NUNEATON AND BEDWORTH BOROUGH COUNCIL

Report to: Business Regeneration and Planning Scrutiny Panel, 6th February 2025

From: Risk Management and Performance Officer

Subject: INTEGRATED PERFORMANCE REPORT - SECOND QUARTER 2024/25

1. Purpose of Report

1.1 This integrated report seeks to provide appropriate performance information and risk data for service areas within the scope of this Panel.

1.2 The report has been adapted to reduce the volume of data (as previously reported under the former scrutiny panel arrangements) whilst still providing the Panel with sufficient information to monitor results to address issues arising.

1.3 <u>Important Note for Panel Members - Additional information</u>

Should panel members require additional information relating to performance **not fully explained by the comments supplied**, the following process is essential for the effectiveness of the meeting (to ensure that all issues can be addressed at the meeting):

- Having reviewed the report, the panel member should ask for the relevant officer(s) to attend the meeting by contacting the Chair at their earliest opportunity
- The Chair will then advise the Committee clerks to make the necessary arrangements

2. Financial Data

- 2.1 The Overview and Scrutiny Panel (OSP) should note from Q1 of the 2024/2025 financial year, the Integrated Performance Report will not have any financial data that would otherwise be included in reports sent to Cabinet. This will help mitigate any possible confusion amongst officers and elected members, with regards to duplicated financial information. It will also reduce officer time spent producing multiple reports with the same/similar financial data. Previously, financial reports have been reported to both Cabinet and OSP's, and in the case of OSP's, only the financial data relevant to that OSP was presented. This resulted in financial data being compiled and manually separated between OSP's by officers.
- The remit of the OSP panel includes scrutinising and reviewing decisions made by the executive and can "call in" a report (if stated within the report itself). Members of each OSP panel are reminded they receive links to Cabinet agendas, reports and meeting minutes which should be being reviewed. Members of the OSP may also discuss and agree whether an item should be added to the OSP work programme for scrutiny purposes, allowing a specific report or update to be provided by the Executive, Cabinet Member and/or Officer(s). Details of the "callin" process is included in the OSP Procedure Rules contained within the Constitution.

- 2.3 Each OSP should review the Forward Plan and where a decision has been made, members of the OSP should consider calling in an item if they have concerns which need discussing at a future OSP meeting. As per the December 2024 forward plan, the following financial reports are due to be considered by Cabinet in 2025
 - General Fund Budget Monitoring Q3 (March Cabinet)
 - HRA Budget Monitoring Q3 (March Cabinet)
 - Capital Monitoring Q3 (March Cabinet)
 - General Fund Revenue Outturn (July Cabinet)
 - HRA Revenue Outturn (July Cabinet)
 - Capital Outturn (July Cabinet)

3. Report Format

The report consists of three parts:

- 3.1 **Appendix A** shows the results available as at the end of the latest quarter:
 - The first page provides a summary of performance and Strategic Risk Register data within the remit of the panel, a summary of Freedom of Information and complaints and a summary of Member Enquiry Forms.
 - Subsequent pages provide more detailed information on performance in areas
 within the remit of the panel. Charts are shown for each measure and "smiley /
 sad / neutral faces", as appropriate, to indicate the performance trend.
 Comments are provided to ensure that Elected Members are made aware of
 issues relating to performance.
- 3.2 The Strategic Risk Register summary then follows (**Appendix B**). This shows the latest quarter status summary of the full register followed by the summary and current details of those risks **within the remit** of the panel.
- 3.3 Next is the latest Strategic Performance Report Executive Summary (**Appendix C**).

The Strategic Performance report has been developed to provide an overview of the Council's position using the following categories:

- Collection Measures (Council Tax, Business Rates and Rent)
- People and Service Delivery
- Processes
- Improvement

The report is reviewed monthly by Management Team. It provides concise information on positive performance, areas of improvement

and where performance is on or around target - comparing to best practice, and/or target and/or previous year, as appropriate.

4. Regulation of Investigatory Powers Act (RIPA) 2000 (covert surveillance)

4.1 An inspection report by the Office of Surveillance Commissioners highlighted the following recommendation:

"The importance of keeping the elected Councillors aware of any activity [or non-activity] under RIPA was appreciated and it was accepted that a minimal observation would be incorporated at regular intervals into officer's reports"

Consequently, Elected Members should be aware that, as at the end of this quarter, there have been no surveillance operations.

4.2 Members should note that an Individual Cabinet Member Decision was made on 6th August 2024, approving an update to the Council's Regulation and Investigatory Powers Act Guidance and Procedure, due to changes in officers, as well as a new policy related to the monitoring and surveillance in the Workplace.

The latter, provides guidance for managers and employees in relation to various processes and tools in use that may capture data and information in the workplace. In an ever increasing digital world, the policy provides information about these processes and tools and how the information may be used to monitor the workplace, in the main to ensure efficient services and safety and welfare of employees.

5. Recommendation

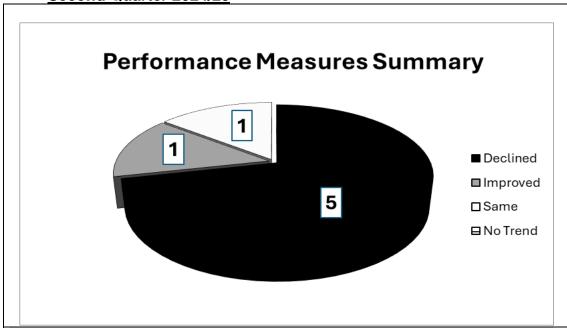
The panel is asked to scrutinise the performance information contained in this report and make any recommendations to the relevant Cabinet portfolio holder and/or Cabinet.

The panel may decide to establish an OSP Review Working Party, proposed, voted and agreed at an OSP itself, to review a specific item/activity. This would be made up of members from the OSP and the OSP would be required to set a clear scope and remit for the review.

STEVE GORE

<u>Business, Regeneration & Planning OSP – Performance Measures</u> Second Quarter 2024/25

Appendix A



Freedom of Information (FOI) / Environmental										
Information Regulations (EIR) Requests										
and Compi	and Complaints Summaries – End of Second Quarter Number Completed Late Outstanding									
	Received 20243/25 2024/25 2024/25 (2023/24) (2023/24)									
FOI / EIR Requests - 20-day target	391 (396)	389 (396)	67 (82)	2 (0)						
Complaints -10-day target	786 (847)	784 (841)	81 (98)	2 (6)						

Strategic Risk Register Summary Red Amber Green

Member Enquiry Forms (MEFs) Summary Second Quarter

Cocona Quartor					
Number Received					
2023/24 2024/25					
275	394				

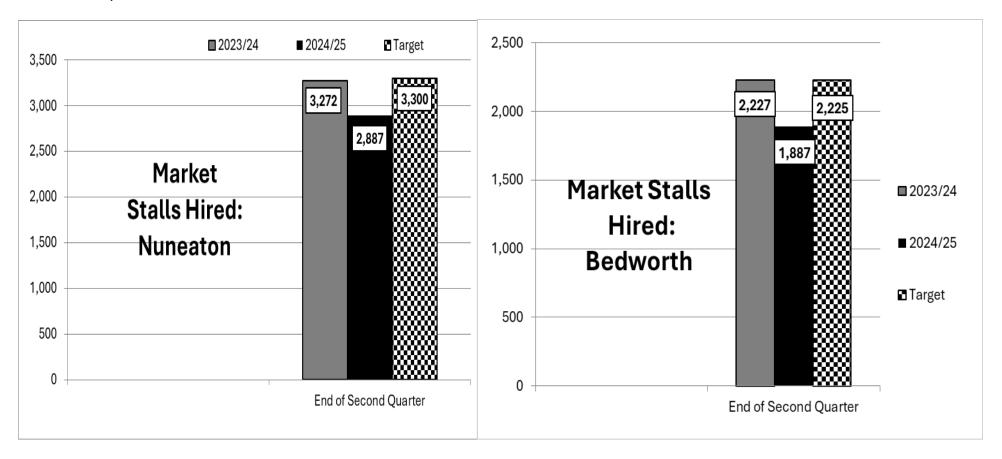
Subject trends identified in current quarter:

FOI / EIR - No trend(s) identified.

Complaints - No trend(s) identified.

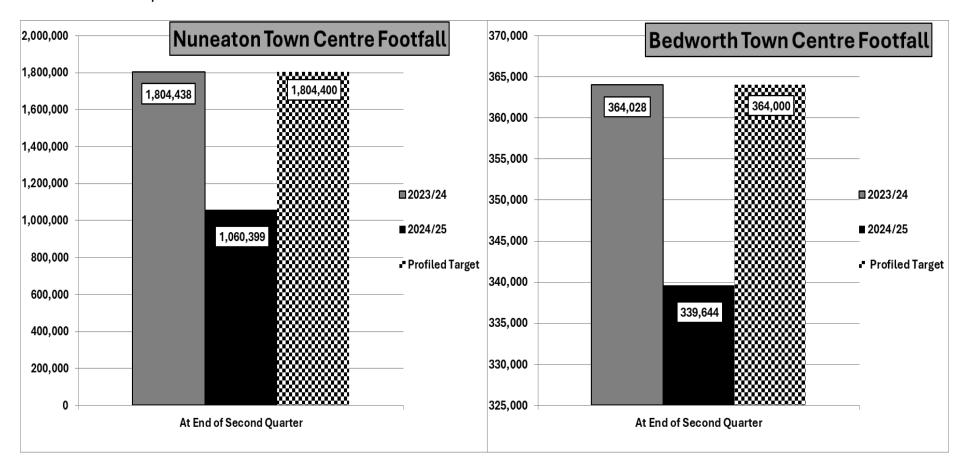
MEFs – 59 for Housing and 86 for Leisure and Culture (37%).

Measures of performance: Market Stalls Hired in Nuneaton and Bedworth



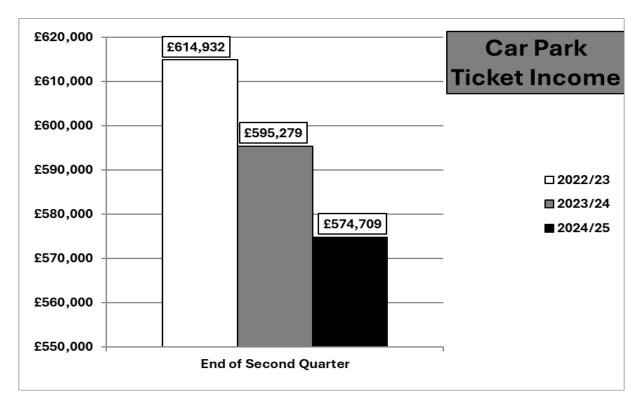
Measure details	End of Second Quarter Performance 2024/25 (2023/24)	Comments	Trend
Occupancy: The number of market stalls hired - Nuneaton	2,887 (3,272)	At Nuneaton , the street market varies in occupancy. Currently, there are 81 stalls on a Wednesday with a potential max of 110 and 86 Saturday with a potential of 110. The profiled target at the end of the second quarter is 3,300. The target for the end of the financial year is 6,500. Four markets were cancelled during the second quarter 2024/25 (2 on Wednesdays and 2 on Saturdays).	⊗
Occupancy: The number of market stalls hired - Bedworth	1,887 (2,227)	Bedworth currently trades 3 days per week – Tuesday, Friday & Saturday. There are 13 lock-up units currently in use and 25 open stalls. The occupancy of the open stalls varies, but on average it is 8 per day on Tuesday, 10 on Friday and 5 on Saturdays. The profiled target at the end of the second quarter is 2,225. The target for the end of the financial year is 4,500.	8

Main measures of performance: Footfall in Town Centres



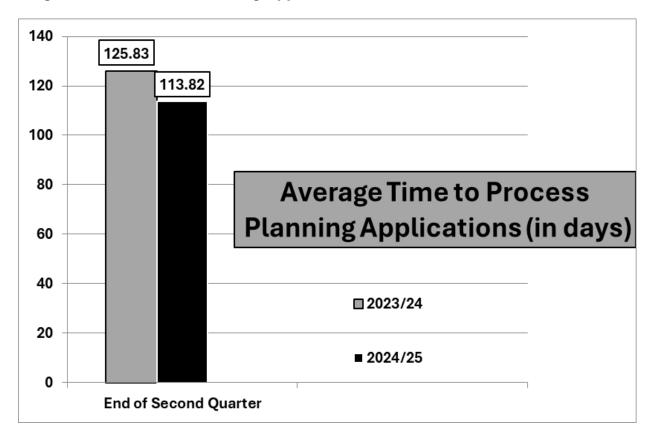
Measure details	End of Second Quarter Performance 2024/25 (2023/24)	Comments	Trend
Nuneaton	1,060,399 (1,804,438)	Data is gathered using "GEO-Sense" (all day, every day) - an automated system which is mobile 'phone-based, linked to strategically located sensors in the town centre. The profiled target at the end of the second quarter for Nuneaton is 1,804,400. The target for the end of the financial year is 3,017,000. The national average data for the same period is down 25% overall compared to 2023/24. The decline in numbers is attributed to town centre redevelopment, online shopping and on-going traffic issues in and around the town centre.	8
Bedworth	339,644 (364,028)	Data is gathered using "GEO-Sense" (all day, every day) - an automated system which is mobile 'phone-based, linked to strategically located sensors in the town centre. The profiled target at the end of the second quarter for Bedworth is 364,000. The target for the end of the financial year is 633,000. The decline in numbers is attributed to changes being seen on High Streets generally linked to people continuing to work from home and increased online shopping. Closure of key "attractors" (Boots, for example) has also impacted.	☺

Measure of performance: Car Parks Ticket Income



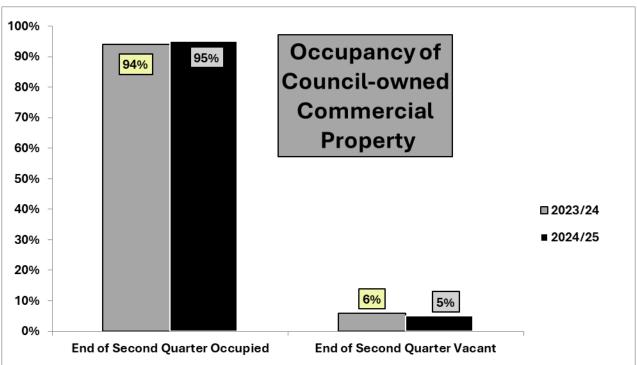
Measure details	End of Second Quarter Performance	Comments	Trend
2022/23	£614,932	No target. Similar to the town centres footfall data, the decline in income is attributed to changes being seen generally in town centres	
2023/24	£595,279	linked to people continuing to work from home and increased online shopping. Loss of Abbey Street car park for regeneration has also had	☺
2024/25	£574,709	a significant impact.	

Measure of performance: Average Time to Process Planning Applications



Measure details	End of Second Quarter Performance 2024/25 (2023/24)	Comments	Trend
Average Time to Process Planning Applications (Days)	113.82 days (125.83 days)	No target. The data is the latest 12-month period available at the end of the designated quarter (in this case, October 2023 – September 2024). Additional information relating to this period: Mean (The sum of adding all numbers in the data set and then dividing by the number of values in the set) = 113.82 days (34,829 days / 306 applications). Median (this is the middle value when the data set is ordered from least to greatest) = 60 days Mode (the number that occurs most often in the data set) = 56 days IMPORTANT NOTE: Linked to the planning section restructure, the team are clearing a backlog of long-standing applications. As a consequence, this is skewing the performance data and will continue to do so until all of the long-standing applications are: decided, withdrawn or "finally disposed of" - and for 12 months after they are decided as the figure is derived from a rolling 12 month dataset. Going forward, the intention is that the team will look to determine as many applications as possible within the nationally defined targets and this will be aided by new software being introduced in 2024/25.	\odot

Measure of performance: Occupied Council-owned Commercial Property



Measure details	End of Second Quarter Performance (vacant)	Comments	Trend
2023/24	94% (6%)	The target is 95%. 140/147 occupied as at the end September 2024 - 7 empty properties: 5 retail and 2 offices.	<u></u>
2024/25	95% (5%)		

Summary

The performance indicator trend data shows that 1 of the 7 key indicators has improved, 5 have declined and 1 has stayed the same at the end of the second quarter 2024/25.

NBBC Strategic Risk Register Summary

Second Quarter 2024/25

Full Register Summary

The total number of 'live' risks is 23.

At the end of September 2024, the breakdown according to net risk is:

- "Net red" 2 (9%)
- "Net amber" 7 (30%)
- "Net green" 14 (61%)

Therefore, 21 (91%) risks are deemed "satisfactorily managed".

Hence, the 'traffic light' reporting position is "Green".

The "net red" risks are:

- R1 Potential failure to provide adequate accommodation to meet the needs of the borough with consequent impact on the lives of residents
- R4 Failure to maintain the economic vibrancy of the borough / town centres

Business Regeneration and Planning OSP Risks Summary

There are seven strategic risks within the remit of the panel. One is "net" red, three are "net amber" and three are "net green". Details of these risks are shown below.



NBBC Strategic Risk Register

Current Version: 15th October 2024

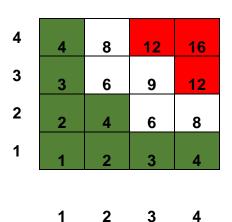
Business Regeneration and Planning OSP Risks

Risk Level Indicator Matrix and Descriptors

<u>Key</u>

Green
1-4
(acceptable)
Amber
6-9
(tolerable)
Red
12-16
(unacceptable)

ikelihood



Impact

Likelihood

- 4: Very High occurrence is most likely or has already happened and will do so again if control measures are not introduced
- 3: **High** occurrence is anticipated within the next 12 months
- 2: **Significant** occurrence is probable in the next 3 years
- 1: Low foreseeable, but not probable in the next 3 years

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

NET RED RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R4	Failure to maintain the economic vibrancy of the borough / town centres	Very High / Major (RED)	Non-constituent member of West Midlands Combined Authority (WMCA)	1: Strategic Director (P&E)	Very High / Major (RED)	1. Minutes of WMCA meetings.	Management Team / PH – B&R / BRP OSP
			2. Cross Border Delivery Partnership	2: Strategic Director (P&E)		2. Minutes of meetings of the partnership	
			3. Economic Development Strategy and on- going review.	3: Strategic Director (P&E)		3. Cabinet report	
			4. Partnership working with Chamber of Commerce and Federation of Small Businesses (FSB) and others.	4: Strategic Director (P&E)		4. Minutes of partner meetings, FSB awards	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Maintain "Invest Warwickshire" – website for available commercial property.	5: Strategic Director (P&E)		5. Website in place / Minutes of WMCA meetings.	
			6. Business Rates Local Discount scheme.	6: Strategic Director (P&E)		6. Policy in place	
			7. Think Local First supporting local businesses.	7: Strategic Director (CR)		7. Annual Procurement and Accounts Payable Report	
			8. Transforming Nuneaton master plan.	8: Strategic Director (P&E)		8. Plan in place	
			9. Employment land allocations in borough Plan.	9: Assistant Director (Planning)		9. Borough Plan in place.	
			10. Government's "Pathfinder" funding.	10: Management Team		10. Programme Board minutes and Government returns.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			11. Letting and further development of former Co-Op building.	11: Management Team		11. Site development. Regular update reports to Cabinet.	
			12. Delivery of Transforming Nuneaton master plan including "One Public Estate" grants.	12:Strategic Director (P&E)		12. Programme Board minutes.	
			13. "Long Term Plan" Government funding obtained (initiative currently on hold awaiting Govt. advice as at October 2024).	13: Strategic Director (H&CS)		13. Board minutes and Government returns. Regular update reports to Cabinet.	
			14. Bedworth visioning document completed and Transforming Bedworth Group established.	14: Assistant Director (Economy)		14. Records in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			15. Procured strategic development partner for Abbey Street, Nuneaton	15:Strategic Director (P&E)		15. Procurement and other programme management documentation	
			16. Appointed additional staff capacity for Nuneaton.	16:Strategic Director (P&E)		16. Staff in post / induction records.	
			17. Abbey Street development Phase 1 all approvals obtained and under construction.	17: Strategic Director (P&E)		17. Cabinet / Planning Committee minutes. Branding and Management Agreement (BAMA) for hotel development.	
			18. Local economic assessment completed.	18: Assistant Director (Economy)		18. Assessment in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			19. "Pathfinder" application, for Bedworth Physical Activity Hub approved and letter received confirming funding.	19: Chief Executive / Strategic Director (PS)		19. Fund-related documentation / formal agreement in place. Regular update reports to Cabinet. Contract signed.	
			20. Sport England funding (£2.5 million secured).	20: Strategic Director (PS)		20. The Council has accepted the Capital Investment Grant agreement. Regular update reports to Cabinet.	
			21. UK Shared Prosperity Fund development programme.	21: Assistant Director (Economy)		21. Investment Plan, Cabinet reports and monitoring data.	
			22. Leisure Strategy and Parks Concept Plans .	22: Strategic Director (PS)		22.Adopted Strategy and plans in place / Cabinet progress reports.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			23. Investment plan agreed under the "Pathfinder" programme.	23: Strategic Director (P&E)		23.Agreement in place.	
			24.Vicarage Street regeneration scheme in progress.	24: Chief Executive		24.Update progress reports.	
			25.Business Improvement District (BID) funding in place and operational.	25: Strategic Director (P&E)		25.Cabinet reports.	
			Planned:				
			Formulate town centres action plan (April 2025).	1: Assistant Director (Economy)		1. Strategy in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			2.New Borough Plan in place and currently under examination by the Inspectorate	2: Assistant Director (Planning)		2.New plan in place.	
			3.Parks and Green Space Strategy to be adopted (March 2025)	3:Assistant Director (Recreation and Culture)		3.Cabinet report / strategy adopted.	

NET AMBER RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R9	Failure to effectively manage Health, Safety & welfare arrangements to limit the potential for accidents and financial penalties	High / Major (RED)	1. Health and Safety Co-ordinators Group (HASCOG).	1: Assistant Director (Environment and Enforcement)	Significant / Major (AMBER)	1. HASCOG minutes.	Strategic Director (PS) / PH – P&E / BRP OSP
			2. Health & Safety policies & procedures.	2. Head of Safety and Environmental Health		2. HASCOG minutes.	
			3. Risk assessments and safe systems of work.	3: Strategic /Assistant Directors		3. HASCOG minutes and review / audit of NSHARE.	
			4. Mandatory Health & Safety training.	4: Head of Safety and Environmental Health		4.Training Records	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Designated Corporate Health and Safety Officer.	5: Head of Safety and Environmental Health		5.Officer in place.	
			6. Compliance software system (NSHARE).	6: Head of Safety and Environmental Health		6. System in place.	
			7. Assurance reporting to Management Team.	7:Strategic Director (PS)		7.Management Team reports and minutes.	
			8. Annual statement for Health and Safety assurance.	8: Assistant Director (Environment and Enforcement) / Head of Safety and Environmental Health		8. Audit and Standards Committee minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			9. External risk review of Health and Safety arrangements (January 2023) and formulate / implement action plan.	9: Strategic Director (PS / Head of Safety and Environmental Health		9. Risk consultancy report.	
			10.Revised Health and Safety policies to be presented to Management Team / HASCOG (On-going)	10: Head of Safety and Environmental Health		10. Individual Cabinet Member decision by portfolio holder.	
			Planned:				
			1. Fully implement new compliance software system in 2024/25 (NSHARE).	1: Head of Safety and Environmental Health		1. I.T. system fully implemented.	
			2.A supplementary transformation review / report on the requirements for Corporate Health and Safety to Management Team (October 2024).	2: Strategic Director (PS)		2. Management Team report / minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			3. Review of HASCOG terms of reference and attendance by operational team members (October 2024).	3: Assistant Director (Environment and Enforcement)		3. HASCOG minutes.	
			4. Assistant Directors quarterly Health and Safety strategic meeting.	4: Strategic Director (PS)		4. Meeting minutes.	
			5.Implement the transformation review and establish new Corporate Health and Safety Team (January 2025).	5.Strategic Directors (PS & H&CS)		5.New team in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R25	Noncompliance with regulations relating to: • Freedom of Information • Environmental Information • General Data Protection resulting in penalties applied by the Information Commissioner's Office	Very high / major (RED)	Freedom of Information / Environmental Information		Significant / major (AMBER)		Management Team / PH – Cabinet / H&CR, H&COM, E&L & BRP OSPs
			1.Monthly FOI reports to designated service areas.	1: Customer Experience Officer		1.Reports.	
			2.Dash Customer Service Workflow application used to manage outstanding cases.	2: Strategic Director (CR)		2.Dash application.	
			3.Email alerts on receipt of new requests.	3: Strategic Director (CR)		3.Emails.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			4. Nominated officers in some service areas to monitor outstanding requests.	4: Chief Executive / Strategic Directors		4.Nominated Officers.	
			5.Workflow process regularly reviewed and updated if necessary	5: Information Management Group (IMG)		5.Request reports.	
			6. Regular targeted training on meeting FOI request deadlines.	6: Information Management Group (IMG)		6.Training records.	
			7. Nominated employees to monitor and manage FOI / EIR requests.	7: Strategic Director (CR)		7. Officer in place.	
			8. Qualified DPO co- ordinating information in line with the Freedom of Information Act 2000	8: Strategic Director (CR)		8. Officer in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			Planned:				
			1.Refresher training for Senior Managers (February 2025).	1: Assistant Director (Central Operations)		1.Senior Management Team minutes / training records.	
			General Data Protection Regulations (GDPR)				
			1. Corporate Information Governance Group (CIGG) / Information Management Group.	1: Assistant Director (Democracy and Governance)		1.Meeting minutes.	
			2. Use of an accredited contractor to dispose of electrical equipment (including IT equipment). The contractor guarantees data destruction & provides certification accordingly.	2: Strategic Director (CR)		2. Contractor agreement and meetings minutes	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			3. Compliance with Public Services Network Code of Connection (PSN Co-Co).	3: Strategic Director (CR)		3. Annual PSN Compliance Certification / "Cyber Essentials Scheme" certification.	
			4. Senior Information Risk Owner (SIRO) and Deputy appointed.	4: Strategic Director (CR)		4. SIRO's Job Description	
			5. Information Governance Framework/ ICT Code of Conduct for Employees/Member Protocol for the Use of IT Resources.	5: Assistant Director (Central Operations)		5. Individual Cabinet Member Decision	
			6. Data Protection Officer (DPO) in line with Data Protection regulations.	6: Assistant Director (Central Operations)		6. DPO in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			7. Data audit and publication of privacy notices.	7: Assistant Director (Democracy and Governance).		7. Audit records (records of processing activity)/notices on council website.	
			8. External Audit undertaken (Option via Central Midlands Audit Partnership).	8: Assistant Director (Democracy and Governance)		8. Report in place.	
			9. Data Protection training available on Delta.	9: DPO and Training Officer		9. Delta training records	
			10. Refresh of Corporate Governance Group (CGG) / Information Management Group (October 2023) — including monitoring of data breach reports.	10: Assistant Director (Democracy and Governance) / DPO		10.Meetings minutes	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			Planned:				
			1. Data Protection policy to be updated (September 2024).	1: DPO		1. Policy approved.	
			2. Data Protection information to be made available to employees via the new Intranet when available (September 2024).	2: DPO		2. Intranet.	
			3. Information Asset Register to be established (timescale to be agreed with Information Management Group).	3: DPO / Information asset owners		3. Register in place.	
			4.Data protection and Freedom of Information Act training for Senior Managers (ongoing).	4: DPO		4. Senior Management meeting records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Data Protection training to be reviewed to ensure that it is up to date and appropriate (ongoing).	5: DPO and Training Officer		5. Delta training records.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R32	Financial implications to NBBC following appeals / hearings processes for planning applications	High/Major (RED)	1.Planning Team working on each hearing and appeal process for appellant / applicant.	1:Strategic Director(P&E) / Assistant Director (Planning)	High/ Serious (AMBER)	1.Adpoted Local Plan.	Strategic Director (P&E) / PH – P&E / BRP OSP
			2.Experienced King's Counsel (KC) to assist NBBC in any public enquiry appeals process.	2: Strategic Director(P&E) / Assistant Director (Planning)		2.KC in place.	

NET GREEN RISKS

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R11	Nuneaton and Bedworth Community Enterprises Ltd. (NABCEL) gives rise to unplanned liabilities	Significant / Serious (AMBER)	1. NABCEL Board.	1:NBBC Strategic Directors / Shareholder Committee	Low / Moderate (GREEN)	1. Board meeting papers & minutes.	Management Team / PH – B&R / BRP OSP
			2. Articles of Association adopted.	2: NBBC Strategic Directors / Shareholder Committee		2.Articles of association	
			3. Each new business activity for NABCEL is supported by a robust business case that must be approved by the NABCEL Board.	3: NBBC Strategic Directors / Shareholder Committee		3.Business cases / Cabinet minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			4. Appropriate and effective policies and procedures are in place and budgets are monitored regularly.	4: NBBC Strategic Directors / Shareholder Committee		4. Policies located in records management system and budget monitoring.	
			5. Appropriate insurance cover in place.	5: NBBC Strategic Directors / Shareholder Committee		5. Insurance certification.	
			6. External accounting support.	6: NBBC Strategic Directors / Shareholder Committee		6. External Account reports.	
			7.NABCEL Internal Audit.	7: NBBC Strategic Directors / Shareholder Committee		7. NABCEL Internal Audit reports.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			8. Shareholder agreement / committee.	8: NBBC Strategic Directors / Shareholder Committee		8. Shareholder agreement record / minutes of Shareholder Committee meetings.	
			9. Shareholder board member training.	9: NBBC Strategic Directors / Shareholder Committee		9. Training records.	
			10. Effective senior management arrangements in place.	10: NBBC Strategic Directors / Shareholder Committee		10. New structure implemented.	
			11. Three-year Business Strategy.	11: NBBC Strategic Directors / Shareholder Committee		11. Strategy in place. Annual review completed.	
			12. Five-year Business Plan.	12: NBBC Strategic Directors / Shareholder Committee		12. Business Plan in place. Annual review completed.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			13. Annual review of Business Strategy and Business plan.	13: NBBC Strategic Directors / Shareholder Committee		13. Updated Strategy and Plan in place.	
			14. Regular performance review.	14: NABCEL Board Chair		14. NABCEL Board minutes.	
			15. External audit of NABCEL (on-going).	15:NABCEL Board Chair		15. Audit report.	
			Planned:				
			1. Implement appropriate recommendations for NABCEL governance structure (November 2024).	1: Assistant Director (F)		1. External report.	
			2. Review growth model and establish a financial strategy (Quarter 4, 2024/25).	2: Assistant Director (F)		2. Plan in place.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			3.Business Case reviewed (on-going).	3: Assistant Director (F)		3. Approved Business Case in place.	
			4. Review approach to viability assessment for new business streams/extension to existing activities.	4: Strategic Director (P&E)			

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
R27	Arson or accidental fire in NBBC corporate buildings	Significant / Major (AMBER)	1. Fire Management Group (FMG).	1: Strategic Directors (PS) / (P&E)	Low / Major (GREEN)	FMG meeting minutes. HASCOG reports.	Management Team / PH – B&R, R&CS & LC&H, / BRP, E&L & H&CR OSP
			2. Regularly serviced fire detection & alarm systems / fire extinguishers and appropriate Fire Risk Assessments (FRA) regularly reviewed.	2: Strategic Director (P&E) / Assistant Director (Economy)		2. Service records, Fire extinguisher service records & records of FRA outcomes. External report (review of arrangements).	
			3. Quarterly Health & Safety inspections give attention to fire risks.	3: Respective Strategic / Assistant Directors.		3. Quarterly Health & Safety inspection records.	
			4. Annual Capital Fire Safety Work Programme.	4: Strategic Director (P&E) / Assistant Director (Economy)		4. Cabinet reports and Capital Projects Meeting Minutes.	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5. Existing insurance policy documents.	5: Assistant Director (Finance)		5. Policy documents in place.	
			6. Internal audit of fire risk arrangements (completed February 2022).	6: Audit and Governance Manager (CMAP)		6. Internal Audit report.	
			7. Certified fire doors.	7: Strategic Director (P&E) / Assistant Director (Economy)		7. Doors / Certification in place.	
			8. Corporate review of Health and Safety arrangements (2024/25).	8: Strategic Director (P&S)		8. MT Report / minutes.	
			9. Town Hall fire prevention arrangements (including upgrade of door entry system).	9: Strategic Director (P&E) / Assistant Director (Economy) / Head of Safety and Environment Health		9.Monitored action plan in place / Updates to Fire Services	

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			10.External consultancy support to identify and manage fire safety issues.	10: Strategic / Assistant Directors		10. Consultant reports and monitored action plan.	
			11. External risk audit report by insurers (Gallagher Bassett) February 2023.	11: Strategic Director (PS)		11.Action plan and MT minutes.	
			12. On-going review of corporate assets.	12: Management Team		12.Review findings / update register.	
			13. Implement periodic Internal Audit report recommendations.	13: Head of Safety and Environmental Health		13.Audit action plan.	
			14. Act on appropriate recommendations arising from public enquiries / legislation changes (on-going).	14: Strategic Director (P&E) / Assistant Director (Economy) / Head of Safety and Environment Health		14.Reports / action plans.	

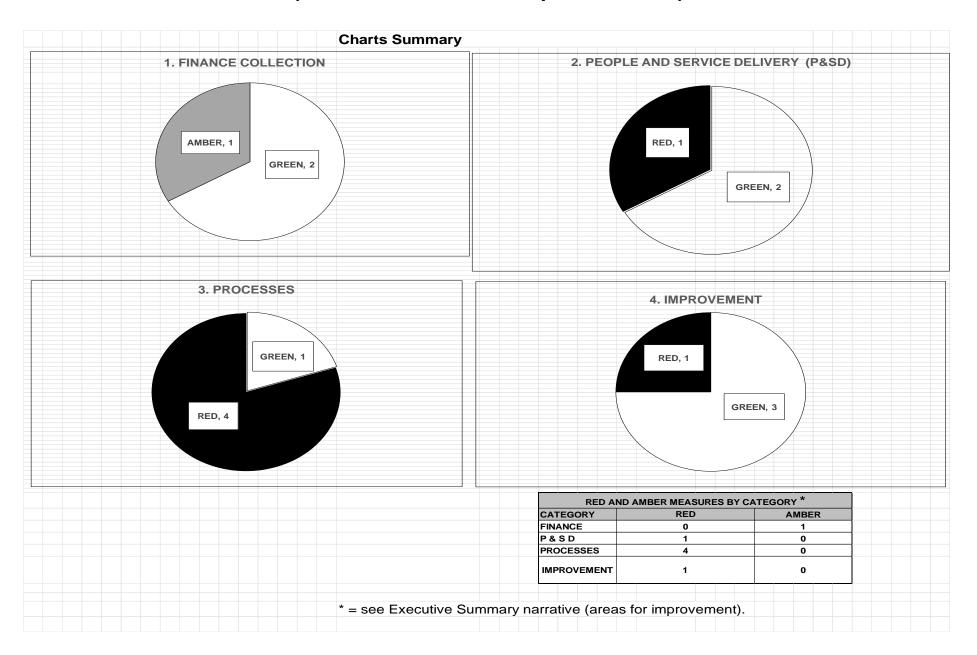
Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			Planned:				
			1. Review and refresh Business Continuity Plans (March 2025).	1:Strategic / Assistant Directors			
			2. Leasehold commercial properties – review and establish landlord checks for structure / electrical / gas / fire safety and security of empty purchased properties pending redevelopment (March 2025).	2: Assistant Director (Economy)			

Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after completion of our complaints process	High / Low (GREEN)	1.Formal complaints policy and process.	1: Customer Experience Officer	High / Low (GREEN)	1.Policy and procedure in place.	Strategic Director (CR) / PH Cabinet / H&CR, H&COM, E&L & BRP OSPs
		2.Designated Customer Experience Officer.	2: Customer Experience Officer		2. Designated Customer Experience Office. in place	
		3.Review / Final check of service area escalated responses.	3: Customer Experience Officer		3.Review records retained.	
		4.Ombudsman monitoring by Management Team (Strategic Performance Report).	4:Management Team		4.Strategic Performance Report.	
	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after completion of our	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after complaints process 2.Designated Customer Experience Officer. 3.Review / Final check of service area escalated responses. 4.Ombudsman monitoring by Management Team (Strategic Performance	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) — failure to meet customer expectation after complaints process 2. Designated Customer Experience Officer 2. Designated Customer Experience Officer 3. Review / Final check of service area escalated responses. 3. Customer Experience Officer 4. Ombudsman monitoring by Management Team (Strategic Performance	Ombudsman Complaints (Local Government Ombudsman / Housing Ombudsman) – failure to meet customer expectation after complaints process 2.Designated Customer Experience Customer Experience Officer 3.Review / Final check of service area escalated responses. 4.Ombudsman monitoring by Management Team (Strategic Performance Nigh / Low (GREEN) 1: Customer Experience Officer 2: Customer Experience Officer 3: Customer Experience Officer 4:Management Team	Combudsman Complaints (Local Government Ombudsman / Housing Ombudsman) - failure to meet customer expectation of our complaints process

Risk Ref	Risk Description	Gross Risk	Mitigation Control Existing / Ongoing	Mitigation Owner	Net Risk / Status	Sources of Assurance	Risk Owner / Portfolio (PH) / OSP
			5.Annual Ombudsman report to Scrutiny panel.	5: Customer Experience Officer		5.FPS meeting minutes.	
			<u>Planned</u> :				
			1. Refresh of complaints policy following regulatory change (April 2025)	1: Assistant Director (Central Operations)		1.Updated policy in place.	

<u>Strategic Performance Report – Executive Summary October 2024</u>

(Data as at the end of September 2024)



Strategic Performance Report – Executive Summary October 2024

(Data as at the end of September 2024)

Positive aspects

- Rent collection is 89.46% against the 80% target at the end of September (89.14% last month) – no comparable data for 2023/24
- Percentage of waste recycled and composted is 41.78% at the end of September. It should be noted that no contamination rate has been applied for 2024/25 pending a verification process
- Strategic Risk Register monitoring is 91% against the 80% target at the end of the second quarter 2024 (91% last quarter)

Areas for Improvement

- Business rates collection is 55.75% against the profiled target of 58% at the end of September
- Processing of new benefits claims is 37 days against the 22 days good performance benchmark (compared to 20.86 days in September 2023).
 It is anticipated that performance will return to normal levels in October or November
- Working days lost to short term sickness absence is 2.33 days per full time equivalent (FTE) against the profiled target of 1.74 days/FTE at the end of September (2.22 days/FTE at the end of September 2023)
- Working days lost to long term sickness absence is 3.28 days per full time equivalent (FTE) against the profiled target of 2.63 days/FTE at the end of September (2.79 days/FTE at the end of September 2023)
- Short term return to work interview compliance rolling average is 36.67% within 3 days (59.05% last month). The average time to complete all interviews is 1.74 days (1.60 days last month)

Strategic Performance Report – Executive Summary October 2024

(Data as at the end of September 2024)

Areas for Improvement

Breakdown of Short Term Return to Work Interview Compliance

DIRECTORATE	COMPLIANCE WITHIN 3 DAYS (ROLLING MONTHS)	DAYS TO COMPLETE ALL INTERVIEWS (ROLLING MONTHS)
Chief Executive	100%	0
Corporate		
Resources	71.43%	0.96
Place and Economy	0%	1.50
Housing and		
Communities	35.70%	1.72
Public Services	0%	7.33

Note: Some interviews not completed this month.

• **Agency staff spend** £564,854 as at the end of September compared to £386,075 at the end of September 2023:

General Fund	£	315,358	56%
HRA	£	249,496	44%
Total	£	564,854	100%

This is netted against an estimated (£979K) salary underspend, creating a NET underspend of (£414k) across the general fund and HRA budgets. This year a 5% pay award provision has been included in the budget. As such, any actual salary/agency spend figures have been increased by 5% to give a more realistic view of the underspend. Although the pay award has been agreed, this will not be reflected in the actual pay until November, therefore, the report will still use the 5% estimate until then.

			Net	
	Underspend		Underspend	
General Fund	1	594,192	-	278,834
HRA	-	385,544	-	136,048
Total	-	979,736	-	414,882

Strategic Performance Report – Executive Summary October 2024

(Data as at the end of September 2024)

<u>Areas for Improvement</u> (Chart reference shown in brackets)

The top three cost areas are:

The top times cost areas are.		
DOMESTIC REFUSE	£106,836	
REPAIRS & MAINTENANCE - VOIDS	£80,334	
REACTIVE REPAIRS	£69,011	
TOTAL	£256,181 (45% of total agency spend)	

• Building a Better Borough (BaBB) monitoring is 70% against the 80% target at the end of the second quarter (68% last quarter)

ADDITIONAL NOTE

There are 15 performance indicators within the Strategic Performance Report, reported by exception with performance being on or around target / good performance benchmark unless otherwise stated in this summary.