Committee, the method of voting for Changes to Council Procedure Rules, and consideration of the number of ex-officio members allowed through the Constitution.

Further detail is included in **Appendix 1** and a change table reflecting the proposed amendments is included at **Appendix 2**.

Amendment to Financial Procedure Rules

The following suggested amendment to Financial Procedure Rule 14.4 in the Constitution report has been requested by the Interim Deputy Chief Executive and Section 151 Officer.

Under Section 14 of the Council's Financial Procedure Rules, Council Assets and Properties, it is proposed to update 14.4 where "Lettings, negotiations and settlement of leases and rents for Council-owned land or property (except

Council houses) where the annual rental exceeds £10,000 shall be referred to Cabinet for approval. In respect of **industrial units and commercial** properties, **including** Beeston Square ~~only~~, lettings, negotiations and settlement of leases and rent for Council owned land or property where the annual rental exceeds £100,000 shall be referred to Cabinet for approval."

This change, to expand the exception to include all industrial units and commercial properties, will more accurately reflect the Council's updated premises portfolio and allow Officers more flexibility in negotiating with potential tenants and more efficiency in agreeing and awarding new and renewed leases.

The proposed amendments have been added to the change table at **Appendix 2**.

Planning Committee Reform

The government has published regulations (The Town and Country Planning (Discharge of Local Planning Authority Functions) (England) Regulations 2026) ("Regulations"), that will take effect 31 October 2026. In summary, there will be a National Scheme of Delegation that every Council in England will have to work to. From 31 October, the call-in procedure will no longer be permitted under the new Regulations. The government's proposed Scheme of Delegation confirms which planning applications will always be determined by Planning Officers and not by Planning Committee. These are referred to as Schedule 1 applications. There is also a Schedule 2 set of application types that may be determined by the Planning Committee if they satisfy what is referred to as a 'gateway test'. The Planning Committee scheduled for November 2026 will be the first where the new delegation arrangements will apply. There will be a need to amend the Planning Committee call in procedure in the Constitution of the Council although the legislative changes will need to be reflected, and it should be noted that The Monitoring Officer has the delegation to make legislative changes to the Constitution. Further information is included in **Appendix 3.**

4. Financial Implications

The comments from the Interim Deputy Chief Executive and Section 151 Officer were as follows:

There are no additional financial implications to consider as part of this report, with any costs being contained within existing budgets.

5. Legal Implications

The comments from the Head of Legal Services and Deputy Monitoring Officer were as follows:

Section 37 of the Local Government Act 2000 requires local authorities operating executive arrangements to prepare and keep up to date a document which contains: (a) such information as the Secretary of State may direct (b) the authority's standing orders (i.e. rules of procedure) (c) the code of conduct for members (d) such information as the authority considers appropriate. Broxtowe Borough Council's Constitution is available on the Council's website.

6. Human Resources Implications

The were no comments from the Human Resources Manager.

7. Union Comments

There were no comments necessary from the Unions.

8. Climate Change Implications

There are no climate change implications are contained within the report

9. Data Protection Compliance Implications

This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

This is not a change to policy, so an Equality Impact Assessment is not required.

11. Background Papers

Nil.

Appendix 1

Advisory Shareholder Sub Committee

It was suggested that the Sub Committee meets one-hour prior to the Governance, Audit and Standards Committee to streamline the committee process and reduce the need for Councillors and Officers to attend on multiple evenings. There are currently a majority of Members which sit on both bodies, and groups could further amend membership to duplicate both committees. Caution was raised at the Task and Finish Group meeting around the possibility of Sub Committee meetings being shortened in order to accommodate the beginning of a scheduled Governance, Audit and Standards Committee meetings.

Voting for Changes Procedure Rules

Examples were given of councils which used a supermajority voting system when making Council amendments to the Procedure Rules in the Constitution. This part of the Constitution contains the rules that the Council is required to have in place by law, and those which contribute to the corporate governance of the Council which governs how the various meetings will be conducted. The current system at this Council is a simple majority vote. Although there was opposition at the Task and Finish Group meeting, which centred around changing rules that are already effective, it was agreed to recommend to the Governance, Audit and Standards Committee that a 66% majority vote be needed at full Council meetings only when making amendments to the Procedure Rules. This would ensure that changes to Procedure Rules are agreed by a greater number of Councillors.

Role of Ex-Officio Members

Currently, the Constitution states that ‘either the Leader of the Council or another Councillor being their nominated representative, and either the Leader of the Opposition or another Councillor being their nominated representative, have the right to attend any of the Council’s Committees, which are not scrutiny Committees, as ex-officio Members and to speak but not vote at it provided that such nominated representatives may not be in attendance at the same meeting as their respective Leaders, unless they have been appointed as a Member of that Committee or are acting as a substitute for a named Member.’

The Task and Finish Group considered the number of ex-officio members currently allowed in the Constitution, and it was stated that extending the ex-officio rights to the Leaders of all political groups would reinforce the behaviours of the Council by allowing group leaders formal representation at committees. A counter viewpoint stated that allowing five speakers in addition to the committee members could be disruptive.

Appendix 2

Change Table – proposed amendments are in Bold

Constitution Chapter and Number	Current Wording/Suggested Change	Reason for Change
Chapter 2 Part 8-17 Advisory Shareholder Sub Committee	Advisory Shareholder Sub-Committee 1. Number of Members: 7 (politically proportionate) 2. The Advisory Shareholder Sub-Committee may co-opt and / or otherwise engage the services of such external consultants and advisors as may be required from time to time, including but not limited to, auditors. 3. Meetings shall be held as necessary and not less than once each year. The quorum for meetings is 3 4. The Advisory Shareholder Sub-Committee acts in an advisory capacity and is not a decision-making body. 5. The Advisory Shareholder Sub-Committee shall assist, support and advise the Portfolio Holder for Resources and Personnel Policy and the Cabinet in its exercise of the Council's function as the shareholder of the Council's companies. 6. Without prejudice to the generality of clause 5 above, the Advisory Shareholder Sub- Committee shall consider the business plans and financial performance of the Council's companies in respect of which it may advise and make recommendations to the Portfolio Holder for Resources and Personnel Policy and the Cabinet in respect of its exercise of the shareholder function. 7. **The Meeting be scheduled, where appropriate, one hour before an ordinary meeting of the Governance, Audit and Standards Committee.**	To reduce the number of evenings required for Members and Officers to attend meetings.

Chapter 2 Part 2 14 Voting for Changes to Procedure Rules	14. Voting 14.1 Majority Unless this Constitution provides otherwise, any matter will be decided by a simple majority of those Members voting and present in the room at the time the question was put. 14.2 Mayor's casting vote If there are equal numbers of votes for and against, the Mayor will have a second or casting vote. There will be no restriction on how the Mayor chooses to exercise a casting vote. 14.3 Method of voting Unless a recorded vote is demanded under Rule 15.4 the Mayor will take the vote by show of hands or, if there is no dissent, by the affirmation of the meeting. 14.4 Recorded vote If 5 Members present at the meeting at any time request the names for and against the motion or amendment or abstaining from voting will be taken down in writing and entered into the minutes. Unless in the case of Committees or Cabinet where a request by 2 Members present will be sufficient to require a recorded vote to be taken. 14.5 Right to require individual vote to be recorded Where any Member requests it immediately after the vote is taken, their vote will be so recorded in the minutes to show whether they voted for or against the motion or abstained from voting. 14.6 Recorded votes at budget meetings A recorded vote is required when Members take formal decisions about expenditure on local services and Council tax levels for the year ahead. 14.7 Voting on appointments If there are more than 2 people nominated for any position to be	To ensure that changes to Procedure Rules are agreed by a greater number of Councillors.

	filled and there is not a clear majority of votes in favour of 1 person, then the name of the person with the least number of votes will be taken off the list and a new vote taken. The process will continue until there is a majority of votes for one person. **14.8 <u>Voting to change Procedure Rules</u>** **Any vote at full Council to change Procedure Rules contained within Chapter Two of the Constitution will require a 66% majority of those Members voting and present in the room at the time the question was put.**	
Chapter 2 Part 2 Role of Ex-Officio Members	Suggested wording The Annual Meeting will: 1.2.4 note that either the Leader of the Council or another Councillor being their nominated representative, and either the Leader of the Opposition or another Councillor being their nominated representative, **and the Leader of any other recognised group, or their nominated representative**, have the right to attend any of the Council's Committees, which are not scrutiny Committees, as ex-officio Members and to speak but not vote at it provided that such nominated representatives may not be in attendance at the same meeting as their respective Leaders, unless they have been appointed as a Member of that Committee or are acting as a substitute for a named Member.	To reinforce the behaviours of the Council by allowing group leaders formal representation at committees
Chapter 4 Part 1 Section 14	Lettings, negotiations and settlement of leases and rents for Council-owned land or property (except Council houses) where the annual rental exceeds £10,000 shall be referred to Cabinet for approval. In respect of **industrial units and commercial** properties, **including** Beeston Square ~~only~~, lettings, negotiations and settlement of leases and rent for Council owned land or property where the annual rental exceeds	This change, to expand the exception to include all industrial units and commercial properties, will more accurately reflect the Council's updated premises

Financial Procedure Rules 14.4 Council Assets and Properties	£100,000 shall be referred to Cabinet for approval.”	portfolio and allow Officers more flexibility in negotiating with potential tenants and more efficiency in agreeing and awarding new and renewed leases.

Appendix 3

Planning Committee Reform

This report outlines the set of changes required to be made to the constitution before 31 October 2026 as a result of mandatory Planning Committee reform and the Regulations introduced to achieve this. These are set out in the Town and Country Planning (Discharge of Local Planning Authority Functions) (England) Regulations 2026. (the **Regulations**).

1. Planning Committee reform

1.1. The government has introduced a national scheme of delegation in effect from 31 October 2026. This is to ensure that planning committees can work as effectively as possible and focus on those applications for complex or contentious development where local democratic oversight is required.

1.2. The changes introduced by the Regulations are:

1.2.1. what matters will in future be determined by officers and which could be determined by Planning Committee, and

1.2.2. the size of Planning Committee.

2. Two-tier approach to who determines applications

2.1. The Regulations adopt a two-tier approach with the aim of giving greater clarity and consistency about who in a local planning authority will make planning decisions.

2.2. Schedule 1 sets out the types of application which must in all circumstances be delegated to officers. These include applications for planning permission for householder, minor residential (up to 10 dwellings) and minor commercial development, as well as a number of supplementary and technical consents.

2.3. Schedule 2 comprises the remaining applications. The Regulations provide for a ‘nominated member’ and ‘nominated officer’ to agree to refer a proposal to determine a Schedule 2 application to a committee if in their view the proposal raises—

2.3.1. one or more issues of economic, social or environmental significance to the local area, or

2.3.2. one or more significant planning matters having regard to the development plan and any other material considerations.

These are known as the “Gateway Tests”.

2.4. The Regulations stipulate that any Schedule 2 application that is not referred to a committee in accordance with the Gateway Tests must be determined by an officer of the authority. Guidance is given on what is considered to be significant when applying these tests.

2.5. The nominated member is proposed to be the Chair of Planning Committee (or in their absence the Vice-Chair), and the nominated officer is proposed to be the (Interim) Director of Planning and Economic Development (or in their absence the 'Planning Manager').

2.6. If there is not an arrangement to refer an application to Planning Committee, then the application must be determined under officer delegation.

2.7. The Annex to this report lists the Schedule 1 and Schedule 2 applications.

2.8. Where a planning function is not listed in either Schedule 1 or 2, it is for the local planning authority to decide whether it should be delegated to an officer or referred to a committee or sub-committee for a decision.

2.9. It is recommended that a record is kept of any decision to bring a Schedule 2 application to committee and the committee report could also say why the application is being brought to Committee.

3. Applications which will no longer be determined by Planning Committee

3.1. Schedule 1 applications will not be able to be determined by Planning Committee and there will no longer be a right for members to refer / call in, applications to be considered by Planning Committee as is currently the case.

4. Own interest applications

4.1. Regulation 6 makes provision for "linked person" applications. This means an application from the authority itself, or a member or officer of the authority.

4.2. These fall into the same category as other applications. That is, if the application is Schedule 1, it will be delegated to the Director of Planning and Economic Development. If it is Schedule 2 and meets the gateway tests set out in paragraph 3.3 above it may be referred to Planning Committee provided both the Chair of Planning Committee and the Director of Planning and Economic Development agree to this.

5. Changes

5.1. The report describes the changes to the constitution to comply with the Regulations, failure to adopt these will result in any applications determined not in accordance with the Regulations as susceptible to judicial review.

5.2. Chapter 2 Part 8-17 Section 10 (Delegations) is replaced with the following:

The Planning Committee shall exercise those development management functions assigned to it by Schedule 2 of The Discharge of Local Planning Authority Functions Regulations 2026 and such other planning functions as are expressly reserved to it by law or this Constitution.
Where there is any inconsistency between this Constitution and The Discharge of Local Planning Authority Functions Regulations 2026, the Regulations shall prevail.

5.3. Chapter 3 Part 1 (Officer Scheme of Delegation) Section 15.5 is replaced with the following:

determine all planning applications and related matters falling within Schedule 1 of The Discharge of Local Planning Authority Functions Regulations 2026 together with all other matters not expressly reserved to Planning Committee by Schedule 2 of those Regulations.
Any reference in this Constitution to categories of planning application requiring referral to Planning Committee shall be read subject to and modified by the Regulations.

5.4. Chapter 3 Part 1 (Officer Scheme of Delegation) Section 15.12 to be added

All powers and delegations relating to development management functions shall be exercised in accordance with The Discharge of Local Planning Authority Functions Regulations 2026. In the event of any conflict between the Constitution and those Regulations, the Regulations shall prevail and this Constitution shall be construed accordingly.

Annex

Schedule 1 and Schedule 2 applications

The Discharge of Local Planning Authority Functions Regulations 2026 stipulate that Schedule 1 applications must be determined by an officer and that Schedule 2 applications could be referred to Planning Committee providing they meet two tests.

Schedule 1 applications

1. An application made under section 17(1) of the Land Compensation Act 1961 (certificates of appropriate alternative development).
2. An application made under section 26H(1) of the Listed Buildings Act (certificate of lawfulness of proposed works).
3. A householder application.
4. A minor commercial application.
5. A minor residential application.
6. An application for permission in principle.
7. An application made under section 73(1) of the Town and Country Planning Act 1990 (application to develop land without compliance with conditions previously attached) in respect of which the original planning permission was a Schedule 1 planning permission.
8. An application made under section 96A(4) of the Town and Country Planning Act 1990 (non-material changes to planning permission or permission in principle).
9. In respect of a planning obligation that the authority concerned considers is connected with a Schedule 1 approval:
    a. a request to agree to modify or discharge that obligation under section 106A(1)(a) of the Town and Country Planning Act 1990 (modification and discharge of planning obligations);
    b. an application to modify or discharge that obligation under section 106A(3) of the Town and Country Planning Act 1990 (modification and discharge of planning obligations).
10. An application made under section 191(1) of the Town and Country Planning Act 1990 (certificate of lawfulness of existing use or development).
11. An application made under section 192(1) of the Town and Country Planning Act 1990 (certificate of lawfulness of proposed use or development).
12. The submission of a biodiversity gain plan under paragraph 13(2)(a) of Schedule 7A to the Town and Country Planning Act 1990(20).
13. A reserved matters approval application in respect of an outline planning permission other than a large outline permission.
14. An application made under article 27 (1) of the Town and Country Planning (Development Management Procedure) (England) Order 2015 (applications made under a planning condition).
15. An application pursuant to provision in Schedule 2 to the Town and Country Planning (General Permitted Development) (England) Order 2015 for:
    a. prior approval, or
    b. a determination as to whether prior approval is required.

Schedule 2 Applications

1. An application for listed building consent made under section 10(1) of the Listed Buildings Act (making of applications for listed building consent).
2. An application made under section 19(1) of the Listed Buildings Act (variation or discharge of conditions of listed building consent).
3. An application for planning permission that the authority concerned considers is connected with an application of a kind specified in paragraph 1 or 2.
4. An application for planning permission that is not—
    a. a householder application,
    b. a minor commercial application, or
    c. a minor residential application.
5. An application made under section 73(1) of the Town and Country Planning Act 1990 (application to develop land without compliance with conditions previously attached) in respect of which the original planning permission was a Schedule 2 planning permission.
6. An application made under section 73A(1) of the Town and Country Planning Act 1990 (planning permission for development already carried out).
7. In respect of a planning obligation that the authority concerned considers is connected with a Schedule 2 approval:
    a. a request to agree to modify or discharge that obligation under section 106A(1)(a) of the Town and Country Planning Act 1990 (modification and discharge of planning obligations);
    b. an application to modify or discharge that obligation under section 106A(3) of the Town and Country Planning Act 1990 (modification and discharge of planning obligations).
8. A reserved matters approval application in respect of a large outline permission.
9. An application made under regulation 9(1) of the Town and Country Planning (Control of Advertisements) (England) Regulations 2007 (application for express consent to display advertisement).
10. An application made under regulation 16(1) of the Town and Country Planning (Tree Preservation) (England) Regulations 2012 (application for consent under tree preservation order).

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Governance, Audit and Standards Committee 21 September 2026

Report of the Deputy Chief Executive

Work Programme

1. Purpose of Report

To consider items for inclusion in the Work Programme for future meetings.

2. Recommendation

The Committee is asked to consider the Work Programme and RESOLVE accordingly.

3. Detail

Items which have already been suggested for inclusion in the Work Programme of future meetings are given below. Members are asked to consider any additional items that they may wish to see in the Programme.

23 November 2026	• Annual Audit Letter – External Auditors Report on the Statement of Account 2025/26 • Internal Audit Progress Report • Annual Counter Fraud Report 2025/26 • Governance Dashboard - Major Projects • Review of Strategic Risk Register • Complaints Report Quarter 2 • Constitution Review Report • Regulator Update
22 March 2027	• Audit Strategy Memorandum (External Audit) 2026/27 • Statement of Accounts 2026/27 – Accounting Policies • Statement of Accounts 2026/27 – Underlying Pension Assumptions • Internal Audit Plan 2027/28 • Internal Audit Progress Report • Review of Strategic Risk Register • Complaints Report Quarter 3 • Regulator Update

4. Financial Implications

The comments from the Interim Deputy Chief Executive were as follows:

There are no financial implications as a result of this report.

5. Legal Implications

The comments from the Monitoring Officer / Head of Legal Services were as follows:

The terms of reference are set out in the Council's constitution. It is good practice to include a work programme to help the Council manage the portfolios.

6. Human Resources Implications

The comments from the Human Resources Manager were as follows:

Not applicable.

7. Union Comments

The Union comments were as follows:

Not applicable.

8. Climate Change Implications

The climate change implications are contained within the report.

9. Data Protection Compliance Implications

This report does not contain any OFFICIAL(SENSITIVE) information and there are no Data Protection issues in relation to this report.

10. Equality Impact Assessment

As this is not a change to policy and no Equality Impact Assessment is required.

11. Background Papers

Nil.