



June 5th, 2026

**Chairman:** Councillor M McKeever

**Vice-Chairman:** Mr E Jardine, Independent Member

**Aldermen:** O Gawith, A Grehan, S P Porter and J Tinsley

**Councillors:** J Bamford, D Bassett, S Burns, D J Craig, A P Ewing, J Gallen, D Lynch, R McLernon, B Magee and A Martin

**Ex Officio:** The Right Worshipful the Mayor, Councillor B Higginson

Deputy Mayor, Alderman A McIntyre

### **Notice Of Meeting**

A meeting of the Governance and Audit Committee will be held on **Thursday, 11th June 2026 at 6:00 pm** for the transaction of the undernoted Agenda.

**David Burns**  
**Chief Executive**

# Agenda

## 1.0 APOLOGIES

## 2.0 DECLARATIONS OF MEMBERS' INTERESTS

- (i) conflict of interest on any matter before the meeting (Members to confirm the specific item)
- (ii) pecuniary or non-pecuniary interest (Member to complete disclosure of interest form)

*Attachment: Disclosure of Interests form Sept 24.pdf*

*Page 1*

## 3.0 REPORT BY DIRECTOR OF ORGANISATION DEVELOPMENT AND INNOVATION

### 3.1 Key Departmental Objectives 26/27

*For Noting*

*Attachment: Item 3.1 - Cover Report - 26-27 Main Dept Projects.pdf*

*Page 3*

*Attachment: Item 3.1 - Appendix 1 - Dept\_Main\_Priorities\_26-27.pdf*

*Page 5*

## 4.0 REPORT BY PERFORMANCE IMPROVEMENT OFFICER

### 4.1 Customer Care Feedback – Q4 2025/26

*For Noting*

*Attachment: Item 4.1 - Customer Care Feedback Q4 G&A.pdf*

*Page 12*

*Attachment: Item 4.1 - Appendix I Digital Services - Customer Care Complaints Compliments Qtr 4.pdf*

*Page 14*

### 4.2 Q4 Performance Improvement Monitoring - Objectives, Case Studies, Performance KPIs & Corporate Plan KPIs

*For Noting*

*Attachment: Item 4.2 - Q4 Performance monitoring cover report final.pdf*

*Page 18*

*Attachment: Item 4.2 - Appendix I - Quarter 4 monitoring MASTER final.pdf*

*Page 20*

*Attachment: Item 4.2 - Appendix IIa - Q4 Performance Improvement KPIs detailed final.pdf*

*Page 27*

*Attachment: Item 4.2 - Appendix IIb - Q4 Performance Improvement KPIs summary final.pdf*

*Page 34*

*Attachment: Item 4.2 - Appendix IIIa - Q4 Corporate Plan KPIs detailed.pdf*

*Page 40*

#### **4.3 Consultation Report on the Draft Performance Improvement Objectives 2026/27**

*For Decision*

*Attachment: Item 4.3 - Consultation 2026 cover report final.pdf*

*Page 46*

*Attachment: Item 4.3 - Appendix I - Consultation report on the Draft Performance Improvement Objectives for 2627.pdf*

*Page 48*

#### **4.4 Performance Monitoring KPI Setting 26/27**

*For Decision*

*Attachment: Item 4.4 - Performance Monitoring KPI Setting 26 27 cover report.pdf*

*Page 59*

*Attachment: Item 4.4 - Appendix I DRAFT PIP 2026 27 - full version final.pdf*

*Page 61*

*Attachment: Item 4.4 - Appendix II PIP Equality Screening 2026 aw.pdf*

*Page 88*

*Attachment: Item 4.4 - Appendix III Corporate Plan KPIs 26 27.pdf*

*Page 102*

*Attachment: Item 4.4 - Appendix IV - Action\_Plan\_26-27.pdf*

*Page 105*

## **5.0 REPORT BY HEAD OF SERVICE - ENVIRONMENTAL HEALTH, RISK AND EMERGENCY PLANNING**

### **5.1 Corporate Risk Register**

*For Noting*

*Attachment: Item 5.1 - Corporate Risk Register Report Jun 26 cover report.pdf*

*Page 112*

*Attachment: Item 5.1 - Appendix I Corporate Risk Register (4).pdf*

*Page 116*

*Attachment: Item 5.1 - Appendix II Environmental Services Register (2).pdf*

*Page 117*

*Attachment: Item 5.1 - Appendix III Organisation Development & Innovation Risk Register (3).pdf*

*Page 118*

*Attachment: Item 5.1 - Appendix IV Regeneration & Growth Risk Register (2).pdf*

*Page 119*

*Attachment: Item 5.1 - Appendix V Communities & Wellbeing Risk Register (2).pdf*

*Page 120*

*Attachment: Item 5.1 - Appendix VI Finance & Corporate Services Risk Register (2).pdf*

*Page 121*

## 6.0 REPORT BY DIRECTOR OF FINANCE AND CORPORATE SERVICES

### 6.1 Code of Audit Practice (Local Government) 2026

*For Noting*

*Attachment: Item 6.1 - Code of Audit Practice 2026.pdf*

*Page 122*

## 7.0 REPORT BY INTERNAL AUDIT MANAGER

### 7.1 Anti-Fraud, Bribery and Corruption Policy Statement and Strategy

*For Decision*

*Attachment: Item 7.1 - Anti-Fraud, Bribery and Corruption Policy Statement and Strategy.pdf*

*Page 124*

*Attachment: Item 7.1 - Appendix 1 - Draft LCCC Anti-Fraud Corruption Policy Statement Strategy.pdf*

*Page 126*

*Attachment: Item 7.1 - Appendix 2 - Equality Screening -AntiFraud.pdf*

*Page 151*

### 7.2 Raising Concerns Policy

*For Decision*

*Attachment: Item 7.2 - Raising Concerns cover report.pdf*

*Page 161*

*Attachment: Item 7.2- Appendix 1 - Draft LCCC Raising Concerns Policy.pdf*

*Page 163*

*Attachment: Item 7.2 - Appendix 2 Equality Screening - Raising Concerns Policy (003).pdf*

*Page 180*

## 8.0 CONFIDENTIAL BUSINESS - "IN COMMITTEE"

### 8.1 CONFIDENTIAL REPORT BY INTERNAL AUDIT MANAGER

#### 8.1.1 Internal Audit Annual report

*For Approval*

Confidential due to:

Information relating to the financial or business affairs of any particular person (including the Council holding that information).

#### 8.1.2 Internal Audit Progress report

*For Noting*

Confidential due to:

Information relating to the financial or business affairs of any particular person (including the Council holding that information).

**8.1.3 Internal Audit – GIAS Gap Analysis Action Plan**

*For Noting*

Confidential due to:

Information relating to the financial or business affairs of any particular person (including the Council holding that information).

**8.1.4 G&A Self Evaluation Questionnaire**

*For Decision*

Confidential due to:

Information relating to the financial or business affairs of any particular person (including the Council holding that information).

**8.1.5 CE Statement of Assurance – October 2025 – March 2026**

*For Noting*

Confidential due to:

Information relating to the financial or business affairs of any particular person (including the Council holding that information).

**8.2 CONFIDENTIAL REPORT BY DIRECTOR OF ORGANISATION DEVELOPMENT AND INNOVATION**

**8.2.1 Ofcom correspondence**

*For Noting*

Confidential due to:

Information relating to any action taken or to be taken in connection with the prevention, investigation or prosecution of crime.

OR

Information relating to the financial or business affairs of any particular person (including the council holding that information).

**8.3 CONFIDENTIAL REPORT BY CHIEF EXECUTIVE**

**8.3.1 Finance & Legal support**

*For Noting*

Confidential due to:

Information relating to the financial or business affairs of any particular person (including the

Council holding that information).

## **9.0 ANY OTHER BUSINESS**

LISBURN & CASTLEREAGH CITY COUNCIL

MEMBERS DISCLOSURE OF INTERESTS

1. Pecuniary Interests

The Northern Ireland Local Government Code of Conduct for Councillors under Section 6 requires you to declare at the relevant meeting any pecuniary interest that you may have in any matter coming before any meeting of your Council.

Pecuniary (or financial) interests are those where the decision to be taken could financially benefit or financially disadvantage either you or a member of your close family. A member of your close family is defined as at least your spouse, live-in partner, parent, child, brother, sister and the spouses of any of these. Members may wish to be more prudent by extending that list to include grandparents, uncles, aunts, nephews, nieces or even close friends.

This information will be recorded in a Statutory Register. On such matters **you must not speak or vote**. Subject to the provisions of Sections 6.5 to 6.11 of the Code, if such a matter is to be discussed by your Council, **you must withdraw from the meeting whilst that matter is being discussed**.

2. Private or Personal Non-Pecuniary Interests

In addition you must also declare any significant private or personal non-pecuniary interest in a matter arising at a Council meeting (please see also Sections 5.2 and 5.6 and 5.8 of the Code).

Significant private or personal non-pecuniary (membership) interests are those which do not financially benefit or financially disadvantage you or a member of your close family directly, but nonetheless, so significant that could be considered as being likely to influence your decision.

Subject to the provisions of Sections 6.5 to 6.11 of the Code, you must declare this interest as soon as it becomes apparent and **you must withdraw from any Council meeting (including committee or sub-committee meetings) when this matter is being discussed**.

In respect of each of these, please complete the form below as necessary.

**Pecuniary Interests**

Meeting (Council or Committee - please specify and name):

\_\_\_\_\_

Date of Meeting: \_\_\_\_\_

Item(s) in which you must declare an interest (please specify item number from report):

\_\_\_\_\_

Nature of Pecuniary Interest:

**Private or Personal Non-Pecuniary Interests**

Meeting (Council or Committee - please specify and name):

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Date of Meeting: \_\_\_\_\_

Item(s) in which you must declare an interest (please specify item number from report):

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Nature of Private or Personal Non-Pecuniary Interest:

Name:

Address:

Signed:

Date:

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*If you have any queries please contact David Burns, Chief Executive,  
Lisburn & Castlereagh City Council*

<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Director of Organisation Development and Innovation

<b>Item for:</b>	Noting
<b>Subject:</b>	Key Departmental Objectives 26/27

<b>1.0</b>	<b><u>Background and Key Issues:</u></b>	
1.1	The Chief Executive presented a paper to the Corporate Services Committee in May on the overarching Corporate Priorities for 2026/27. This advised that engagement has taken place between Officers to consider the key strategic and operational priorities previously agreed by Members. This is with a view to considering delivery against these between now and the 2027 Local Government Elections.	
1.2	Consideration of these challenging priorities reflect on the Draft <a href="#">Performance Improvement Plan</a> for 2026/27 and the objectives of year 3 of the <a href="#">Corporate Plan</a> , combined with other known ambitions for the year ahead.	
1.3	The Chief Executive advised that a report would be presented to this Committee which would outline the key directorate issues to be taken forward at an operational level over the course of the next 12 months, outside of business-as-usual (BAU) activities. Assessment of these targets will be through Management Information, Performance Improvement or Corporate Plan Key Performance Indicators.	
1.4	This report is presented as an Appendix for noting by Members.	
1.5	There is a recognition amongst officers that the combination of strategic and operational priorities can only be delivered with the relevant resources in place. Officers will reflect on workload capacity in line with available resources. Work is underway across teams to plan and mitigate against pinch points and likely higher volumes of strategic pressures that coincide with operational requirements (e.g. financial year end).	
<b>2.0</b>	<b><u>Recommendation</u></b>	
	It is recommended that Members note the attached appendix outlining the key departmental objectives for 2026-27 with the associated KPI area of assessment.	
<b>3.0</b>	<b><u>Finance and Resource Implications</u></b> N/A	
<b>4.0</b>	<b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out	No – not applicable for objective setting but will be undertaken for the relevant projects as appropriate.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No

4.4	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.	No – not applicable for objective setting but will be undertaken for the relevant projects as appropriate.
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<b>Appendices:</b>	<b>Appendix 1</b> – Key Departmental Objectives 2026/27
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## Appendix 1 – Directorate Priorities April 2026 – May 2027 (Non Business-as-Usual items)

### Communities and Wellbeing

Main Projects/Areas of Focus	Other teams' involvement	Corporate Plan KPI	Management KPI	PI Plan KPI (incl stat)
Develop and implement a Volunteering Programme for the Community & Voluntary Sector, including recruitment, training and promotion	HR&OD, Gov & Comms			
Develop and roll out the Defibrillators programme, including training and equipment provision in community hubs	Assets & Gov & Comms			
Progress Parks & Amenities capital/improvement projects including Wallace Park playpark refurbishment and increased allotment provision	Assets, P&C & Finance			
Expand the Health & Wellbeing programme through the PARS initiative, including promotion, implementation and evaluation	Gov & Comms			
Design, launch and implement EVAWG community safety initiatives	Gov & Comms			
Deliver Sports Services projects including the DIIB Community Engagement Programme				
Progress community projects including Grant Aid Review and Satellite Centre governance arrangements				
Complete Community Conversations / Village Plans for Castlereaugh South, Downshire West and Dromara	Gov & Comms			

Focus on enhancing community access, participation and experience across leisure facilities and parks	EH, R & EP, Eco Dev			
Develop and publish a coordinated Leisure & Community Wellbeing events calendar	Innovation, Gov & Comms			
Delivery of Health and Wellbeing Programmes and community events across the year	Gov & Comms			
Maintain annual target of 19,500 members of leisure facilities through Vitality Membership				

## Environmental Services

Main Projects/Areas of Focus	Other teams' involvement	Corporate Plan KPI	Management KPI	PI Plan KPI (incl stat)
Agreement & Implementation of proposed Kerbside model for waste collection	HR&OD, Innovation, Assets, Gov & Comms, Finance			
Works to commence to upgrade Carryduff HR&ODC	Capital, Gov & Comms, Assets, Finance			
Options around future Cemetery provision progressed	Capital, Assets			
Planning Application for Garden of Remembrance at Blaris				
<b>Digital Depot implementation</b>	Innovation, Finance, Corporate Gov & Comms, Assets			
Building Resilient Communities – focus on Dundonald and Anahilt	Parks & Amenities, Assets			
Climate & Energy Action Plans - <ul style="list-style-type: none"> <li>• 1<sup>st</sup> year review and report on Climate Action Plan</li> <li>• Energy Reduction Action Plan Annual Review &amp; Report</li> <li>• Energy and GHG Emissions Annual Review &amp; Report</li> </ul>	All Teams			

## Finance and Corporate Services

Main Projects/Areas of Focus	Other teams' involvement	Corporate Plan KPI	Management KPI	PI Plan KPI (incl stat)
Year end Balanced Budget achieved & 2027/28 Rate Setting confirmed	All Teams			
VAT matters - Progressing Alternative Dispute Resolution (ADR) and completion of VAT Compliance Review				
Development and enhancement of CiA following healthcheck and implementation of any recommendations				
Preparation for a successful Election delivery	CMT, Gov & Comms, Assets, Sports Services, HR&OD, Innovation			
Continued implementation of Governance & Communications structure	HR&OD			
Delivery of Key Events, including: Somme Visit, Armed Forces Day, Mayors Dinner				
Prompt Payment of supplier invoices	All			
Approval and implementation of transparency motion, to include required amendments to Standing Orders				
Continued embedding and implementation of projects associated with the new Information Governance Team				

## Organisation Development and Innovation

Main Projects/Areas of Focus	Other teams' involvement	Corporate Plan KPI	Management KPI	PI Plan KPI (incl stat)
Focus on Succession Planning: Growing our own future workforce Including Line Management and Senior Team Development programmes	All teams			
Progress agreed Efficiency Review structures – Job Descriptions, Interviews, Consultations & support to progress	All affected services			
Focus on Attendance Management – reduction in days lost due to sickness absence	All Teams			
Job Evaluation Framework Developed	TUs, CMT			
Policy Development to include new Volunteering policy and process	TUs, CMT			
Digital Strategy (incl digital depot implementation and other quick wins through Digital Applications Team and BRCD opportunities)	All Teams			
Cyber Assessment Framework: Assessment and Actions	All Teams			
Commercial Considerations incl strategy development and quick wins	All Teams			
Policy Framework Development	All Teams			
Solace Workforce Theme Implementation	Director, HoS,			

## Regeneration and Growth

Main Projects/Areas of Focus	Other teams' involvement	Corporate Plan KPI	Management KPI	PI Plan KPI (incl stat)
Area Plan Policy Development & Completion of Planning Improvement Plan				
Capital Programme delivery & progression of Feasibility Studies	All Teams			
Local Economic Partnership delivery plan implementation	Community Planning			
Belfast Region City Deal – Destination Royal Hillsborough – Full Business Case agreement & preparation of tender documents for public realm works	Innovation, Communities, Gov & Comms, Parks & Amenities			
Creation of New Jobs through Go Succeed and Labour Market Partnership	Community Planning			
Continue our capital investment in facilities - deliver new changing room facilities and accessible public toilets in Aghalee and Seycon	Communities and Leisure Services			
Assets Rental from leasing of council's assets				
Capital programme expenditure against budget				

City Centre Regeneration Growth Fund				
Dundonald Ice Bowl redevelopment to construction phase and building complete	Sports Services			
Inclusivity – Delivery of specialist employability support and advice for those with a disability				
Improve processing times for Planning				
Enhance the Digital Sculpture Trail	Innovation			

<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Performance Improvement Officer

<b>Item for:</b>	Noting
<b>Subject:</b>	Customer Care Feedback – Q4 2025/26

## 1.0 **Background and Key Issues:**

- 1.1 Council aims to provide an effective and efficient service to all its ratepayers and customers. If on occasions, the service is not as our customers would expect, the Council would like to know about it.
- 1.2 Compliments and complaints are captured on the Council's Customer Care System and Complaints are dealt with through the Council's complaints handling procedure.
- 1.3 Attached under Appendix I is a dashboard report which details the key data regarding complaints and compliments in Quarter 4 (January - March inclusive) of 2025/26.
- 1.4 Total complaints in Q4 have increased by 18% compared to the previous quarter. Compliments have decreased by 28% since Q3.
- 1.5 Environmental Services and Leisure & Community Wellbeing received the bulk of complaints.
- 1.6 Within Environmental Services the main reasons for complaints were collections. The main areas for complaints received within Leisure & Community Wellbeing were related to toilets, grounds maintenance, litter bins and playparks.
- 1.7 Of the 291 received, approx. 6% were upheld with a further 8% upheld in part. Almost 75% were resolved before any formal complaint was progressed. 7 complaints were escalated to stage 2 (Director). All stage 2 complaints that were closed during Q4 had outcomes being not upheld or partially upheld.
- 1.8 No complaints were escalated to stage 3 (NIPSO) during the quarter.
- 1.9 The response rate was 7% to the Customer Satisfaction Survey in Q4 with the average rating given as acceptable.
- 1.10 A summary of key learning outcomes from **complaints** are as follows:
  - Following identification of a park being closed earlier than advertised, this has been addressed with the individual responsible to ensure early closures do not occur.
  - Wallace Park Toilets - Officers have spoken with the contactor and arranged to get photographs taken after each clean to ensure they are kept to a reasonable standard. We have also arranged for a separate cleaner to go into the toilets in the middle of the day to give them a second deeper clean.
  - Officers have arranged a meeting with a contractor responsible for emptying litter bins in specific parks, so address concerns they have not been emptied regularly. Spot checks will also be undertaken.
- 1.11 There was no requirement to amend any policy as a result of complaints received.
- 1.12 The good practice noted from **compliments** related to customer service with staff going above and beyond their roles in a number of areas.

1.13	Compliments relating to good practice was also acknowledged in relation to the running of events, Weddings as well as business as usual interactions across the Council.	
2.0	<b><u>Recommendation:</u></b> It is recommended that Members note the report.	
3.0	<b><u>Finance and Resource Implications</u></b> N/A	
4.0	<b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out	No – not applicable as this is an update report.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out.	No – not applicable as this is an update report.

<b>Appendices:</b>	<b>Appendix I</b> – Dashboard Report showing Compliments & Complaints during Q4 (January - March 2026 inclusive)
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# CUSTOMER CARE COMPLAINTS AND COMPLIMENTS BREAKDOWN FOR QTR 4 2026

**339**

Total Cases

**298**

Total Complaints

**291**

Stage 1 Complaints

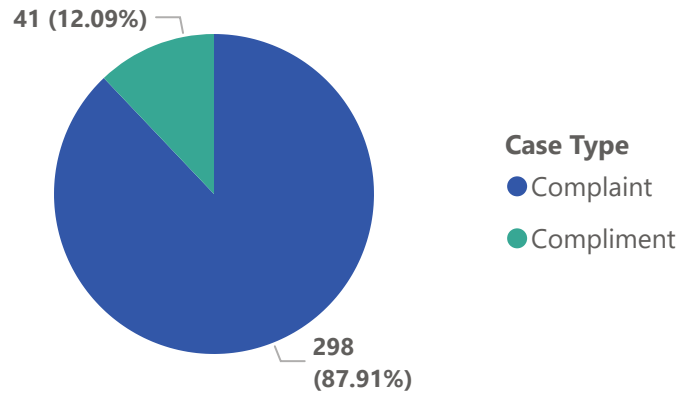
**7**

Stage 2 Complaints

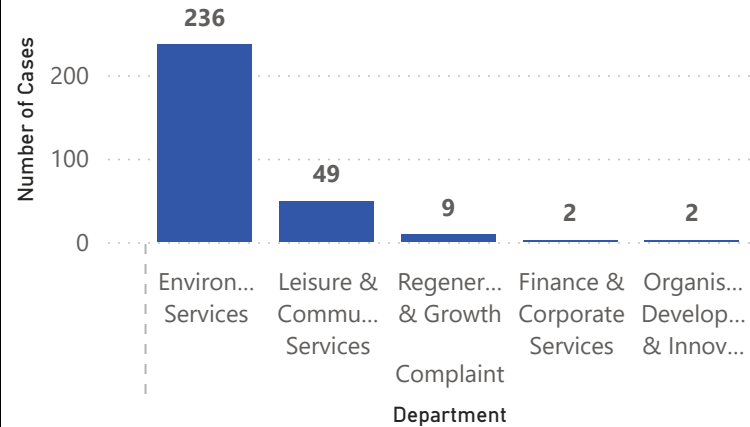
**41**

Total Compliments

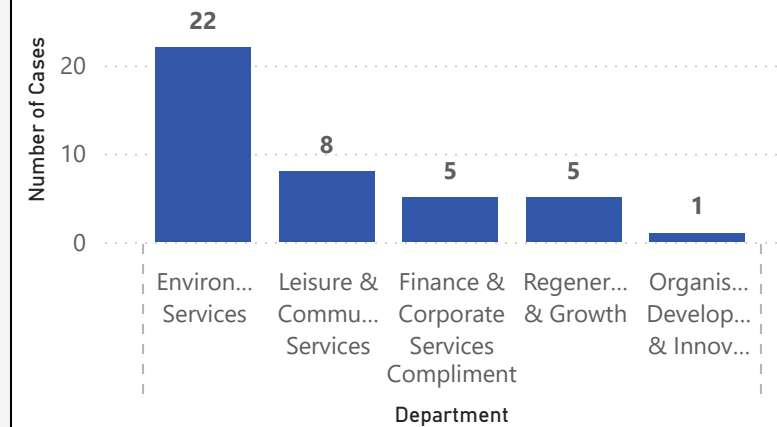
Case Type Distribution



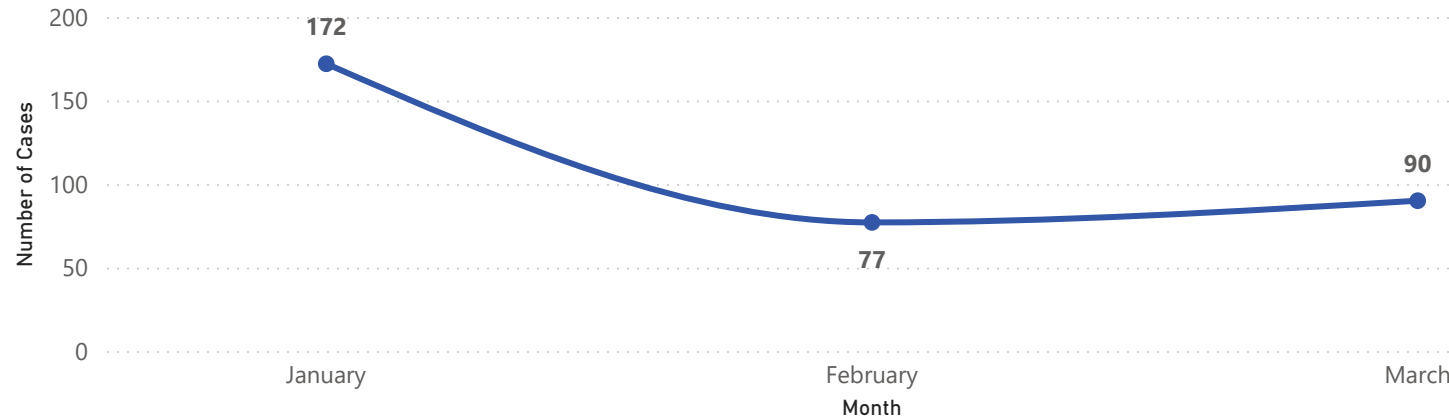
Complaint Case Types by Department



Compliment Case Types by Department



Cases Submitted Over Time



**3**  
Extended Cases

**21**  
Late Cases

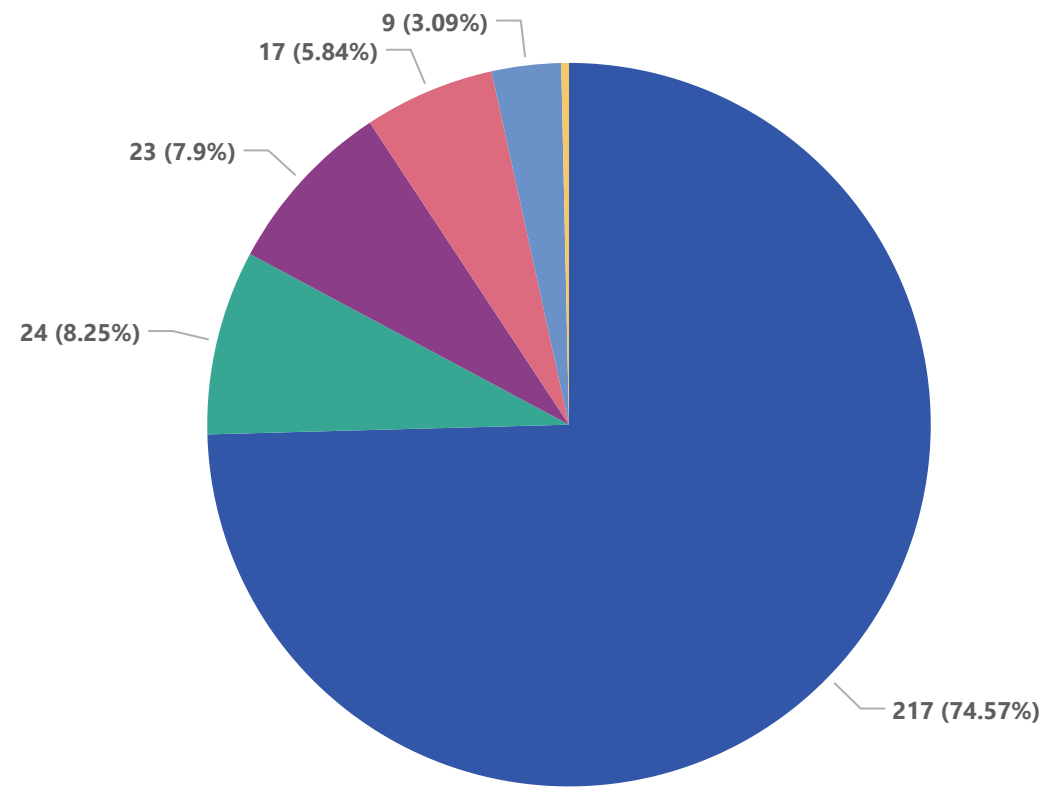
# CUSTOMER CARE STAGE 1 COMPLAINT OUTCOMES FOR QTR 4 2026

# 291

Total Cases

## Complaint Outcomes

**Response Outcome** ● Resolved ● Complaint upheld in part ● Complaint not upheld ● Complaint upheld in full ● Redacted Outcome ● Withdrawn



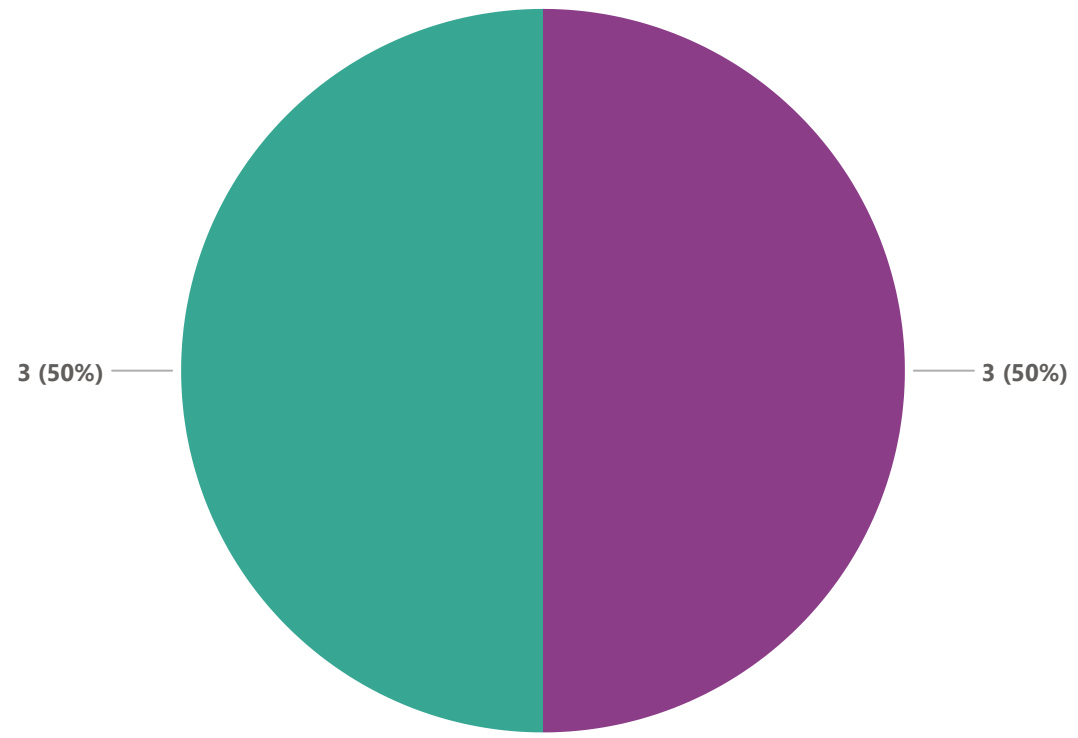
# CUSTOMER CARE STAGE 2 COMPLAINT OUTCOMES FOR QTR 4 2026

6

Total Cases

## Complaint Outcomes

Response Outcome ● Complaint not upheld ● Complaint upheld in part



# CUSTOMER CARE STAGE 1 & 2 FULLY UPHELD COMPLAINT OUTCOMES FOR QTR 4 2026

## Complaint Outcomes Upheld in Full by Classification Type

**Classification Type** ● General ● Customer Ser... ● Lock & Unlock ● Public Conv... ● Anti-Social ... ● City Centre Is... ● Cleanliness ● Customer ● Grounds Mai... ● Maintaine... ● Not collected ● Recycling



<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Performance Improvement Officer

<b>Item for:</b>	Noting
<b>Subject:</b>	Q4 Performance Improvement Monitoring - Objectives, Case Studies, Performance KPIs & Corporate Plan KPIs
<b>1.0</b>	<b><u>Background and Key Issues:</u></b>
1.1	As part of Council's performance management responsibilities, monitoring reports on all the projects that will demonstrate improvement against the Performance Improvement Objectives as well as Performance and Corporate Plan key performance indicators (KPIs) are reported on a quarterly basis to this committee, to ensure accountability and transparency.
1.2	Attached under <b>Appendix I</b> , is a quarterly monitoring document on all the projects that will demonstrate improvement against the 2025/26 Performance Improvement Objectives, including the relevant Performance Improvement KPI. Please note the additional section within this report, which details case studies, photographs and customer feedback that have demonstrated improvement during Quarter 4. This report covers the period January - March inclusive of 2025/26.
1.3	Attached under <b>Appendix II</b> is a report from the 'Performance Management System' which details the Performance Improvement Key Performance Indicators (KPIs) results for the period Quarter 4 (January - March inclusive) of 2025/26. This appendix is shown in 2 formats appendix IIa and IIb.
1.4	Appendix IIa shows the quarterly progress during the 2025/26 financial year, this has been produced in response to members' requests to see comparative data across all quarters within the financial year of reporting.
1.5	Appendix IIb shows the Q4 progress in a summary graphical format.
1.6	There are 26 Performance Indicators for the 2025/26 financial year. 20 KPIs were achieved at the end of Q4, 5 KPIs were not achieved and 1 had fallen slightly short of the target.
1.7	The KPIs that were not achieved or slightly off target have reasons to explain. These can be found in the notes section of appendix IIa and IIb.
1.8	Attached under <b>Appendix III</b> is a report from the 'Performance Management System' which details the Corporate Plan Key Performance Indicators (KPIs) results for the period Quarter 4 (January - March inclusive) of 2025/26. This appendix is shown in 2 formats appendix IIIa and IIIb.
1.9	Appendix IIIa shows the quarterly progress during the 2025/26 financial year, this has been produced in response to members' requests to see comparative data across all quarters within the financial year of reporting.
1.10	Appendix IIIb shows the Q4 progress in a summary graphical format.
1.11	There were 9 Corporate Plan Indicators for the 2025/26 financial year. 8 KPIs were achieved at the end of Q4, 1 KPI was not achieved.

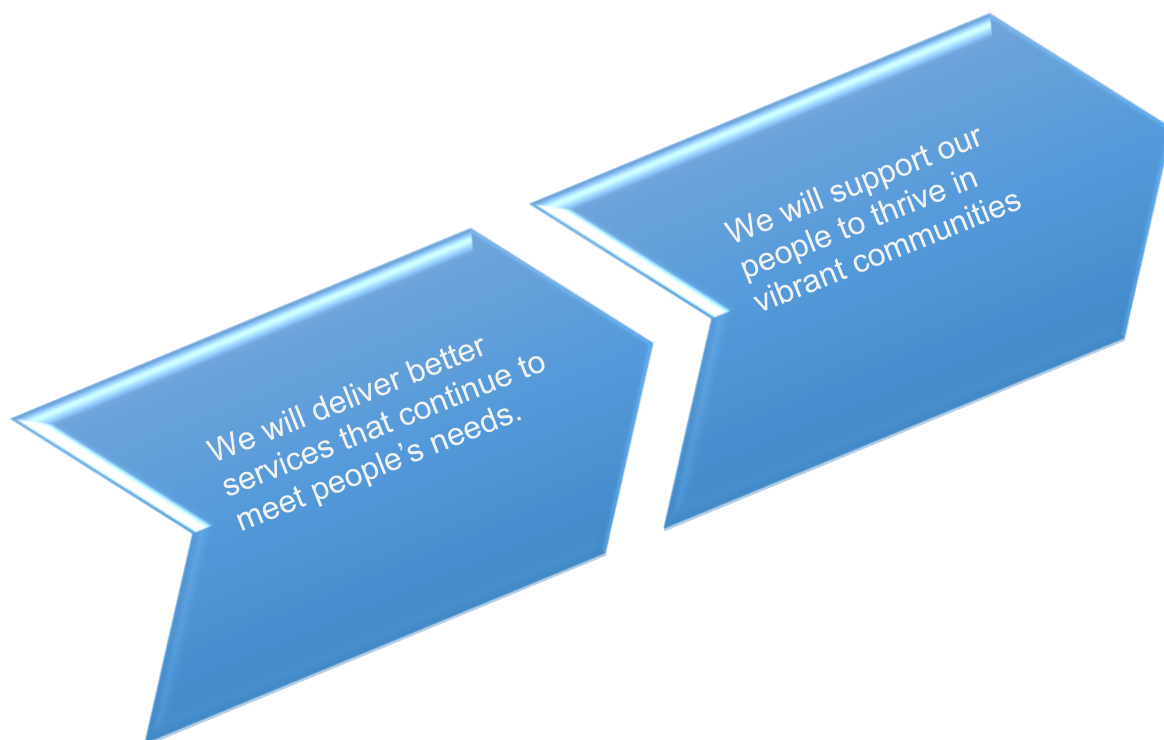
1.12	The 1 KPI that was not achieved, and the explanation why, can be found in the notes section of appendix IIIa and IIIb.	
2.0	<b><u>Recommendation</u></b> It is recommended that Members note the appended reports.	
3.0	<b><u>Finance and Resource Implications</u></b> None.	
4.0	<b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.

<b>Appendices:</b>	<p><b>Appendix I</b> - a quarterly monitoring document including case studies of improvement for the period Quarter 4 (January - March inclusive) of 2025/26.</p> <p><b>Appendix IIa &amp; IIb</b> details the Performance KPI results for the period Quarter 4 (January - March inclusive) of 2025/26.</p> <p><b>Appendix IIIa &amp; IIIb</b> details the Corporate Plan KPI results for the period Quarter 4 (January - March inclusive) of 2025/26.</p>
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# Performance Improvement Objectives 2025/26

## Update Report Quarter 4, 2025/26



### Performance Improvement Objective (1)

We will deliver better services that continue to meet people’s needs.

**Project 1: Enhance processing times of planning applications by implementing and monitoring the Planning Service Improvement Programme (25/26)**

<p><b>Success Measures</b></p> <ul style="list-style-type: none"> <li>Proportion of invalid applications returned within 5 working days: 90% per quarter</li> <li>% of older applications (18+ months) Q1 – 20%, Q2 – 40%, Q3 -70%, Q4 - 90%</li> <li>Processing time (Local Applications) 15 week average: Q1 – 30, Q2 – 25, Q3 -20, Q4 – 15</li> </ul>	<p><b>Quarterly Update: PI targets varied</b></p> <ul style="list-style-type: none"> <li>A total of 30 older applications were processed and the Q4 target of 90% was not met due to a slowdown in Q3 in terms of the number of older applications processed.</li> <li>By the end of Q4 processing times were reduced by approximately 25 weeks from a high of 47.8 weeks in Q1 to a low of 22.8 weeks in Q4. For at least three quarters during the year the average processing time was between 22 and 25 weeks.</li> </ul>
<p><b>Impact</b></p> <p>By the end of Q4 71.8% of older applications pre-dating 31 December 2023 had been processed. While the objective of processing 90% of these applications was not met very good progress was made reducing the number of older applications by 214 in real terms. This saw processing times in the last three quarters under 25 weeks for local applications. It is proposed to continue with this performance objective into next year and build on the progress made to date.</p>	

**Project 2: Improve our Prompt Payments – reduce number of days taken to pay suppliers**

<p><b>Success Measures</b></p> <ul style="list-style-type: none"> <li>PI KPI: % of supplier invoices paid within 10 days Q1 65%, Q2 70%, Q3 75%, Q4 80%</li> <li>PI KPI: % of supplier invoices paid within 30 days Q1 88%, Q2 90%, Q3 92%, Q4 95%</li> </ul>	<p><b>Quarterly Update: PI Targets partially met</b></p> <ul style="list-style-type: none"> <li>80.54% of invoices were paid within 10 working days</li> <li>93.66% of invoices were paid within 30 days.</li> </ul> <p>The annual figures for 25/26 were: 10 days – 83.41% 30 days – 95.70%</p>
<p><b>Impact</b></p> <p>Although we remain under the KPI of 90% for 10 days and 100% within 30 days, there has been a concerted effort across the Council to improve the payment times.</p>	

**Project 3: Increase our staff attendance levels**

<p><b>Success Measures</b></p> <ul style="list-style-type: none"> <li>The average number of working days lost due to absences reduced. (Rolling year absence – days lost per employee): Q1 – 15.5, Q2 – 15.0, Q3 – 14.5, Q4 – 14</li> </ul>	<p><b>Quarterly Update: Target not met</b></p> <ul style="list-style-type: none"> <li>15.72 days</li> <li>17 H&amp;W initiatives</li> </ul>
<p><b>Impact</b></p> <p>Long term absence has increased in January, February and March. Work is on-going with targeted units to identify ways forward on individual cases to reduce this. 17 Health &amp; Wellbeing Initiatives were undertaken in Q4 to support employee wellbeing.</p>	

Project 4: Reduce the percentage of household waste being disposed of in landfill sites.	
<b>Success Measure</b> <ul style="list-style-type: none"> <li>A maximum of 10% collected waste will be sent to landfill</li> </ul>	<b>Quarterly Update: Targets met</b> <ul style="list-style-type: none"> <li>0.28% of household waste has been landfilled</li> </ul>
<b>Impact</b> A new contract came into effect on 01 February 2025	

### Performance Improvement Objective (2)

We will support our people to thrive in vibrant communities

Project 1: Enabling our citizens to influence decision making through community conversations in Lisburn South and Downshire West.	
<b>Success Measures</b> <ul style="list-style-type: none"> <li>Development of a Village / Placeshaping Plan in Lisburn South (Ballymacash) and Downshire West (TBC)</li> <li>Q2 – 1 completed, Q4 - 1 additional completed</li> <li>Agreement &amp; implementation of Village plan and where applicable case studies on the difference the community conversations have made within the areas</li> </ul>	<b>Quarterly Update: PI Targets partially met</b> <ul style="list-style-type: none"> <li>Community Planning updated and discussed with the Ballymacash Interagency Forum in March 2026 on Village Plan progress. This meeting included agencies such as Ballymacash Regeneration Network, Lisburn &amp; Castlereagh City Council Community Development, Northern Ireland Housing Executive, Housing Associations, Police Service of Northern Ireland, Supporting Communities, and the Department for Infrastructure. These meetings and updates with on-going action monitoring will continue across 2026.</li> <li>Progress has been made in advancing the Village Planning Programme, with a proposed structured delivery model of five village plans for 2026-27 under consideration and a proposed schedule of DEA sequencing under consideration to support a coordinated rollout across this time period.</li> </ul>
<b>Impact</b> See case study overleaf	

### Case Study

#### Case Study: Ballymacash Interagency Forum & Village Planning in Action

##### Overview

The Ballymacash Interagency Forum is a locally based partnership bringing together key statutory, community, and voluntary organisations to collaboratively address issues and opportunities within the Ballymacash area of Lisburn South. Acting as a practical, place-based delivery mechanism, the Forum plays a central role in both informing and supporting the implementation of the Ballymacash Village Action Plan.

##### A Strong Local Partnership Model:

The Forum is anchored by Ballymacash Regeneration Network and housed in the Ballymacash Community Centre, a key community organisation with deep local knowledge and strong connections to



residents. It works alongside a range of statutory and support agencies including:

- Lisburn & Castlereagh City Council (Community Planning & Community Development/Services)
- Northern Ireland Housing Executive and Housing Associations
- Police Service of Northern Ireland (PSNI)
- Supporting Communities
- Department for Infrastructure (engaged through Forum connections)

The Interagency Forum has been integral to the development of the Ballymacash Village Action Plan. Through its established networks and regular engagement, it has helped to identify and validate local priorities through ongoing dialogue with community representatives. Statutory partners have brought data, insight and service-level understanding, while community voices have been channelled through a trusted local anchor organisation. This has ensured that the Village Plan was not developed in isolation, but was instead grounded in clear, evidenced local need and shaped by those delivering services on the ground.



A key strength of the Ballymacash model is the continuity between planning and delivery. Rather than ending once the plan was developed, the Interagency Forum has provided an ongoing structure to monitor progress against Village Plan actions, coordinate delivery across partners, and ensure that actions are led by the most appropriate organisation. It has also created a mechanism to address barriers in real time, including resource constraints and operational challenges, while helping to align additional opportunities such as funding streams, training and community initiatives.



Forum discussions have linked Village Planning activity with wider Community Services support, funding opportunities and environmental improvement work, creating a coordinated and responsive approach. Recent over 50's fitness work linked to Age Friendly strategy and desire in the Village for more opportunities for local health and well-being activities – that can also aid with social connection – is a good exemplar of LCCC working with a local anchor organisation to deliver on Village Plan priorities.

Central to the success of the Forum is the role of local anchor organisations, particularly Ballymacash Regeneration Network. Their contribution has included acting as a trusted intermediary between residents and statutory agencies, hosting meetings and sustaining consistent local engagement, leading or supporting the delivery of community-based actions and programmes, and ensuring that the resident voice remains central throughout implementation. This anchor-led approach strengthens community ownership of the Village Plan and supports more sustainable, locally driven outcomes.

Overall, the Ballymacash Interagency Forum demonstrates how Village Planning can and should be a living, locally owned process. By embedding ongoing monitoring and delivery within an existing interagency structure, partnerships remain active and accountable, actions are continuously reviewed and adapted, and Community Planning is translated into visible, place-based impact.

Project 2: Improve engagement methods by developing and implementing a Citizen Consultation Framework	
<b>Success Measure</b> Have we: <ul style="list-style-type: none"> <li>• Developed and launched a community consultation strategy – Q1</li> <li>• Measured the number of</li> </ul>	<b>Quarterly Update: PI Target met</b> <ul style="list-style-type: none"> <li>• Consultations are live on dedicated page on LCCC website.</li> <li>• Framework is available on the Intranet.</li> <li>• Number of consultations to date: 1. Performance Improvement Plan.</li> </ul>

consultations by directorate – Q3 <ul style="list-style-type: none"> <li>• Created a consultation page on website, providing links to each live consultation, contact details for the service consulting etc – Q3/Q4</li> </ul>	2. Carryduff Household Recycling Centre Redevelopment. 3. Proposed development at Barbour Park. 4. Planning Application Validation Checklist.
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**Project 3: Deliver a range of employability programmes that will help our residents to achieve relevant qualifications that will enable them to gain new or better employment. This will also include the delivery of specialist support and advice for those with a disability**

<b>Success Measure</b> Have we supported 125 people within our Council area to achieve relevant qualifications that will enable them to gain employment.	Quarterly Update: <b>PI Target met</b>
<ul style="list-style-type: none"> <li>• LMP – support for 100 people Q1 – 0, Q2 – 20, Q3 – 40, Q4 – 40</li> <li>• Support for 25 people with a disability Q1 – 0, Q2 – 5, Q3 – 10, Q4 – 10</li> </ul>	<ul style="list-style-type: none"> <li>• 161 participants recruited</li> <li>• LCC LMP launched an additional 5 Skills Academies</li> <li>• 77 participants enrolled onto a Upskilling Programme accessing a range of management qualifications ranging from Level 2 to Level 7</li> <li>• Secured additional funding to recruit a further 40 participants onto the Gamified Learning Programme</li> <li>• Delivered an innovative STEM learning event, <i>The Big Bridge</i>, to primary schools across the council area, supporting 400 pupils</li> </ul>

**Impact**  
See Case Studies overleaf

**Case Studies:**

The Council strives to target those furthest from the labour market who face additional barriers to employment. As part of Lisburn & Castlereagh City Council’s Labour Market Partnership programme, the Council has developed a diverse range of employability programmes and events that will support our residents to achieve qualifications and gain employment. Here are some of the highlights achieved.

**Gamified Learning Programme: Essential Skills**

In response to concerning statistics showing a significant rise in the number of young people leaving school without qualifications, the Lisburn and Castlereagh Labour Market Partnership developed an innovative learning programme. This programme enables participants to gain essential skills qualifications in English and Maths through digital gaming platforms.

This approach helps reduce the anxiety often linked to traditional classroom-based learning, allowing participants to work towards qualifications in a more relaxed and engaging way, without the pressure of formal exams. Initially we had the capacity to support 40 participants, however, the programme received unprecedented demand, with a total of 80 applications. As a result, additional funding was successfully secured, enabling all 80 participants to engage in the programme.

**The Big Bridge**

A total of 397 pupils from primary schools across Lisburn and Castlereagh participated in 15 interactive engineering sessions delivered at Lagan Valley Island in February 2026. As part of the *Big Bridge* STEM initiative, pupils worked alongside professional engineers to design, build and test a 13-metre-long, 3-metre-high bridge.



The programme, delivered by the Lisburn and Castlereagh Labour Market Partnership and funded by the Department for Communities, was targeted at P5 to P7 pupils. Each one-hour session combined hands-on, collaborative learning with curriculum-aligned content and provided early exposure to careers in engineering and the wider STEM sector. All participants received a certificate of achievement in recognition of their involvement.

The initiative has received highly positive feedback from both schools and parents, with many noting the lasting impact of the experience, as pupils continued to discuss and reflect on the workshops after participation.

Teachers also highlighted the strong alignment with the Northern Ireland curriculum and the value of direct engagement with industry professionals in enhancing pupils' understanding of real-world STEM applications.

**Project 4: Support the progression of actions in the Glenavy Village Plan in partnership with new and established groups.**

**Success Measures**

- Physical Measures:
  - Installation of new playpark in Killultagh housing development end of Q1
  - Installation of new bus shelter at Lyngrove by end of Q2
  - Replacement of existing bins and increased capacity of bins in Glenavy area.
  - Establishment of a pedestrian crossing in the village of Glenavy.
- Community & Wellbeing Measures:
  - Capacity building with local community groups
- Environmental Measures:
  - Biodiversity projects with schools in Glenavy throughout year
  - Woodland and horticulture events in Glenavy throughout year

**Quarterly Update: PI Targets met**

- Play Park installation – Completed in Q1
- Installation of new bus shelter at Lyngrove -This has been progressed with the installation of the bus shelter at Lyngrove Hill/Crumlin Road, Glenavy (funded through the Small Settlements Regeneration Programme), with NIE connection conducted in Jan 2026 with reinstatement following thereafter.
- Replacement of existing bins and increased capacity of bins in Glenavy area – complete
- As reported in Q3 - The Department for Infrastructure (Dfi) has responded to the request for a pedestrian crossing on Glenavy Road, confirming that while a survey was conducted in November 2023, the location did not rank highly against other sites based on assessed need. Dfi uses a consistent, criteria-based process that considers pedestrian and vehicle volumes, traffic speed, road width, proximity to amenities, vulnerability of users, and collision history. Although the Glenavy Road site does not meet current thresholds for funding, it will remain on the Dfi list for future consideration should priorities or conditions change.
- Ballymacrick Primary School Eco Team continues to play a key role in promoting environmental awareness, leading activities such as recycling, planting, litter reduction and peer education, while maintaining their Green Eco Schools flag status. Pupils participated in practical workshops including the construction of bird and bat boxes, pond exploration and wildlife observation, supporting hands-on learning in biodiversity. In addition, recently pupils engaged in a trout rearing project, observing development from eggs to fry prior to release, supported by Glenavy Conservation and Angling

Club. Storm Éowyn also resulted in the loss of a number of trees locally, including within the grounds of St Aidan's. While this has not had an immediate environmental impact, it presents an opportunity to support renewed and enhanced tree planting initiatives, contributing to biodiversity, climate resilience, and long-term environmental improvement.

### Impact

See Case Studies below

## Case Study

### Case Study: Bus Shelter Installation – Crumlin Road, Glenavy

#### Overview

A new bus shelter has been successfully installed on Crumlin Road, Glenavy, funded through the Small Settlements Regeneration Programme. The project responds directly to identified local need for improved public transport infrastructure, particularly supporting school pupils and residents who rely on daily bus services.

#### Identifying the Need

Local feedback highlighted the lack of adequate shelter for individuals waiting on public transport along this route. This was of particular concern for:

- School children travelling to and from local schools
- Older residents and vulnerable users
- Commuters exposed to adverse weather conditions

The absence of suitable infrastructure impacted both safety and accessibility, reinforcing the need for intervention.

#### Project Delivery

The installation was delivered through partnership working, with funding secured via the Small Settlements Regeneration Programme.

- Bus shelter installed on-site (Crumlin Road, Glenavy)
- NIE connection scheduled to enable lighting
- Final reinstatement works to follow installation

This coordinated approach ensured efficient delivery and minimal disruption.

#### Impact and Benefits

The new bus shelter provides immediate and tangible benefits to the local community:

- Improved safety and comfort for school pupils and daily commuters
- Enhanced accessibility for all users, particularly during poor weather
- Support for sustainable travel, encouraging use of public transport
- Visible local investment, contributing to community confidence and wellbeing



## Department : All

(Type = 'Performance Improvement')

Tuesday 2nd of June 2026

### Planning & Capital Development

#### 148 : Older Applications Reduce the % of older applications that are more 18 months old

Reduce the % of older applications that are more 18 months old (*based on 298 older applications as at 31st March 2025)	Target	Jul 25 20%	Oct 25 40%	Jan 26 70%	Apr 26 90%
	Actual	28% * 1	50% * 2	61% * 3	71.81% * 4
Notes:	<ol style="list-style-type: none"> <li>1 During this quarter 84 older applications were processed and the target was exceeded. This however means that the statutory target for local applications could not be met as our focus remained on processing older applications.</li> <li>2 Q2 - target met.</li> <li>3 There was limited opportunity to perform against this measure in December which impacted adversely on our ability to meet the target for quarter 3.</li> <li>4 The total number of older applications has been reduced by 214. While the target of 90% was not reached this was due to a number of operational constraints. This was an ambitious target and very good progress was made in reducing our backlog of older applications in real terms.</li> </ol>				

### Communities

#### 219 : Community Conversations In Lisburn South and Downshire West

Village plan developed for Lisburn South (Ballymacash) by end of September 25	Target	Jul 25 No	Oct 25 No	Jan 26 Yes	Apr 26 Yes
	Actual	No * 1	No * 2	Yes * 3	Yes * 4
Notes:	<ol style="list-style-type: none"> <li>1 Community consultation will be held in Ballymacash on the evening of 4 September and an Action Plan produced by end September</li> <li>2 Community consultation was held in Ballymacash on the evening of 3rd September and a draft Action Plan has been produced. A refined version of the Ballymacash Village Action Plan will be presented back to community representatives and partners on 9 October 2025 for review, agreement, and forward progression.</li> <li>3 The Ballymacash Village Action Plan was presented back to community representatives and partners on 9 October 2025. The plan was endorsed by attendees and is now being progressed, with delivery actions led by partners and supported through ongoing Community Planning engagement and monitoring.</li> <li>4 Community Planning updated and discussed with the Ballymacash Interagency Forum in March 2026 on Village Plan progress.</li> </ol>				
Village plan developed for Downshire West by end March 26	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No * 1	No * 2	No * 3	No * 4
Notes:	<ol style="list-style-type: none"> <li>1 Waiting for confirmation that Moira will be the location for the new Village Plan.</li> <li>2 Discussions are still on-going in regards to specific location of the next Village Plan</li> <li>3 The location of the next Village Plan has not yet been confirmed. Further internal scoping discussions are underway to inform a decision.</li> <li>4 Progress has been made in advancing the Village Planning Programme, with a proposed structured delivery model of five village plans for 2026-27 under consideration and a proposed schedule of DEA sequencing under consideration to support a coordinated rollout across this time period.</li> </ol>				

### Innovation

#### 225 : Engagement Methods Implementation of framework

<p>Development of citizen consultation framework</p>	<p>Target</p> <p>Actual</p>	<p>Jul 25</p> <p>Yes</p> <p>Yes</p> <p>* 1</p>	<p>Oct 25</p> <p>Yes</p> <p>Yes</p> <p>* 2</p>	<p>Jan 26</p> <p>Yes</p> <p>Yes</p> <p>* 3</p>	<p>Apr 26</p> <p>Yes</p> <p>Yes</p> <p>* 4</p>
<p>Notes:</p>	<p>1 In development and brought to CMT in Q2.</p> <p>2 Citizen Engagement Framework presented to CMT and agreed as an internal document.</p> <p>3 The Framework has been agreed and is being presented to CMT week beginning 12th January, this will then be taken to committee in February. Once approved at Committee and ratified it will immediately be available and promoted for use across council.</p> <p>4 The Framework has been approved through February CSC. Framework being demonstrated to all DMTs.</p>				
<p>Launch of citizen consultation framework</p>	<p>Target</p> <p>Actual</p>	<p>Jul 25</p> <p>No</p> <p>No</p>	<p>Oct 25</p> <p>Yes</p> <p>No</p> <p>* 1</p>	<p>Jan 26</p> <p>Yes</p> <p>No</p> <p>* 2</p>	<p>Apr 26</p> <p>Yes</p> <p>Yes</p> <p>* 3</p>
<p>Notes:</p>	<p>1 Citizen Engagement Framework has been presented to CMT and approved in principle, to be shared with Departments and launched on website at end of Q3.</p> <p>2 Framework has been agreed and is being presented to CMT week beginning 12th January, this will then be taken to committee in February. Once approved at Committee and ratified it will immediately be available and promoted for use across council and will be launched on website in Quarter 4.</p> <p>3 The Framework has been approved through February CSC. Framework being demonstrated to all DMTs. Framework available on Intranet and Website has a live consultation page</p>				
<p>Measure the number of consultations by Directorate</p>	<p>Target</p> <p>Actual</p>	<p>Jul 25</p> <p>No</p> <p>No</p>	<p>Oct 25</p> <p>No</p> <p>No</p>	<p>Jan 26</p> <p>Yes</p> <p>No</p> <p>* 1</p>	<p>Apr 26</p> <p>Yes</p> <p>Yes</p> <p>* 2</p>
<p>Notes:</p>	<p>1 The framework is a guidance document being developed for all officers. The measurement of the number of consultations will be developed when the framework is launched in Q4.</p> <p>2 1. Performance Improvement Plan 2. Carryduff Household Recycling Centre Redevelopment 3. Proposed Development at Barbour Park 4. Planning Application Validation Checklist</p>				
<p>Create a consultation page on website</p>	<p>Target</p> <p>Actual</p>	<p>Jul 25</p> <p>No</p> <p>No</p>	<p>Oct 25</p> <p>No</p> <p>No</p>	<p>Jan 26</p> <p>No</p> <p>No</p>	<p>Apr 26</p> <p>Yes</p> <p>Yes</p> <p>* 1</p>
<p>Notes:</p>	<p>1 Created and live on website including previous consultations that have closed.</p>				

Economic Development

226 : Labour Market Partnership programme Participants

<p>Number of participants in the Labour Market Partnership programme (cumulative)</p>	<p>Target</p> <p>Actual</p>	<p>Jul 25</p> <p>0</p> <p>0</p> <p>* 1</p>	<p>Oct 25</p> <p>20</p> <p>55</p> <p>* 2</p>	<p>Jan 26</p> <p>60</p> <p>75</p> <p>* 3</p>	<p>Apr 26</p> <p>100</p> <p>161</p> <p>* 4</p>
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- Notes:
- 1 During Quarter 1 the Lisburn and Castlereagh Labour Market Partnership launched their first programme to be delivered as part of the 25/26 Action Plan. 12 participants completed the Classroom Assistant Academy. During this period, time has been spent on developing programmes and associated tender documentation with the aim to launch in September 2025.
  - 2 During Quarter 2 the Lisburn and Castlereagh Labour Market Partnership launched a range of programmes as part of the 25/26 Action Plan. The remainder of the programmes outlined in the 25/26 Action Plan will be launched during Quarter 3.
  - 3 During Quarter 3 the Lisburn and Castlereagh Labour Market Partnership launched a range of programmes as part of the 25/26 Action Plan. The remainder of the programmes outlined in the 25/26 Action Plan will be launched during Quarter 4.
  - 4 During Quarter 4, the Lisburn and Castlereagh Labour Market Partnership launched and delivered an extensive portfolio of Skills Academies across areas such as Digital, Welding, Renewable Technologies, and Classroom Assistant support. Alongside this, an Employee Upskilling Programme was introduced, offering a variety of management qualifications to help develop staff skills. Additional funding was also secured, allowing a further 40 participants to take part in an engaging Gamified Learning programme.

Planning & Capital Development

**234 : Local Applications (Internal KPI) Average processing time for local planning applications. (Processed from date valid to decision issued or withdrawn within an average of 22.5 weeks)**

Reduce the average processing times to 22.5 weeks by year end. (assuming a starting point of 42.5 weeks)

	Jul 25	Oct 25	Jan 26	Apr 26
Target	39	30	25	20
Actual	47.8	25.6	22.4	22.8
	* 1	* 2		* 3

- Notes:
- 1 There has been a continued focus on the processing of older applications which is still reflected in the processing times reported in this quarter. It should be noted however that 78 more applications were decided in this period than were received, given that significant numbers of older applications are being processed it is expected to achieve better performance closer to the statutory target for this indicator by the end of the year.
  - 2 It is expected to achieve better performance closer to the statutory target for this indicator by the end of the year but it is unlikely to meet the average processing times of 22.5 weeks for the year.
  - 3 In Q4 the KPI was only missed by 2.8 weeks and it validates as previously stated that good progress is made in improving processing times. It should be noted however that these comments are confined solely to performance in Q4. This should be distinguished from our end of year performance which is measured as an average of our performance over 12 months. It is anticipated that the average processing time for the end of year will be 29.4 weeks which means that we did not meet our performance target of 22.5 weeks for year end, by approximately 7 weeks.

**235 : Planning Service Improvement Programme Monitoring the implementation of the Planning Service Improvement Programme during 25/26**

Implementation of the validation checklist

	Jul 25	Oct 25	Jan 26	Apr 26
Target	No	Yes	Yes	Yes
Actual	No	No	No	No
		* 1	* 2	* 3

- Notes:
- 1 Stakeholder engagement has been concluded. Formal Public consultation process is now taking place for 12 weeks and we cannot proceed until the outcome of that process is known.
  - 2 Stakeholder engagement has been concluded. Formal Public consultation process is ongoing and due to close on 23 February 2026. Cannot proceed until the outcome of that process is known.
  - 3 Public consultation completed. Draft validation checklist being amended to reflect comments received. Subject to Committee approval it is intended to bring forward a direction of adopt the checklist in Q2 of the 26/27 financial year.

Proportion of invalid applications returned within 5 working days Q3 75% Q4 90%

	Jul 25	Oct 25	Jan 26	Apr 26
Target	0%	0%	75%	90%
Actual	0%	0%	Cannot be measured%	Cannot be measured%
			* 1	* 2

- Notes:
- 1 Cannot be measured - linked to above implementation of the validation checklist.
  - 2 Cannot be measured - linked to above implementation of the validation checklist.

Economic Development

**254 : Inclusivity Delivery of specialist employability support and advice for those with a disability.**

<p>Number of people supported (cumulative)</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>0</td> <td>5</td> <td>15</td> <td>25</td> </tr> <tr> <td>Actual</td> <td>0</td> <td>23</td> <td>23</td> <td>64</td> </tr> <tr> <td></td> <td>* 1</td> <td>* 2</td> <td>* 3</td> <td>* 4</td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		0	5	15	25	Actual	0	23	23	64		* 1	* 2	* 3	* 4				
Target	Jul 25	Oct 25	Jan 26	Apr 26																					
	0	5	15	25																					
Actual	0	23	23	64																					
	* 1	* 2	* 3	* 4																					
<p>Notes:</p>	<ol style="list-style-type: none"> <li>The Lisburn Castlereagh LMP delivered an employability event specifically targeting individuals with a disability or long-term health condition. The event focused on the provision of specialist advice and support regarding services available across the Council area. In addition to the DisAbility Employability event delivered by the Lisburn and Castlereagh Labour Market Partnership on 26th June 2025, we will also deliver a specialist employment programme for those with a disability that will provide qualifications, mentoring and employment support for 25 residents. This programme will go to tender in July with a planned launch to commence in September 2025.</li> <li>The Lisburn Castlereagh LMP delivered an employability event specifically targeting employers of individuals with a disability or long-term health condition. The event focused on the provision of specialist advice and support for those considering providing employment opportunities for individuals with a disability. In addition to the Be Inclusive event delivered by the Lisburn and Castlereagh Labour Market Partnership, we will also deliver two specialist employment programme for those with a disability that will provide qualifications, mentoring and employment support for 45 residents. These programmes will be launched in Quarter 3.</li> <li>In Q2 we supported 23 in total, therefore, this overachievement covers the Q3 target. This figure also doesn't include the 2 disability focused programmes (Thrive and Graduate) which aim to support an additional 45 participants. The recruitment hasn't been completed for these programmes so while it shows as a 0 in Q3 by Q4 we will have recruited in full. Overall it is anticipated that our annual return will have supported 78 in total which exceeds the annual KPI target of 25.</li> <li>In Q4, we supported 10 participants through our Graduate Programme and a further 35 through our THRIVE programme. Both programmes help local residents build their skills, gain relevant qualifications, and access mentoring, while also connecting them with employers to support them into suitable local employment. In addition, we delivered another training session on our Be Inclusive toolkit, which provides employers with practical advice and support on recruiting and supporting staff who may face additional barriers or have a disability.</li> </ol>																								
<p>Recruitment onto specialist programme of support</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>No</td> <td>Yes</td> <td>Yes</td> <td>Yes</td> </tr> <tr> <td>Actual</td> <td>No</td> <td>No</td> <td>No</td> <td>Yes</td> </tr> <tr> <td></td> <td></td> <td>* 1</td> <td>* 2</td> <td>* 3</td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		No	Yes	Yes	Yes	Actual	No	No	No	Yes			* 1	* 2	* 3				
Target	Jul 25	Oct 25	Jan 26	Apr 26																					
	No	Yes	Yes	Yes																					
Actual	No	No	No	Yes																					
		* 1	* 2	* 3																					
<p>Notes:</p>	<ol style="list-style-type: none"> <li>In addition to the Be Inclusive event delivered by the Lisburn and Castlereagh Labour Market Partnership, we will also deliver two specialist employment programme for those with a disability that will provide qualifications, mentoring and employment support for 45 residents. These programmes will be launched in Quarter 3.</li> <li>Recruitment onto the programme has commenced but will not be officially verified until Q4</li> <li>In Q4, we supported 10 participants through our Graduate Programme and a further 35 through our THRIVE programme. Both programmes were fully recruited.</li> </ol>																								
<p>Delivery of accredited training</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>No</td> <td>No</td> <td>Yes</td> <td>Yes</td> </tr> <tr> <td>Actual</td> <td>No</td> <td>No</td> <td>No</td> <td>Yes</td> </tr> <tr> <td></td> <td></td> <td></td> <td>* 1</td> <td>* 2</td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		No	No	Yes	Yes	Actual	No	No	No	Yes				* 1	* 2				
Target	Jul 25	Oct 25	Jan 26	Apr 26																					
	No	No	Yes	Yes																					
Actual	No	No	No	Yes																					
			* 1	* 2																					
<p>Notes:</p>	<ol style="list-style-type: none"> <li>Training will commence once recruitment onto the programme has been completed.</li> <li>Yes – through two of our specialist support programmes, participants were provided with a range of qualifications designed to enhance their career paths. These qualifications were tailored to individual needs, rather than taking a one-size-fits-all approach.</li> </ol>																								
<p>Receive bespoke mentoring tailored to each individual action plan</p>	<table border="1"> <tr> <td>Target</td> <td>Jul 25</td> <td>Oct 25</td> <td>Jan 26</td> <td>Apr 26</td> </tr> <tr> <td></td> <td>No</td> <td>No</td> <td>No</td> <td>Yes</td> </tr> <tr> <td>Actual</td> <td>No</td> <td>No</td> <td>No</td> <td>Yes</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>* 1</td> </tr> </table>	Target	Jul 25	Oct 25	Jan 26	Apr 26		No	No	No	Yes	Actual	No	No	No	Yes					* 1				
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<p>Notes:</p>	<ol style="list-style-type: none"> <li>Through two of our specialist support programmes, participants were provided with a bespoke action plan and individual mentoring support.</li> </ol>																								

Supporting participants on their journey Employment / Further Education	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No	No	No	Yes * 1
Notes:	1 Through two of our specialist support programmes, participants were connected with local employers committed to creating inclusive workplaces. Support included interview preparation, employer engagement, and ongoing guidance to help participants move into employment / education.				

HR&OD

258 : Staff Absenteeism

Average Rolling year absence	Target	Jul 25 15.5	Oct 25 15.0	Jan 26 14.5	Apr 26 14
	Actual	14.23	14.76	14.28	15.72 * 1
Notes:	1 Long term absence has increased in January, February and March. Work is on-going with targeted units to identify ways forward on individual cases to reduce this.				

Communities

259 : Glenavy Village Plan Actions

Installation of new playpark in Killultagh housing development by end of Q1	Target	Jul 25 Yes	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	Yes * 1	Yes * 2	Yes * 3	Yes * 4
Notes:	1 Completed by Parks Dept in April and funded through the Small Settlements Fund. 2 The Parks Department completed the installation of the new playpark. It was funded through the Small Settlements Fund and is now fully operational. 3 The Parks Department completed the installation of the new playpark. It was funded through the Small Settlements Fund and is now fully operational. 4 Project was completed in qtr 2.				
Installation of new bus shelter at Lyngrove by end of Q2	Target	Jul 25 No	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	No * 1	No * 2	No * 3	Yes * 4
Notes:	1 Regeneration & Growth Committee approved this in June and written consent has been given to DfI, on behalf of Translink to adopt the four square metres of land, who are applying for planning permission. 2 A planning application has been submitted to LCCC Planning for the shelter. Awaiting planning decision. 3 This was installed in January. A further update will be provided in the Q4 report. 4 This has been progressed with the installation of the bus shelter at Lyngrove Hill/Crumlin Road, Glenavy (funded through the Small Settlements Regeneration Programme).				
Replacement of existing bins and increased capacity of bins in Glenavy area.	Target	Jul 25 Yes	Oct 25 Yes	Jan 26 Yes	Apr 26 Yes
	Actual	Yes * 1	Yes * 2	Yes	Yes
Notes:	1 Completed by Waste Management 2 Waste Management has completed this action. New bins have been installed in key locations across the Glenavy area, with enhanced capacity now in operation.				
Establishment of a pedestrian crossing in the village of Glenavy.	Target	Jul 25 No	Oct 25 No	Jan 26 No	Apr 26 Yes
	Actual	No * 1	No * 2	No * 3	Yes * 4

Notes:	<p>1 Economic Development taking forward , and will follow up with Dfl in terms of the process. Further update to follow.</p> <p>2 The Department for Infrastructure (Dfi) has responded to the request for a pedestrian crossing on Glenavy Road, confirming that while a survey was conducted in November 2023, the location did not rank highly against other sites based on assessed need. Dfi uses a consistent, criteria-based process that considers pedestrian and vehicle volumes, traffic speed, road width, proximity to amenities, vulnerability of users, and collision history. Although the Glenavy Road site does not meet current thresholds for funding, it will remain on the Dfl list for future consideration should priorities or conditions change.</p> <p>3 The Department for Infrastructure (Dfi) has responded to the request for a pedestrian crossing on Glenavy Road, confirming that while a survey was conducted in November 2023, the location did not rank highly against other sites based on assessed need. Dfi uses a consistent, criteria-based process that considers pedestrian and vehicle volumes, traffic speed, road width, proximity to amenities, vulnerability of users, and collision history. Although the Glenavy Road site does not meet current thresholds for funding, it will remain on the Dfl list for future consideration should priorities or conditions change.</p> <p>4 No further action as per previous quarterly update.</p>
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Capacity building with local community groups (cumulative)		Jul 25	Oct 25	Jan 26	Apr 26
	Target	1	2	3	4
	Actual	1	2	3	4
		* 1	* 2	* 3	* 4

Notes:	<p>1 A networking event was held at St Clare's Community Hall in Glenavy with local community organisations to identify needs on 29 Jan 2025. Following this, accredited food hygiene and CPR training has been delivered. Further engagement through a subsequent networking event is planned for Sep 2025.</p> <p>2 A second networking session is scheduled for November 2025. Community Planning will also attend the November 2025 Community Services Connection event to share updates on completed or unfeasible actions in the Glenavy Village Plan.</p> <p>3 A community networking and update event was held at St Clare's Community Hall, Glenavy, in December 2025, bringing together local community organisations to identify needs, share progress and support delivery of the Glenavy Village Plan. This session built on earlier engagement and strengthened coordination between local groups, Community Services and Community Planning. The December 2025 session provided an opportunity to present the latest position on the Glenavy Village Plan, confirm completed and in-progress actions, gather further community feedback, and reinforce shared priorities across physical, community and environmental themes. Community Planning will continue to engage with local networks and attend relevant Community Services connection events to share updates on progress, including actions that are completed, ongoing or no longer feasible, ensuring transparency and continued community involvement in delivery.</p> <p>4 The next Community Network event is planned for summer 2026. This event will also present the opportunity to continue working closely with the local organisational network to enhance the aspiration for further capacity building.</p>
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Biodiversity projects with schools / woodland & horticulture events in Glenavy throughout year (cumulative)		Jul 25	Oct 25	Jan 26	Apr 26
	Target	1	2	3	4
	Actual	1	2	3	4
		* 1	* 2	* 3	* 4

Notes:	<p>1 Ballymacrickett Primary School has a lovely woodland area and the Community Engagement Officer in Parks Dept worked with a group of pupils in autumn 2024 doing tree identification and seed collection. She returned to the school in Dec bringing a range of bulbs and worked with the eco counsellors and children from the afterschool club to plant the bulbs in flower beds surrounding the school. The primary school has great outdoor facilities with a mini forest, raised beds for vegetables and they are in the process of building an outdoor classroom.</p> <p>2 Ballymacrickett Primary School has actively participated in this work. This action is complete.</p> <p>3 A bulb planting session with completed with Ballymacrickett PS on Wednesday 10th December. Approximately 60 children participated in the planting and really enjoyed the activity.</p> <p>4 Ballymacrickett Primary School Eco Team continues to play a key role in promoting environmental awareness, leading activities such as recycling, planting, litter reduction and peer education, while maintaining their Green Eco Schools flag status. Pupils participated in practical workshops including the construction of bird and bat boxes, pond exploration and wildlife observation, supporting hands-on learning in biodiversity. In addition, recently pupils engaged in a trout rearing project, observing development from eggs to fry prior to release, supported by Glenavy Conservation and Angling Club.</p>
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Operational Services

**263 : Waste collection % of collected waste going to landfill through the residual waste treatment contract**

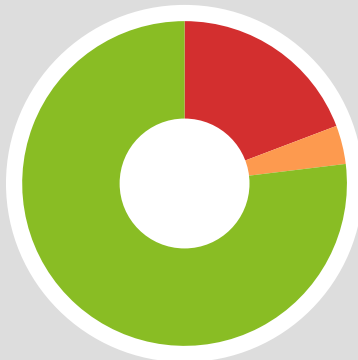
Less than 10% of our collected waste will go to landfill	Target 10% Actual 0%	Jul 25 10% 0.24%	Oct 25 10% 0.31%	Jan 26 10% 0.28%	Apr 26 10% 0.28%
<b>Finance</b>					
<b>268 : Finance Prompt payments</b>					
% of supplier invoices paid within 10 days	Target 65% Actual 85.2%	Jul 25 65% 85.2%	Oct 25 70% 82.62%	Jan 26 75% 85.55%	Apr 26 80% 83.41% * 1
Notes:	1 Overall average for the year 83.41%				
% of supplier invoices paid within 30 days	Target 88% Actual 96.81%	Jul 25 88% 96.81%	Oct 25 90% 96.44%	Jan 26 92% 96.11%	Apr 26 95% 95.7% * 1
Notes:	1 Slight reduction in quarter 4. Overall average for the year 95.7%				

# Performance Summary

All

(Type = 'Performance Improvement')

Tuesday 2nd of June 2026



Red = Target missed or Measure overdue  
 Amber = Measure fallen slightly short/behind  
 Green = Target met or exceeded  
 Grey = Measure not yet due

Operational Services	1 Green
Finance	2 Green
Planning & Capital Development	3 Red
	1 (A)
Economic Development	6 Green
Communities	1 (R)
	7 Green
HR&OD	1 Red
Innovation	4 Green

PLANNING & CAPITAL DEVELOPMENT			DUE 1ST APR 26
148 : Older Applications Reduce the % of older applications that are more 18 months old: <b>Reduce the % of older applications that are more 18 months old (*based on 298 older applications as at 31st March 2025)</b>	TARGET 90%	ACTUAL 71.81%	STATUS <b>Red</b>
<p><b>Notes:</b> The total number of older applications has been reduced by 214. While the target of 90% was not reached this was due to a number of operational constraints. This was an ambitious target and very good progress was made in reducing our backlog of older applications in real terms.</p>			

COMMUNITIES			DUE 1ST APR 26
219 : Community Conversations In Lisburn South and Downshire West : <b>Village plan developed for Lisburn South (Ballymacash) by end of September 25</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> Community Planning updated and discussed with the Ballymacash Interagency Forum in March 2026 on Village Plan progress.</p>			

COMMUNITIES			DUE 1ST APR 26
219 : Community Conversations In Lisburn South and Downshire West : <b>Village plan developed for Downshire West by end March 26</b>	TARGET Yes	ACTUAL No	STATUS <b>Red</b>
<p><b>Notes:</b> Progress has been made in advancing the Village Planning Programme, with a proposed structured delivery model of five village plans for 2026-27 under consideration and a proposed schedule of DEA sequencing under consideration to support a coordinated rollout across this time period.</p>			

INNOVATION			DUE 1ST APR 26
225 : Engagement Methods Implementation of framework: <b>Development of citizen consultation framework</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> The Framework has been approved through February CSC. Framework being demonstrated to all DMTs.</p>			

INNOVATION			DUE 1ST APR 26
225 : Engagement Methods Implementation of framework: <b>Launch of citizen consultation framework</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> The Framework has been approved through February CSC. Framework being demonstrated to all DMTs. Framework available on Intranet and Website has a live consultation page</p>			

INNOVATION			DUE 1ST APR 26
225 : Engagement Methods Implementation of framework: <b>Measure the number of consultations by Directorate</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> 1. Performance Improvement Plan 2. Carryduff Household Recycling Centre Redevelopment 3. Proposed Development at Barbour Park 4. Planning Application Validation Checklist</p>			

**INNOVATION** DUE 1ST APR 26

225 : Engagement Methods Implementation of framework: <b>Create a consultation page on website</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
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**Notes:** Created and live on website including previous consultations that have closed.

**ECONOMIC DEVELOPMENT** DUE 1ST APR 26

226 : Labour Market Partnership programme Participants: <b>Number of participants in the Labour Market Partnership programme (cumulative)</b>	TARGET 100	ACTUAL 161	STATUS <b>Green</b>
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**Notes:** During Quarter 4, the Lisburn and Castlereagh Labour Market Partnership launched and delivered an extensive portfolio of Skills Academies across areas such as Digital, Welding, Renewable Technologies, and Classroom Assistant support. Alongside this, an Employee Upskilling Programme was introduced, offering a variety of management qualifications to help develop staff skills. Additional funding was also secured, allowing a further 40 participants to take part in an engaging Gamified Learning programme.

**PLANNING & CAPITAL DEVELOPMENT** DUE 1ST APR 26

234 : Local Applications (Internal KPI) Average processing time for local planning applications. (Processed from date valid to decision issued or withdrawn within an average of 22.5 weeks): <b>Reduce the average processing times to 22.5 weeks by year end. (assuming a starting point of 42.5 weeks)</b>	TARGET 20	ACTUAL 22.8	STATUS <b>Amber</b>
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**Notes:** In Q4 the KPI was only missed by 2.8 weeks and it validates as previously stated that good progress is made in improving processing times. It should be noted however that these comments are confined solely to performance in Q4. This should be distinguished from our end of year performance which is measured as an average of our performance over 12 months. It is anticipated that the average processing time for the end of year will be 29.4 weeks which means that we did not meet our performance target of 22.5 weeks for year end, by approximately 7 weeks.

**PLANNING & CAPITAL DEVELOPMENT** DUE 1ST APR 26

235 : Planning Service Improvement Programme Monitoring the implementation of the Planning Service Improvement Programme during 25/26: <b>Implementation of the validation checklist</b>	TARGET Yes	ACTUAL No	STATUS <b>Red</b>
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**Notes:** Public consultation completed. Draft validation checklist being amended to reflect comments received. Subject to Committee approval it is intended to bring forward a direction of adopt the checklist in Q2 of the 26/27 financial year.

**PLANNING & CAPITAL DEVELOPMENT** DUE 1ST APR 26

235 : Planning Service Improvement Programme Monitoring the implementation of the Planning Service Improvement Programme during 25/26: <b>Proportion of invalid applications returned within 5 working days Q3 75% Q4 90%</b>	TARGET 90%	ACTUAL Cannot be measured%	STATUS <b>Red</b>
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**Notes:** Cannot be measured - linked to above implementation of the validation checklist.

ECONOMIC DEVELOPMENT			DUE 1ST APR 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : <b>Supporting participants on their journey Employment / Further Education</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> Through two of our specialist support programmes, participants were connected with local employers committed to creating inclusive workplaces. Support included interview preparation, employer engagement, and ongoing guidance to help participants move into employment / education.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : <b>Receive bespoke mentoring tailored to each individual action plan</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> Through two of our specialist support programmes, participants were provided with a bespoke action plan and individual mentoring support.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : <b>Delivery of accredited training</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> Yes – through two of our specialist support programmes, participants were provided with a range of qualifications designed to enhance their career paths. These qualifications were tailored to individual needs, rather than taking a one-size-fits-all approach.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : <b>Recruitment onto specialist programme of support</b>	TARGET Yes	ACTUAL Yes	STATUS <b>Green</b>
<p><b>Notes:</b> In Q4, we supported 10 participants through our Graduate Programme and a further 35 through our THRIVE programme. Both programmes were fully recruited.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 26
254 : Inclusivity Delivery of specialist employability support and advice for those with a disability. : <b>Number of people supported (cumulative)</b>	TARGET 25	ACTUAL 64	STATUS <b>Green</b>
<p><b>Notes:</b> In Q4, we supported 10 participants through our Graduate Programme and a further 35 through our THRIVE programme. Both programmes help local residents build their skills, gain relevant qualifications, and access mentoring, while also connecting them with employers to support them into suitable local employment. In addition, we delivered another training session on our Be Inclusive toolkit, which provides employers with practical advice and support on recruiting and supporting staff who may face additional barriers or have a disability.</p>			

HR&OD			DUE 1ST APR 26
258 : Staff Absenteeism : <b>Average Rolling year absence</b>	TARGET 14	ACTUAL 15.72	STATUS <span style="background-color: red; color: white; border-radius: 50%; padding: 2px 5px;">Red</span>
<p><b>Notes:</b> Long term absence has increased in January, February and March. Work is on-going with targeted units to identify ways forward on individual cases to reduce this.</p>			

COMMUNITIES			DUE 1ST APR 26
259 : Glenavy Village Plan Actions: <b>Installation of new playpark in Killultagh housing development by end of Q1</b>	TARGET Yes	ACTUAL Yes	STATUS <span style="background-color: green; color: white; border-radius: 50%; padding: 2px 5px;">Green</span>
<p><b>Notes:</b> Project was completed in qtr 2.</p>			

COMMUNITIES			DUE 1ST APR 26
259 : Glenavy Village Plan Actions: <b>Installation of new bus shelter at Lyngrove by end of Q2</b>	TARGET Yes	ACTUAL Yes	STATUS <span style="background-color: green; color: white; border-radius: 50%; padding: 2px 5px;">Green</span>
<p><b>Notes:</b> This has been progressed with the installation of the bus shelter at Lyngrove Hill/Crumlin Road, Glenavy (funded through the Small Settlements Regeneration Programme).</p>			

COMMUNITIES			DUE 1ST APR 26
259 : Glenavy Village Plan Actions: <b>Replacement of existing bins and increased capacity of bins in Glenavy area.</b>	TARGET Yes	ACTUAL Yes	STATUS <span style="background-color: green; color: white; border-radius: 50%; padding: 2px 5px;">Green</span>
<p><b>Notes:</b></p>			

COMMUNITIES			DUE 1ST APR 26
259 : Glenavy Village Plan Actions: <b>Establishment of a pedestrian crossing in the village of Glenavy.</b>	TARGET Yes	ACTUAL Yes	STATUS <span style="background-color: green; color: white; border-radius: 50%; padding: 2px 5px;">Green</span>
<p><b>Notes:</b> No further action as per previous quarterly update.</p>			

COMMUNITIES			DUE 1ST APR 26
259 : Glenavy Village Plan Actions: <b>Capacity building with local community groups (cumulative)</b>	TARGET 4	ACTUAL 4	STATUS <span style="background-color: green; color: white; border-radius: 50%; padding: 2px 5px;">Green</span>
<p><b>Notes:</b> The next Community Network event is planned for summer 2026. This event will also present the opportunity to continue working closely with the local organisational network to enhance the aspiration for further capacity building.</p>			

COMMUNITIES			DUE 1ST APR 26
259 : Glenavy Village Plan Actions: <b>Biodiversity projects with schools / woodland &amp; horticulture events in Glenavy throughout year (cumulative)</b>	TARGET 4	ACTUAL 4	STATUS <b>Green</b>
<p><b>Notes:</b> Ballymacricket Primary School Eco Team continues to play a key role in promoting environmental awareness, leading activities such as recycling, planting, litter reduction and peer education, while maintaining their Green Eco Schools flag status. Pupils participated in practical workshops including the construction of bird and bat boxes, pond exploration and wildlife observation, supporting hands-on learning in biodiversity. In addition, recently pupils engaged in a trout rearing project, observing development from eggs to fry prior to release, supported by Glenavy Conservation and Angling Club.</p>			

OPERATIONAL SERVICES			DUE 1ST APR 26
263 : Waste collection % of collected waste going to landfill through the residual waste treatment contract: <b>Less than 10% of our collected waste will go to landfill</b>	TARGET 10%	ACTUAL 0.28%	STATUS <b>Green</b>
<p><b>Notes:</b></p>			

FINANCE			DUE 1ST APR 26
268 : Finance Prompt payments: <b>% of supplier invoices paid within 10 days</b>	TARGET 80%	ACTUAL 83.41%	STATUS <b>Green</b>
<p><b>Notes:</b> Overall average for the year 83.41%</p>			

FINANCE			DUE 1ST APR 26
268 : Finance Prompt payments: <b>% of supplier invoices paid within 30 days</b>	TARGET 95%	ACTUAL 95.7%	STATUS <b>Green</b>
<p><b>Notes:</b> Slight reduction in quarter 4. Overall average for the year 95.7%</p>			

## Department : All

(Type = 'Corporate Plan')

Tuesday 21st of April 2026

### Economic Development

#### 38 : New Jobs Number per annum

Number of new jobs linked to economic development programmes (cumulative)	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual		15	40	70
		34	72	113	175
		* 1	* 2	* 3	* 4

Notes:

- 1 Belfast City Council – Go-Succeed PMO have not verified Qtr.1 numbers
- 2 This is a cumulative figure, 38 jobs in Q2. LCCC still awaiting Belfast City Council – Go-Succeed PMO to verify Qtr.2 numbers
- 3 Actual Total is a cumulative figure. New jobs for Q3 - 41. Belfast City Council, PMO still to verify Go Succeed numbers
- 4 During Q4 delivery of the 25/26 LMP Action Plan a total of 42 jobs were created. PMO Suggested - 20 (Jan-Feb Only) LCCC has raised concern with Belfast City Council PMO regarding potential discrepancies in statutory job calculations. Additionally, March figures yet to be finalised by BCC PMO.

### Assets

#### 212 : Assets Rental from the Council's leased assets

% Lettable areas within the Council's available leased assets	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual		80%	80%	80%
		97%	97%	88.5%	90.5%
		* 1	* 2	* 3	* 4

Notes:

- 1 The majority of the remaining lettable space within Bradford Court has been agreed for lease to a Government Agency. The two vacant units at Ballyoran have been agreed by way of license and the agreements are in progress with solicitors.
- 2 There has been no change in the % Lettable areas within the Council's available leased assets since Q1. The tenancy of Bradford Court is due to increase going forward and will therefore impact on this KPI.
- 3 Lease agreements have now been signed with NIO, however there are a total of 6 properties that we are in the process of completing the leases on.
- 4 Five lease agreements are still being processed for completion by solicitors.

### Planning & Capital Development

#### 228 : Capital Programme Expenditure measured against Budget

Cumulative % Expenditure against budget	Target	Jul 25	Oct 25	Jan 26	Apr 26
	Actual		20%	40%	70%
		62.54%	72.02%	78.33%	82.93%
			* 1	* 2	* 3

Notes:

- 1 Committed spend within capital programme as at the end of period 6 (quarter 2) is 72.02%. This figures includes actual spend to date plus committed orders. This is mainly due to the profiled spend being committed by purchase order on the DIIB redevelopment project.
- 2 Committed spend within capital programme as at the end of period 9 (quarter 3) is 78.33%. This figures includes actual spend to date plus committed orders. This is mainly due to the profiled spend being committed by purchase order on the DIIB redevelopment project.
- 3 Commitments are excluded from Q4 report as they have rolled forward to the next financial year and no longer have an impact on 25/26 figures. Q4 report reflects only the actual spend to date. Previous quarters included committed.

### Regeneration & Growth

#### 245 : Progress the Dundonald International Ice Bowl redevelopment. DIIB project proceeding to Construction Phase and building complete

Building completion	Target Actual	Jul 25 30% 30%	Oct 25 40% 40%	Jan 26 50% 50%	Apr 26 60% 60%
Environmental Health, Risk & Emergency Planning					
<b>246 : Enhance burial provision Increase number of plots in line with outline business case</b>					
Number of new grave plots in operation (cumulative)	Target Actual	Jul 25 50 0 * 1	Oct 25 150 156 * 2	Jan 26 300 309 * 3	Apr 26 400 438 * 4
Notes:	1 Contractor procured during Q1. Contractor commenced onsite in July 2025. A further update will be provided at the end of Q2. 2 156 graves developed, with 98 available for release. 3 309 graves available for sale 4 438 graves available for sale.				
Innovation					
<b>247 : Further projects with BRCD: Destination Royal Hillsborough Programme including planning and award of contracts.</b>					
Planning permission by end Q2	Target Actual	Jul 25 No No	Oct 25 Yes No * 1	Jan 26 Yes No * 2	Apr 26 Yes Yes * 3
Notes:	1 The key reasons for not achieving planning permission are as follows: - The complete set of design drawings were not provided to LCCC by the designers at the exact date they were requested, there was a delay with one drawing. - HED have not responded with their views on the revised drawings and given the Heritage aspect of this village it would be foolish to proceed without HED input. - Dfl had a few minor issues with the new drawings and these needed to be amended by the design team 2 Planning application was approved at Planning Committee on Monday 12th January 2026. This will be reflected in the Q4 KPI. 3 Planning application was approved at Planning Committee on Monday 12th January 2026				
Leisure & Community Wellbeing					
<b>262 : Health &amp; Wellbeing Programmes &amp; events</b>					
Number of Health & Wellbeing Programmes (cumulative)	Target Actual	Jul 25 20 27	Oct 25 40 46 * 1	Jan 26 60 79 * 2	Apr 26 80 115 * 3
Notes:	1 In quarter 2 there were an additional 19 health and wellbeing programmes delivered with 10 programmes delivered through Outreach and Inclusion and nine through the Health and wellbeing officer . 2 In quarter 3 there were an additional 33 programmes; 14 were delivered by the health and wellbeing officer and 19 programmes were delivered by the outreach and inclusion officer. 3 In quarter 4 there were an additional 36 programmes; 21 were delivered by the health and wellbeing officer and 15 programmes were delivered by the outreach and inclusion officer.				
Number of participants on the Health & Wellbeing programmes (cumulative)	Target Actual	Jul 25 500 1642 * 1	Oct 25 800 3380 * 2	Jan 26 1300 6356 * 3	Apr 26 1800 9237 * 4

<p>Notes:</p>	<ol style="list-style-type: none"> <li>1 Subsequent to the KPI being set a number of new programmes such as Pilates in the park were introduced by the Wellbeing team and they have proven to be very popular. Given that a number of these activities are seasonal the numbers will reduce after Q2.</li> <li>2 In quarter 2 there were an additional 19 health and wellbeing programmes delivered with 10 programmes delivered through Outreach and Inclusion and nine through the Health and wellbeing officer. The Outreach and Inclusion programmes had 209 participants during this period while the health &amp; wellbeing programmes had 1529 participants during this period, bringing the total to 19 programmes with 1738 participants in Quarter 2. Subsequent to the KPI being set a number of new programmes such as Pilates in the park were introduced by the Wellbeing team and they have proven to be very popular. Given that a number of these activities are seasonal the numbers will reduce after Q2. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health &amp; Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.</li> <li>3 In Q3 there were an additional 2,976 participants in all of the health &amp; wellbeing programmes. 510 participated in the outreach and inclusion programmes and 2466 in the health &amp; wellbeing programmes. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health &amp; Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.</li> <li>4 In Q4 there were an additional 2,881 participants in all of the health &amp; wellbeing programmes. 302 participated in the outreach and inclusion programmes and 2579 in the health &amp; wellbeing programmes. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health &amp; Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.</li> </ol>
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<p>Number of Community Events (Cumulative)</p>	<table border="1"> <tr> <td>Target</td> <td>25</td> <td>50</td> <td>75</td> <td>100</td> </tr> <tr> <td>Actual</td> <td>27</td> <td>62</td> <td>128</td> <td>219</td> </tr> <tr> <td></td> <td>* 1</td> <td>* 2</td> <td>* 3</td> <td>* 4</td> </tr> </table>	Target	25	50	75	100	Actual	27	62	128	219		* 1	* 2	* 3	* 4	<p>Jul 25</p>	<p>Oct 25</p>	<p>Jan 26</p>	<p>Apr 26</p>
Target	25	50	75	100																
Actual	27	62	128	219																
	* 1	* 2	* 3	* 4																

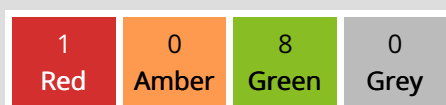
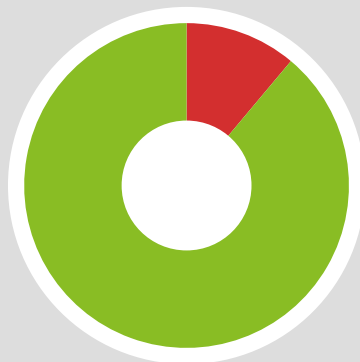
<p>Notes:</p>	<ol style="list-style-type: none"> <li>1 6 community events for Community Services, 10 Community Planning Events, 8 Age friendly events, 1 Mayors Parade, 2 Biodiversity</li> <li>2 In Q2 35 Community events were held: PCSP = 12 events Community Services = 6 C Planning = 5 (Youth Councils and Ballymacash event) Age Friendly = 9 (Summer scheme) and Dementia Friendly Community Training + Ballybeen Walking Group + Dementia Info Day = 3</li> <li>3 In Q3 66 Community Events; Age Friendly – 4 Events Community Planning - 16 events PCSP - 46 events involving 2,565 persons</li> <li>4 In Q4 91 Community Events; Age Friendly – 6 Events Community Planning / ILCLM &amp; Arts - 15 events Community Services - 24 events PCSP - 46 events involving 1,185 persons</li> </ol>
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# Performance Summary

All

(Type = 'Corporate Plan')

Tuesday 21st of April 2026



Red = Target missed or Measure overdue  
 Amber = Measure fallen slightly short/behind  
 Green = Target met or exceeded  
 Grey = Measure not yet due

Environmental Health, Risk & Emergency Planning	1 Green
Regeneration & Growth	1 Green
Planning & Capital Development	1 Red
Assets	1 Green
Economic Development	1 Green
Leisure & Community Wellbeing	3 Green
Innovation	1 Green

**ECONOMIC DEVELOPMENT**

DUE 1ST APR 26

38 : New Jobs Number per annum:**Number of new jobs linked to economic development programmes (cumulative)**

TARGET  
160

ACTUAL  
175

STATUS  
**Green**

**Notes:** During Q4 delivery of the 25/26 LMP Action Plan a total of 42 jobs were created. PMO Suggested - 20 (Jan-Feb Only) LCCC has raised concern with Belfast City Council PMO regarding potential discrepancies in statutory job calculations. Additionally, March figures yet to be finalised by BCC PMO.

**ASSETS**

DUE 1ST APR 26

212 : Assets Rental from the Council's leased assets:**% Lettable areas within the Council's available leased assets**

TARGET  
80%

ACTUAL  
90.5%%

STATUS  
**Green**

**Notes:** Five lease agreements are still being processed for completion by solicitors.

**PLANNING & CAPITAL DEVELOPMENT**

DUE 1ST APR 26

228 : Capital Programme Expenditure measured against Budget:  
**Cumulative % Expenditure against budget**

TARGET  
95%

ACTUAL  
82.93%

STATUS  
**Red**

**Notes:** Commitments are excluded from Q4 report as they have rolled forward to the next financial year and no longer have an impact on 25/26 figures. Q4 report reflects only the actual spend to date. Previous quarters included committed.

**REGENERATION & GROWTH**

DUE 1ST APR 26

245 : Progress the Dundonald International Ice Bowl redevelopment. DIIB project proceeding to Construction Phase and building complete:  
**Building completion**

TARGET  
60%

ACTUAL  
60%

STATUS  
**Green**

**Notes:**

**ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING**

DUE 1ST APR 26

246 : Enhance burial provision Increase number of plots in line with outline business case: **Number of new grave plots in operation (cumulative)**

TARGET  
400

ACTUAL  
438

STATUS  
**Green**

**Notes:** 438 graves available for sale.

**INNOVATION**

DUE 1ST APR 26

247 : Further projects with BRCD: Destination Royal Hillsborough Programme including planning and award of contracts. : **Planning permission by end Q2**

TARGET  
Yes

ACTUAL  
Yes

STATUS  
**Green**

**Notes:** Planning application was approved at Planning Committee on Monday 12th January 2026

LEISURE & COMMUNITY WELLBEING DUE 1ST APR 26

262 : Health & Wellbeing Programmes & events : <b>Number of Health &amp; Wellbeing Programmes (cumulative)</b>	TARGET 80	ACTUAL 115	STATUS <span style="background-color: #4CAF50; color: white; border-radius: 10px; padding: 2px 5px;">Green</span>
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**Notes:** In quarter 4 there were an additional 36 programmes; 21 were delivered by the health and wellbeing officer and 15 programmes were delivered by the outreach and inclusion officer.

LEISURE & COMMUNITY WELLBEING DUE 1ST APR 26

262 : Health & Wellbeing Programmes & events : <b>Number of participants on the Health &amp; Wellbeing programmes (cumulative)</b>	TARGET 1800	ACTUAL 9237	STATUS <span style="background-color: #4CAF50; color: white; border-radius: 10px; padding: 2px 5px;">Green</span>
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**Notes:** In Q4 there were an additional 2,881 participants in all of the health & wellbeing programmes. 302 participated in the outreach and inclusion programmes and 2579 in the health & wellbeing programmes. Their popularity could not have been anticipated when the targets for these programmes and participants were set. Due to the quick inception of the newly established Health & Wellbeing structure, officers were able to increase the number of classes along with securing in year funding from the Trust.

LEISURE & COMMUNITY WELLBEING DUE 1ST APR 26

262 : Health & Wellbeing Programmes & events : <b>Number of Community Events (Cumulative)</b>	TARGET 100	ACTUAL 219	STATUS <span style="background-color: #4CAF50; color: white; border-radius: 10px; padding: 2px 5px;">Green</span>
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**Notes:** In Q4 91 Community Events; Age Friendly – 6 Events Community Planning / ILCLM & Arts - 15 events Community Services - 24 events PCSP - 46 events involving 1,185 persons

<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Performance Improvement Officer

<b>Item for:</b>	Decision
<b>Subject:</b>	Consultation Report on the Draft Performance Improvement Objectives 2026/27

- 1.0 Background and Key Issues:**
- 1.1 Council must carry out an annual public consultation on their draft produce Performance Improvement Objectives to meet the requirements of the Local Government Act (NI) 2014.
  - 1.2 The 2026 Consultation was a six week online consultation exercise which was carried out during April and May 2026. In addition to this, three focus groups were held in various locations within the Council area, at different times to enable as wide a reach and opportunity for feedback as possible and the Performance Improvement Officer also consulted with Youth Council in an online capacity.
  - 1.3 A sign language interpreter was present at the focus groups held in Lagan Valley Island and Castlereagh Hills Golf Club as these sessions were promoted as being accessible for the deaf community.
  - 1.4 **67 consultees** participated in these various focus groups across the three days.
  - 1.5 Council made use of various social media platforms, as well as the Council's online survey tool known as 'Smart Survey'. Consultees included; residents, staff and elected members who are also residents, community groups, local businesses, as well as representatives from the statutory and voluntary sector.
  - 1.6 The Performance Improvement Objectives and Projects for 26/27 were made available in draft format on the Council's website and promoted through social media during April and May.
  - 1.7 A new approach was taken this year where the Performance Improvement Objectives were provided in Easy Read format for the purposes of accessibility and inclusion. This was promoted on the Council's website and through social media channels to improve engagement and participation. *A copy of this Easy Read format can be found by clicking this link: [Our plans for the next year](#)*
  - 1.8 Social Media analytics indicate that the average reach per Facebook (FB) post was 2,487, an increase of 9% on 2,285 in 2025. The average impressions per tweet was 368, an increase of 22% on 301 in 2025.
  - 1.9 Active monitoring of social media activity showed that Facebook posts published on Thursdays at 7pm achieved above-average clicks and engagement. As a result, the communications plan for the remaining weeks of the consultation was amended to schedule social media posts for Thursday evenings at 7pm.
  - 1.10 The highest source of traffic to relevant web pages is direct; this indicates most are clicking through from elsewhere on the website; this will either be through the website's search function or from the news article.
  - 1.11 Compared with all other social media platforms, Facebook generated the highest level of external traffic to webpages, driving ten times more traffic than X to the news article and more than twenty times as much traffic to the PIP Objectives page.

1.12	At the close of the consultation a total of <b>128 responses</b> were received from the online survey.	
1.13	The consultation found that the vast majority of consultees supported the draft Performance Improvement Objectives and associated projects for 2026/27. As a result, no changes are proposed to the draft objectives.	
1.14	<b>Appendix I</b> contains the consultation report on the Draft Performance Improvement Objectives for 2026/27, including a summary of the feedback received from consultees.	
1.15	Any feedback that fell outside the scope of the consultation was referred to the relevant Council service or external agency, as appropriate.	
<b>2.0</b>	<b><u>Recommendation</u></b>  It is recommended that Members approve the appended report for publication.	
<b>3.0</b>	<b><u>Finance and Resource Implications</u></b> N/A	
<b>4.0</b>	<b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out	No – not applicable as this report is feedback on a consultation with the public.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out.	No – not applicable as this report is feedback on a consultation with the public.

<b>Appendices:</b>	<b>Appendix I</b> – Consultation report on the Draft Performance Improvement Objectives for 2026/27
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# Draft Improvement Objectives 2026/27

## Consultation Report



**1. INTRODUCTION**

The 6-week Consultation on Lisburn & Castlereagh City Council’s **Draft Improvement Objectives** – click here to view: [Performance Improvement Objectives 2026/27 – Proposed approach - lisburncastlereagh.gov.uk](#) for 2026/27 closed on the **11<sup>th</sup> May 2026**.

The Improvement Objectives and associated projects consulted upon were:

Performance Improvement Objective	What will we do in 2026/27?
<b>We will deliver better services that continue to meet people’s needs</b>	We will continue to improve the processing times of planning applications
	We will deliver enhanced digitised services
	We will deliver new improved facilities at Aghalee Sports Pavillion and SEYCON as standard design concepts
<b>We will support our people to thrive in vibrant communities</b>	We will launch a volunteering scheme engaging people of all backgrounds and increasing the level of residents who play an active role in civic society
	Our communities have engaged with expanded Council-supported safety initiatives which protect the most vulnerable in our society
	We will provide additional opportunities and widen the Health & Wellbeing programme through the PARS initiative
	We will engage with community groups to improve community resilience across the Council area

**2. CONSULTATION METHODS – At a glance**

**April–May 2026 | Online + in-person engagement across the Council area**

<b>67</b> Focus group participants	<b>128</b> Online survey responses
<b>+9%</b> Facebook reach up on	<b>+22%</b> X impressions up on 2025

What We Did	Who We Reached	Accessible Approach	Digital Reach	Traffic Snapshot
<ul style="list-style-type: none"> <li>• <b>Online consultation</b></li> <li>• <b>Three focus groups</b></li> <li>• <b>Social media promotion</b></li> <li>• <b>Smart Survey</b></li> <li>• <b>Council website</b></li> </ul>	<ul style="list-style-type: none"> <li>• Residents</li> <li>• Staff</li> <li>• Elected members</li> <li>• Community groups</li> <li>• Local businesses</li> <li>• Statutory and voluntary sector representatives</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Sign language interpreter</b> at two venues</li> <li>• <b>Easy Read</b> version provided <i>click this link: <a href="#">Our plans for the next year</a></i></li> <li>• <b>Youth Council</b> engaged online</li> <li>• <b>Social Café</b> focus group</li> <li>• <b>Age Friendly Forum</b> members included</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Facebook average reach:</b> 2,487</li> <li>• <b>X average impressions:</b> 368</li> <li>• <b>Top Facebook post:</b> 8,399 views   5,370 reached   30 clicks</li> <li>• <b>Top X post:</b> 769 impressions   4 clicks</li> </ul>	<ul style="list-style-type: none"> <li>• Most visits came from <b>direct traffic</b></li> <li>• Likely through <b>website search</b> or the <b>news article</b></li> <li>• <b>Facebook</b> drove the strongest external traffic</li> <li>• <b>10x</b> more traffic than X to the news article</li> <li>• <b>20x+</b> more traffic than X to the objectives page</li> </ul>

**3. CONSULTATION FINDINGS - detailed overleaf**

The outcome of the consultation was that consultees support the draft performance improvement objectives and associated improvement projects for 2026/27.







A broad spectrum of responses was received, and the following pages detail the outcome and themes from the consultation. Specific comments will be shared with the relevant Council services and directorates. General comments about Council business were also made and these will be considered when planning future improvement objectives and projects. Comments were also received about issues that are not the responsibility of the Council these were mainly about transport and road issues. As these matters do not pertain to Council they will be shared with the relevant responsible organisation, such as Department of Infrastructure, Transport NI & Department for Communities.

More information on the improvement projects including the measures of success, the key performance indicators and expected outcomes are detailed in the Performance Improvement Plan, which will be published by end June 2026.

The following pages contain a detailed analysis of the online survey.

## Draft Performance Improvement Objectives 2026/27 (Consultation)




### 1. Performance Improvement Objectives 2026/27 – proposed approach

1. What is your main interest in responding to this consultation? (Please tick ALL that apply)				
Answer Choices			Response Percent	Response Total
1	Citizen / Ratepayer		70.31%	90
2	Local business		6.25%	8
3	Community group		19.53%	25
4	Statutory sector		7.03%	9
5	Voluntary sector		15.63%	20
6	Member of staff who is a ratepayer		14.84%	19
			answered	128
			skipped	0

### Improvement Objective 1

**We will deliver better services that meet people’s needs.**

The Improvement Projects below will detail how we are going to deliver this Improvement Objective.

Improvement project 1: We will continue to improve the processing times of planning applications. Have we got this improvement objective and project correct?				
Answer Choices			Response Percent	Response Total
1	Yes		57.03%	73
2	No		7.03%	9
3	Don't know		35.94%	46
			answered	128
			skipped	0

### Themes from comments on Improvement Project 1

A major theme is low public confidence in how planning decisions are made. Several respondents suggest that residents are disadvantaged compared with large developers and businesses. There is also scepticism that engagement exercises are meaningful, with some describing consultation as “box-ticking.”

Many comments call for faster processing times, noting that improvements are either unclear or insufficient. Respondents want:

**Improvement project 1: *We will continue to improve the processing times of planning applications.***  
**Have we got this improvement objective and project correct?**

- firmer, more specific targets,
  - visibility of backlog numbers, and
  - clearer explanation of how the process will be made easier and quicker.
- One response also notes that performance measures should account for delays caused by external consultees (e.g., NI Water, Rivers Agency) and suggests defining timelines in a way that allows fair tracking.

Respondents stress that planning decisions must include proper community consultation, with enough time allocated to ensure residents are genuinely heard. Some want clearer communication about proposals—particularly in rural/countryside areas—and more detail on current timeframes and planned improvements.

A recurring concern is that new housing is being approved without adequate supporting infrastructure and public services. Specific pressure points raised include:

- sewage, waste and water capacity,
- roads and local facilities, and
- public transport, especially in villages and rural areas.

The view is that growth should not proceed unless essential services can cope.

Several comments link planning and development to wider economic issues, especially in Lisburn town centre. Key concerns include:

- vacant and derelict buildings,
- lack of landlord maintenance creating safety risks and visual decline, and
- high business rates contributing to shop closures and reduced vitality.

Some respondents argue there is little point increasing population through planning if town-centre services and retail cannot survive.

**Improvement project 2: *We will deliver enhanced digitised services. Within Waste Management these improvements will streamline processes and automate tasks to enhance operational efficiency. Improvements will also be made to the Digital Sculpture Trail App at Hillsborough Forest Park, to include Royal Hillsborough village. It will include routes, attractions and visitor information.***  
**Have we got this improvement objective and project correct?**

Answer Choices			Response Percent	Response Total
1	Yes		63.78%	81
2	No		14.96%	19
3	Don't know		21.26%	27
			answered	127
			skipped	1




**Themes from comments on Improvement Project 2**

- **Protect the forest experience:** Strong pushback against the digital sculpture trail as intrusive to natural beauty (some support, but conditional).

**Improvement project 2: We will deliver enhanced digitised services. Within Waste Management these improvements will streamline processes and automate tasks to enhance operational efficiency. Improvements will also be made to the Digital Sculpture Trail App at Hillsborough Forest Park, to include Royal Hillsborough village. It will include routes, attractions and visitor information. Have we got this improvement objective and project correct?**

- **Don't exclude offline residents:** Concerns about older/less tech-savvy people; need non-digital options.
- **Fix waste services first:** Frustration that recycling/collections haven't improved; issues with last-minute schedule changes and unclear communications.
- **Fair funding & practical priorities:** Worries about value for money and Hillsborough receiving disproportionate investment.

**Improvement project 3: We will deliver new improved facilities at Aghalee Sports Pavillion and Seycon Park, Seymour Hill as standard design concepts. New changing rooms will be built and accessible public toilets will be added. Have we got this improvement objective and project correct?**

Answer Choices		Response Percent	Response Total
1	Yes		72.66% / 93
2	No		4.69% / 6
3	Don't know		22.66% / 29
		answered	128
		skipped	0

**Themes from comments on Improvement Project 3**




- **Demand for wider, fairer investment:** Castlereagh (and Moira) are seen as lacking public space and sports facilities, with perceptions of bias toward Lisburn/Hillsborough; calls to roll improvements out across the whole council area.
- **Basic facility gaps for young users:** Need for proper changing rooms (young people currently changing in open areas) and better-quality, comfortable facilities across the council area.
- **Accessibility & inclusivity requirements:** Requests for disabled access (ramps), accessible toilets that stay open, and engagement with disability organisations (e.g. Mae Murray Foundation, Disability Action) to ensure good practice.
- **Toilets, family needs & design considerations:** Desire for publicly accessible toilets, baby-changing, clear views on toilet provision (including concern about “all-gender” toilets), and suggestions for re-wilding/landscaping benefits at these facilities.
- **Transparency, prioritisation & maintenance:** Questions about why Aghalee & Seycon were prioritised, who can hire/use pitches, and urgency due to health & safety issues at Seycon; strong emphasis on long-term upkeep (caretakers/supervision, cleaning contracts).

Improvement Objective 2

**We will support our people to thrive in vibrant communities**

*The Improvement Projects below will detail how we are going to deliver this Improvement Objective.*




**Improvement project 1: *We will launch a volunteering scheme engaging people of all backgrounds and increasing the level of residents who play an active role in civic society.***  
**Have we got this improvement objective and project correct?**

Answer Choices		Response Percent	Response Total
1	Yes		80.47% 103
2	No		5.47% 7
3	Don't know		14.06% 18
		answered	128
		skipped	0

**Themes from comments on Improvement Project 1**

- **Very positive support for volunteering:** Many see volunteering as a positive way to strengthen communities, build skills, and help deliver benefits when resources are limited.
- **Support existing volunteer groups first:** Strong message to recognise, fund, and sustain established local groups (e.g., Conservation Volunteers/Lagan Valley Regional Park), ensuring volunteers feel valued and properly supported.
- **Inclusion and targeted engagement:** Calls to involve young people (e.g., through schools/youth clubs to counter anti-social behaviour) and retired residents; ensure participation is accessible for people with disabilities (including suggestions to engage RNIB).
- **Practical needs & ideas for roles:** Suggestions include volunteering linked to allotments, towpath clean-ups, and support with grant/funding applications for community groups.
- **Promotion, delivery, and accountability:** Some haven't seen advertising and are unsure how it will work; others want visible progress and strong volunteer uptake within 12 months, plus sustained investment and organisational capacity to manage volunteers well.




**Improvement project 2: *Our communities have engaged with expanded Council-supported safety initiatives which protect the most vulnerable in our society. A safety programme will be designed and delivered to end violence against women and girls. Defibrillators will be placed in community hubs and training provided. Have we got this improvement objective and project correct?***

Answer Choices			Response Percent	Response Total
1	Yes		88.10%	111
2	No		4.76%	6
3	Don't know		7.14%	9
			answered	126
			skipped	2

**Themes from comments on Improvement Project 2**

- **Strong support for more defibrillators:** Many want defibs widely available (including every village), with 24/7 access, clear placement plans, and links to emergency services (e.g., NI Ambulance Service).
- **Training, awareness, and information gaps:** People ask for more public training, better advertising, clear guidance on how to use defibs (including prompts), and an up-to-date map of locations (noting current information is outdated).
- **EVAWG programme welcomed but needs clarity:** Broad support for addressing violence against women and girls, but repeated calls for more detail on what the programme involves, how it will work, and what “success” looks like.
- **Prevention must be inclusive and multi-agency:** Feedback stresses education and early intervention, involving schools, youth groups, police and courts, and engaging boys/men as part of prevention; some also ask to recognise violence against men and support for care-experienced young people.
- **Survivor-led, accessible support and safe spaces:** Respondents emphasise starting with survivor voices, challenging myths about who abuse affects, ensuring services are inclusive for disabled women/girls (RNIB input), and expanding safe spaces/refuge support.

**Improvement project 3: *We will provide additional opportunities and widen the Health & Wellbeing programme through the Physical Activity Referral Scheme (PARS) initiative. Have we got this improvement objective and project correct?***




Answer Choices			Response Percent	Response Total
1	Yes		79.37%	100
2	No		2.38%	3
3	Don't know		18.25%	23
			answered	126
			skipped	2

**Improvement project 3: We will provide additional opportunities and widen the Health & Wellbeing programme through the Physical Activity Referral Scheme (PARS) initiative. Have we got this improvement objective and project correct?**

**Themes from comments on Improvement Project 3**

- **Low awareness & need for promotion:** Several people hadn't heard of the scheme and want it better advertised, with clearer information on how it works and who it's for.
- **Capacity pressures & growing waiting lists:** Staff report backlogs and pressure, linked to high demand and insufficient staffing; frustration is worsened when GP referrals provide limited information, leaving frontline staff to manage expectations.
- **Referral process concerns (GP vs self-referral):** People are unsure who can refer and worry GP-only routes could discourage participation, add burden to GPs, and create stigma/embarrassment. Preference is expressed for self-referral or wider routes (community hubs).
- **More age-appropriate provision:** Requests for dedicated classes for 60+ and especially 70+, including options for less active older adults and opportunities for social connection.
- **Broaden activities & locations:** Suggestions include outdoor options (e.g., walking), more activity types if coaches receive training, greater use of spaces like Lough Moss, and rotating classes across the council area (community halls/centres, not just leisure centres).

**Improvement project 4: We will engage with community groups to improve community resilience across the Council area. We will work with partner organisations and we will help communities prepare for emergencies. Have we got this improvement objective and project correct?**

Answer Choices			Response Percent	Response Total
1	Yes		75.81%	94
2	No		5.65%	7
3	Don't know		18.55%	23
			answered	124
			skipped	4

**Themes from comments on Improvement Project 4**

- **General support:** Many agree the idea is important,
- **Flooding and infrastructure as a priority:** Flooding is repeatedly highlighted (especially recent winter events), with calls to improve local infrastructure and ensure communities have early-response resources (e.g., sandbags, basic first aid) before emergency services arrive.
- **Learning from COVID/storm impacts:** People note communities are still recovering from COVID-19 and storms that damaged sports grounds and facilities; they see resilience planning as helpful for recovery, wellbeing, and preparedness.

- **Training, inclusion, and widening reach:** Suggestions include Citizen Aid training, extending the programme to more areas (e.g., Annahilt and Dundonald first, then wider), and ensuring it is inclusive, particularly for blind/partially sighted residents and other vulnerable groups.
- **Community sector capacity and volunteering:** Strong view that resilience depends on volunteering and community support, but councils must also address the basics—funding, access to facilities, and strengthening weak/non-existent groups—rather than focusing only on business continuity planning.
- **Broader definition of “emergencies”:** Some want the work linked to other crises too, including mental health and wellbeing emergencies, in partnership with other agencies.

#### SUMMARY OF COMMENTS REGARDING SUGGESTED IMPROVEMENTS

- **City/town centre regeneration & business costs:** Strong calls to reduce commercial rates and lower parking costs to attract businesses and shoppers back to Lisburn. Many describe the centre as run-down/empty and want stronger action on derelict buildings, building control, and encouraging independent traders, boutiques, and a better retail/leisure offer (e.g., Bow Street Mall redevelopment, food court, nightlife). Some support events/festivals, but others criticise spending on “cosmetic” items (e.g., Christmas lights) instead of fundamentals.
- **Cleaner, better-maintained public spaces:** Requests for more street cleaning, weed clearance, and better upkeep of public toilets (cleanliness, supplies). Some want enforcement or practical measures for issues like pavement parking (e.g., bollards).
- **Waste and recycling improvements:** Repeated dissatisfaction with recycling provision and reliability—calls to replace kerbside boxes with proper bins (blue bin), increase glass recycling points, improve collection service (including Bryson performance concerns), add more bins (e.g., Lagan towpath), and address access issues for older/disabled residents.
- **Fairness across areas & investment in community infrastructure:** Concerns that some places receive more attention/funding than others, with requests for more investment in Castlereagh, Dundonald (beyond Ballybeen), Carryduff, Moira, Ballinderry, rural settlements (e.g., Killultagh, Stoneyford). Common needs include play parks, community centres, leisure facilities, sports provision, shared spaces for voluntary groups, and improved engagement with new housing areas.
- **Transport, active travel & accessibility:** Calls for better public transport (airport/Dublin links, regular rural services, Hillsborough Road route). Accessibility is a recurring theme—more apartments with lifts, improved disability access in leisure facilities, a Reasonable Adjustment Policy, inclusive street design (RNIB), and affordable access to facilities (free/cheaper classes for over-60s).
- **Community wellbeing, youth provision & safety:** Requests for more youth services and activities (e.g., to address antisocial behaviour in Carryduff), mental health support, quieter/inclusive events for older people and those with learning difficulties, and improved communication about what’s available locally.
- **Environment, heritage & place quality:** Support for sustainability, protecting green spaces (opposition to building over them), re-wilding/wild areas in parks with

appropriate grounds maintenance, more nature-friendly town features, and significantly more investment in heritage/museum collections (e.g., Irish Linen). Some also raise community cohesion/inclusion issues (e.g., removing sectarian-style kerb painting/flags; calls for inclusive events).

- **Overall sentiment leans cautiously positive:** Some praise the objectives as “good work,” “going in the right direction,” and “well structured,”

<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Performance Improvement Officer

<b>Item for:</b>	Decision
<b>Subject:</b>	Performance Monitoring KPI Setting 26 27

## 1.0 **Background and Key Issues:**

- 1.1 A suite of KPIs has been developed and categorised into three categories; Performance KPIs linked to the Performance Improvement Plan, Corporate Plan KPIs linked to the Corporate Plan 2024-28 and Management Information KPIs which are used operationally by officers.
- 1.2 These KPIs have been aligned to working practices, directorate plans and budgets.
- 1.3 As part of the Council's governance responsibilities the G&A committee will receive quarterly KPI reports on the Performance Improvement KPIs and the Corporate Plan KPIs.
- 1.4 Having a small basket of KPIs is not only a best practice but a practical and strategic necessity for councils in Northern Ireland. It supports legal compliance under Part 12 of the Local Government Act (NI) 2014, provides clarity for decision-makers and the public, and ensures performance is focused on delivering real, demonstrable improvements in local services.
- 1.5 **DRAFT Performance Improvement Plan**  
Council must produce an annual Performance Improvement Plan (PIP) to meet the requirements of the Local Government Act (NI) 2014.
- 1.6 That means Council sets performance improvement objectives that represent the priorities for the coming year, and a plan is written detailing how these are going to be delivered.
- 1.7 Attached under **Appendix I** is a copy of the DRAFT Performance Improvement Plan for 2026/27 (full version) which is the detail required by the NI Audit Office.
- 1.8 Council continues to meet the UK Government Accessibility Regulations to ensure its website remains compliant. In line with these regulations, our sustainability agenda and digital strategy we have created a digitally designed version of the PIP in summary format. This will be used as the public document and will be published on the website. Residents can still review Word versions of the PIP document should they wish to.
- 1.9 The digital version can be viewed on this link: [Link to performance-improvement-plan-2026-27-summary](#). This link will be accessible on the website following approval by this Committee and ratification by Council.
- 1.10 Public consultation on this plan was carried out during April and May 2026.
- 1.11 As detailed in the consultation report, the outcome of the consultation was that consultees supported the draft Performance Improvement Objectives and associated projects for 2026/27.
- 1.12 A new approach was taken this year during the consultation where the Performance Improvement Objectives were provided in Easy Read format for the purposes of accessibility and inclusion. It is planned to publish this Easy Read version on the Performance page of the website. *A copy of this Easy Read format can be found by clicking this link:* [Our plans for the next year](#)

1.13	To meet the requirements of the legislation, the plan must be published by 30 <sup>th</sup> June 2026.	
1.14	Monitoring reports on this plan will be brought to this committee on a quarterly basis throughout 2026/27.	
	<u>Corporate Plan KPIs</u>	
1.15	The Corporate Plan KPIs have been developed to monitor in year progress against key deliverables within the LCCC Corporate Plan 2024/28/	
1.16	All numerical targets are shown as cumulative i.e. Q1 also contributes to Q2.	
1.17	Attached under <b>Appendix III</b> is a report detailing the proposed KPIs for 2026/27.	
1.18	Attached under <b>Appendix IV</b> is a report detailing these proposed KPIs and how they are directly linked to the key specific actions of the Corporate Plan for 2026/27. These KPIs have been categorised by theme and listed as a continuing or new KPI.	
<b>2.0</b>	<b><u>Recommendation</u></b>	
	It is recommended that Members approve:	
	<ol style="list-style-type: none"> <li>1. <b>Appendix I</b> - DRAFT Performance Improvement Plan for 2026/27 for publication.</li> <li>2. <b>Appendix III</b> - Proposed Corporate Plan KPIs 26/27</li> </ol>	
<b>3.0</b>	<b><u>Finance and Resource Implications</u></b> N/A	
<b>4.0</b>	<b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b>	
4.1	Has an equality and good relations screening been carried out?	Yes (see <b>appendix II</b> )
4.2	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out	Screen out without mitigation
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out.	No – not applicable for objective setting, but will be undertaken for the relevant projects as appropriate.

<b>Appendices:</b>	<p><b>Appendix I</b> - Performance Improvement Plan for 2026/27 (full version)</p> <p><b>Appendix II</b> - Equality Screening Report</p> <p><b>Appendix III</b> - Proposed Corporate Plan KPIs 26/27</p> <p><b>Appendix IV</b> - is a report detailing the proposed KPIs and how they are directly linked to the key specific actions of the Corporate Plan for 2026/27</p>
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# Performance Improvement Plan 2026/27

**Draft**

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## Foreword from the Chief Executive



On behalf of Lisburn & Castlereagh City Council, I am pleased to present our Performance Improvement Plan for 2026/27. This plan sets out how we will meet our statutory duty to secure continuous improvement and, above all, how we will deliver the best possible outcomes for the people who live, work in and visit our council area.

Local government continues to face significant challenges, including rising demand, financial pressures and increasing expectations for accessible, responsive services. Against this backdrop, the Council remains determined to deliver value for money, strengthen trust through transparency, and use evidence to target improvement where it will make the greatest difference.

For 2026/27, we have agreed two improvement objectives. First, we will deliver better services that continue to meet people's needs—improving the customer experience, making services easier to access, and supporting ongoing work to reduce planning processing times. Second, we will support our people to thrive in vibrant communities—working with partners to encourage volunteering, strengthen safety, health and wellbeing, and local resilience. The improvement projects and measures of success set out in this plan show clearly what we will deliver and how progress will be monitored.

Continuous improvement is not a one-off exercise—it is how we plan, manage performance and learn. We will continue to listen to residents, staff and stakeholders, use data to inform decision-making, and collaborate across sectors to deliver sustainable change. We will also keep elected Members informed through regular performance reporting and scrutiny arrangements.

Thank you for taking the time to read this plan. We welcome feedback as we implement the commitments set out here and report on progress through the year. By working together—residents, partners, elected Members and staff—we can continue to improve services and deliver and support better lives for all in 2026/27.

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David Burns  
**Chief Executive**

# 1. Our council area - Lisburn and Castlereagh

**About Lisburn and Castlereagh**

Lisburn and Castlereagh is one of 11 Councils. It includes the larger settlements of Carryduff and Lisburn City, and part of Castlereagh.

**Population** ⓘ  
Population estimates 2024

**151,669**

7.8% of Northern Ireland population  
The 7th largest population of 11 Councils

**Population density** ⓘ  
Population estimates 2024

**301.2** people per square kilometer

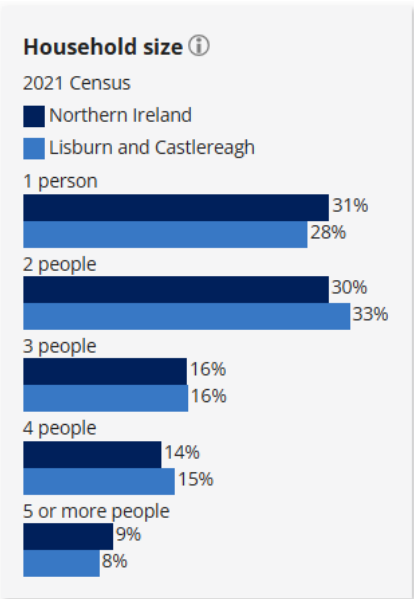
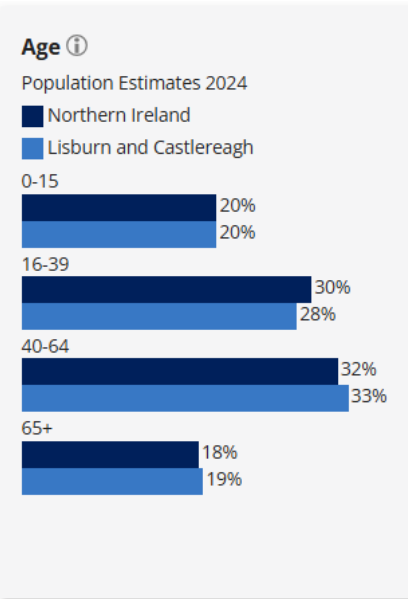
Approximately **2 times** the Northern Ireland average

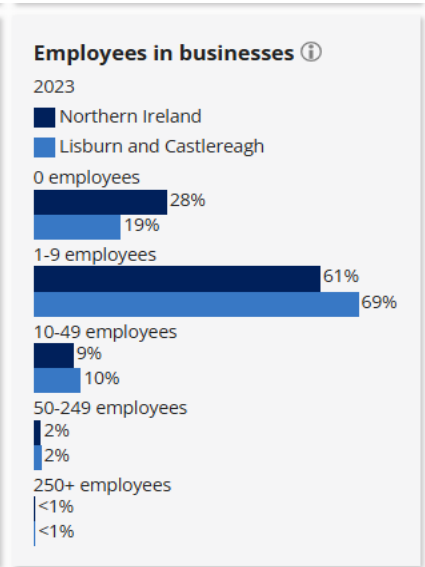
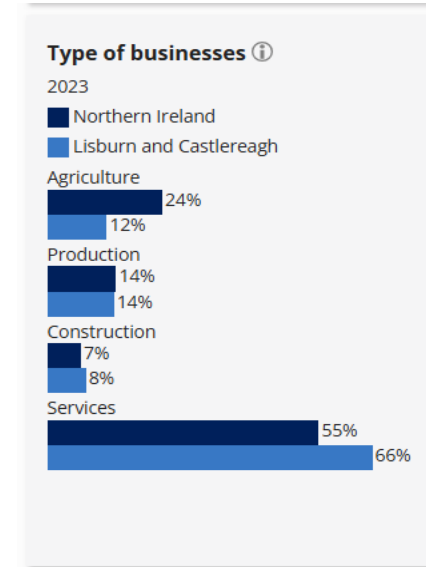
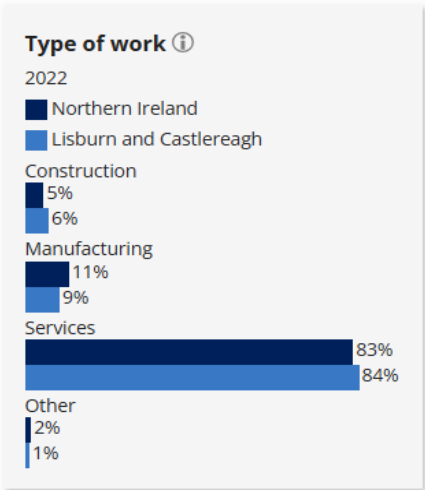
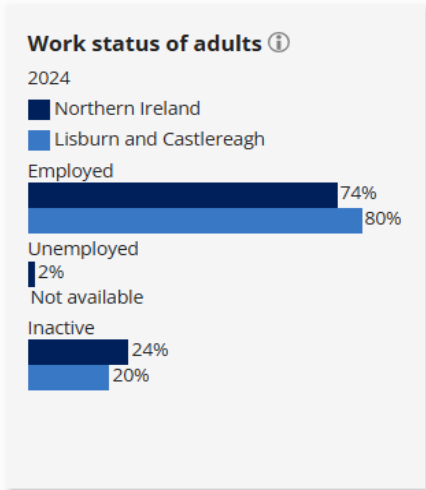


**Population change** ⓘ  
Population Estimates 2024

The population of Lisburn and Castlereagh in 2014 was **139,186** and in 2024 was **151,669**

**▲ Up 9.0%** since 2014 Mid-Year Population Estimate





## Introduction and context

### Why have we a Performance Improvement Plan?

There is a responsibility under Part 12 of the Local Government Act (Northern Ireland) 2014 to set improvement objectives and have arrangements in place to secure their achievement. We must meet this.

Several performance targets are also set by central government departments, in respect of job creation, planning and waste management.

### What will our Performance Improvement Plan do?

Our Performance Improvement Plan 2026/27 sets out what we will do in the year ahead to deliver on our statutory responsibility referenced above. These 'duties' relate to sections 84(1), 85(2) and 89(5) of the Act, whereby we must make arrangements to:

- secure continuous improvement
- secure achievement of its improvement objectives
- exercise its functions so that any central government departmental specified standards are met

Specifically, it provides a rationale for why we have chosen our improvement objectives and details the expected outcomes.

Each objective has been framed to bring about improvement in at least one of the specified aspects of improvement as defined in Section 86 of the Act:

- strategic effectiveness
- service quality
- service availability
- fairness
- sustainability
- efficiency and innovation

Our Performance Improvement Plan 2026/27 sits within a hierarchy of plans which guide our strategic planning process and drive our service delivery arrangements (figure 1 overleaf).

Figure 1: Our strategic planning process



## 2. Achieving continuous improvement

Central to Lisburn & Castlereagh City Council’s (hereafter referred to as LCCC) Performance Improvement Framework is the achievement of our purpose:

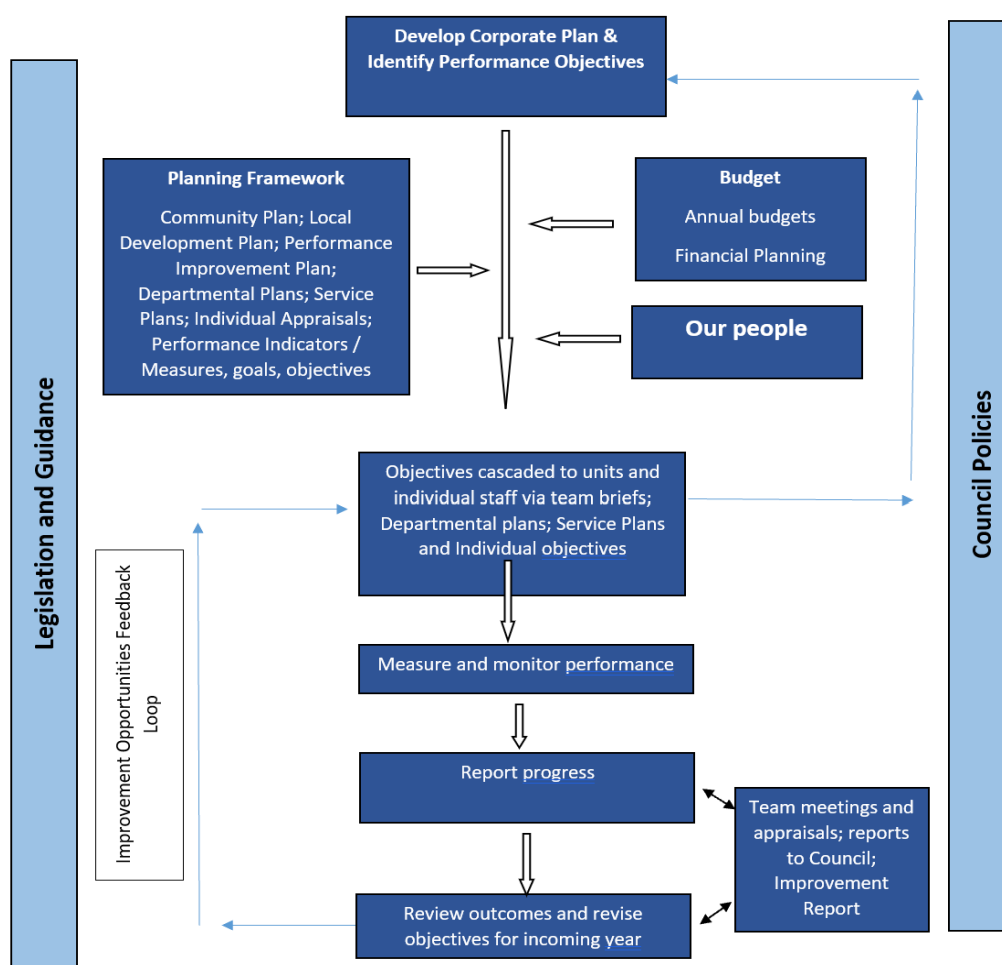
**‘Delivering and supporting better lives for all’**

We have put in place a performance improvement process which, through this plan, will drive and provide assurance that we are delivering on our vision, shared outcomes and improvement objectives.

Figure 2 illustrates our performance improvement frame. It is a variety of processes which ensure we:

- effectively manage performance
- have taken all possible steps to secure continuous improvement in the exercise of our functions

Figure 2: Our performance improvement process



### 3. Our governance

The council is made up of 40 elected members, currently representing 151,669 residents in 62,411 homes. Seven District Electoral Areas represent it:



#### Performance reporting

The Corporate Management Team (CMT) oversees the development and delivery of the Performance Improvement Plan. They:

- agree the draft Performance Improvement Plan for approval by committee/council
- monitor quarterly progress against each objective
- reprioritise resources as necessary to deliver against these objectives

## Performance Improvement Plan

- progress is monitored and reported on through quarterly progress reports and submitted to CMT and the Governance & Audit Committee for scrutiny and challenge
- this ensures that an evaluation of risk and an assessment of performance is carried out, prior to a subsequent council meeting for approval
- performance will be reviewed using a range of quantitative and qualitative measures

## Self-assessment Improvement Report

- by 30 September 2027 we will produce and publish an Annual Report which will set out a self-assessment of our performance improvement objectives detailed within this plan
- this will report on progress towards our Performance Improvement Plan commitments, the achievement of our Improvement Objectives and performance against a range of statutory and self-imposed performance indicators
- this report will be reviewed by the Governance & Audit Committee and approved by council

## NI Audit Office

- the Northern Ireland Audit Office (NIAO) will carry out an improvement assessment to assess if we are likely to comply with our performance improvement responsibilities under Part 12 of the Local Government Act (NI) 2014
- the Act requires the Local Government Auditor to summarise their assessment in an annual improvement report. This is published on the NIAO website in March each year, making it publicly available

## 4. General duty to improve

The Local Government Act (Northern Ireland) 2014 put in place a framework to support continuous improvement in the delivery of council services. Through plans and strategies alongside our annual Performance Improvement Plan we are committed to continuously improving our services.

In this Performance Improvement Plan for 2026–27, we set out how we will deliver improvement in at least one of these seven improvement areas as stipulated in S.84(2) of the Local Government Act (Northern Ireland) 2014:

- strategic effectiveness
- service quality
- service availability
- fairness
- sustainability
- efficiency
- innovation

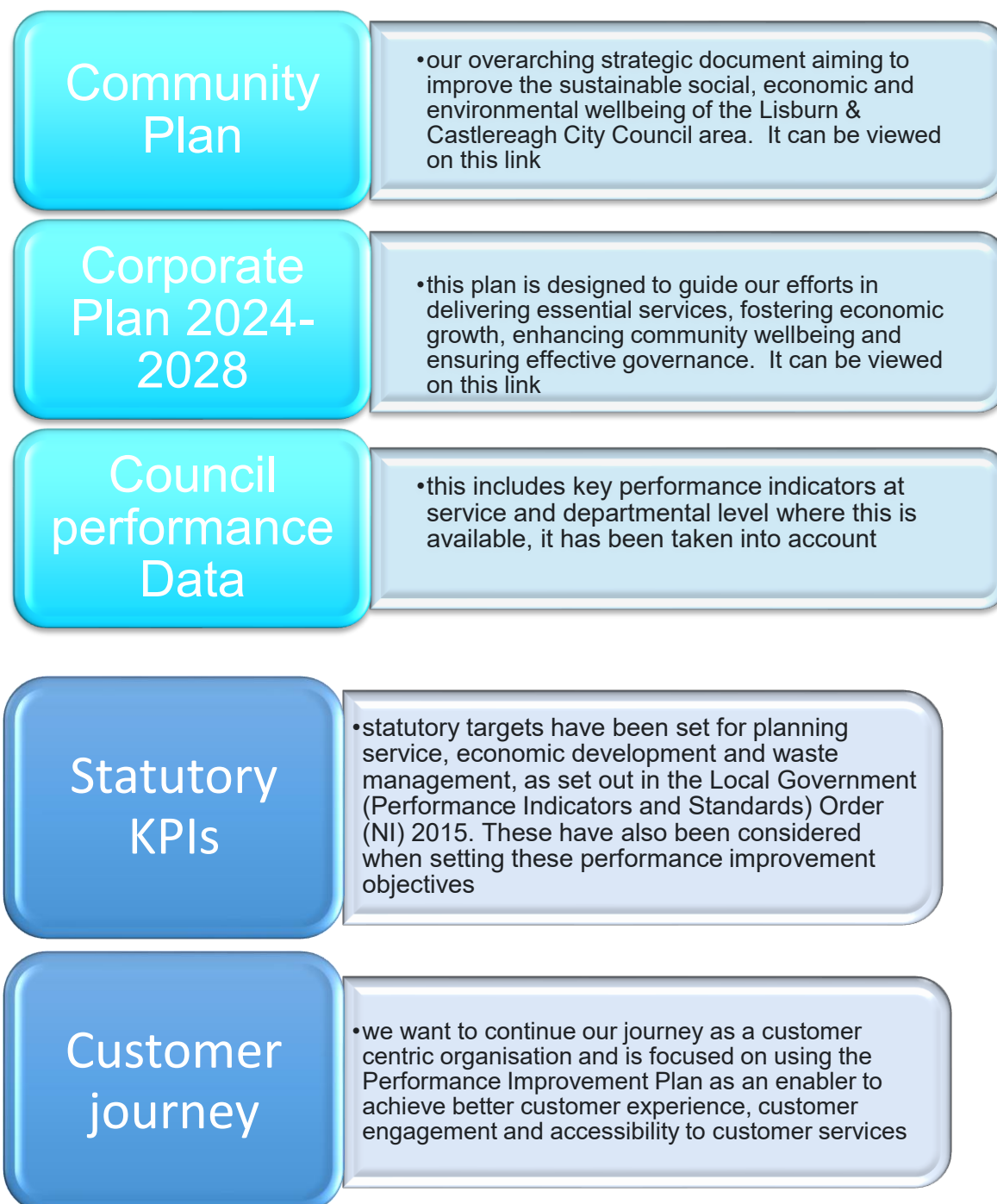
By “Improvement” we mean more than just quantifiable gains in service output or efficiency, or the internal effectiveness of the council. Improvement for us focusses on the issues that are important to our citizens and customers. Improvement for LCCC means doing things that help us to achieve our purpose of delivering and supporting better lives for all.

We have selected a suite of self-imposed indicators, these are linked directly to our Corporate Plan 2024-28, and they can be accessed at [the following link: appendix-i-corporate-plan-kpis-pdf](#). These are reported to the Governance & Audit Committee on a quarterly basis. In addition to this, each service has a number of key performance indicators that they monitor at directorate level.

We continue to engage with the Department for Communities (DfC) along with the other Northern Ireland councils to develop a benchmarking framework for the local government sector.

## 5. Process for identifying performance improvement objectives for 2026/27

We identify performance improvement objectives through several sources:



## 6. Agreed performance improvement objectives for 2026/27

There are two Performance Improvement Objectives for 2026/27.

We will:

- We will deliver better services that meet people's needs.
- We want to support our people to thrive in vibrant communities

### Why have we chosen these objectives?

These are the same 2 Performance Improvement Objectives as last year. Previous success with our performance improvement projects for 2025/26 has established the foundation to achieving the longer-term outcomes. These are aligned to the ambitions of the Lisburn and Castlereagh Community Plan.

We launched our new Corporate Plan in April 2024 for the period 2024-2028. This Plan continues its ambition to ensure the supporting and developing of better lives for all. It details success outcomes and has four key themes of:

- **civic leadership**
- **people**
- **planet**
- **prosperity**

The performance objectives for the coming period are linked directly to the themes detailed above. The first objective is within the Civic Leadership theme of the Corporate Plan 2024-28, focussing on our internal performance is a priority for the Council. We understand that public services must continuously evolve to stay relevant, responsive, and effective. By focusing on service improvement, we are committing to listening to people, understanding their needs, and designing services that are easy to access, timely, and of high quality.

The second objective is outlined within the People and Prosperity themes of the Corporate Plan 2024-28. Thriving people are at the heart of strong communities. We want everyone to feel supported, connected, and empowered to lead fulfilling lives. This means working collaboratively across sectors and with local people to build inclusive, safe, and resilient places to live and work. By strengthening communities, we strengthen wellbeing, opportunity, and local pride.

We have chosen these two objectives because they reflect what matters most to the people we serve and the vision we have for our communities. These are key areas

for the achievement of our vision of achieving better lives for the people who work, live in, or visit the Lisburn and Castlereagh area.

## What will the Performance Improvement Plan do?

It will:

1. Challenge ourselves on how we can achieve even better outcomes by identifying new improvement projects.
2. Build upon the success of 2025/26 by continuing with the delivery of several existing improvement projects.

In the next section you can review a brief narrative for each performance improvement objective. It includes information about what we are building upon from 2025/26 together with details of new planned projects.

### **Performance Improvement Objective 1: *We will deliver better services that continue to meet people's needs.***

**Two new** improvement projects will be delivered in 2026/27. They are:

1. We will deliver enhanced digitised services.
2. We will deliver new improved facilities at Aghalee Sports Pavillion and SEYCON as standard design concepts.

We will continue with **one** of the improvement projects from 25/26. It is:

- We will continue to improve the processing times of planning applications.

### **Risks associated with objective 1:**

- Processing times of planning applications not improving
- Technology delivery risk: delays or integration issues with existing systems; supplier/contractor dependency.
- Financial sustainability risk: costs higher than planned (licensing, support, development), or benefits not realised.
- Capital project delivery risk: design development taking longer than expected; planning/approval delays.
- Cost inflation & budget risk: construction inflation, unforeseen site conditions, scope creep.
- Procurement/contractor performance risk: delays, quality issues, or contractor capacity problems.

**Objective 1:** We will deliver better services that continue to meet people’s needs.

Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme	Prog for Government	Continuing or New?	Measure of Success
<b>We will continue to improve the processing times of planning applications</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	<b>Civic Leadership</b> <i>Deliver high-quality, cost-effective services that meet people’s needs, making use of new approaches to data-driven decision-making, continual improvement, innovation and performance management</i>	Our Community  Where we live  The Economy	Prosperity	Continuing - the Planning Service Improvement Programme is a 2+ year programme.	Implementation of the validation checklist by end of Q2  Proportion of invalid applications returned within 5 working days Q3-75%, Q4-90%  Reduce the % of older applications that are more 18 months old (*based on 191 older applications as at 31st March 2026 TBC) Q1 – 20%, Q2 – 40%, Q3 -70%, Q4 - 90%  Local planning applications processed within an average of 22.5 weeks. Q1 – 30, Q2 – 27.5, Q3 – 22.5, Q4 – 20
<b>We will deliver enhanced digitised services</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	<b>Civic Leadership</b> <i>Further the use of digital technology to improve efficiency and increase access customer access to services</i>	Our Community	Prosperity	New	<b>Innovation</b> Enhancement of customer digital platforms to improve customer experience. Eg digital depot. <ul style="list-style-type: none"> <li>• Q1 Project Implementation Officer in post</li> <li>• Q1 Delivery of digital equipment.</li> <li>• Q2 Implementation of digital depot.</li> <li>• Q3 Implementation &amp; Training of staff.</li> <li>• Q4 Digital Depot ‘Go Live’.</li> </ul>

Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme	Prog for Government	Continuing or New?	Measure of Success
						<p><b><u>Tourism</u></b>                      Enhance the existing Digital Sculpture Trail App (currently focused on Hillsborough Forest) to cover the wider Royal Hillsborough village, including curated routes, added attractions and visitor information linked to key assets such as Hillsborough Castle. Introduce an incentives/voucher feature with local businesses (attractions, accommodation, eateries) to encourage visitors to spend more time in the village and increase local spend.</p> <p><b>Quarterly KPIs (TBC):</b>                      Increase in number of downloads</p> <ul style="list-style-type: none"> <li>• Q1: app enhancement procurement stage</li> <li>• Q2: 10% increase</li> <li>• Q3: 15% increase</li> <li>• Q4: 20% increase</li> </ul> <p>Percentage users from Out of State markets</p> <ul style="list-style-type: none"> <li>• Q1: app enhancement procurement stage</li> <li>• Q2: 5%</li> <li>• Q3: 10%</li> <li>• Q4: 15%</li> </ul>

Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme	Prog for Government	Continuing or New?	Measure of Success
						Voucher uptake and redemptions <ul style="list-style-type: none"> <li>• Q1: app enhancement procurement stage</li> <li>• Q2: 0</li> <li>• Q3: 5</li> <li>• Q4: 10</li> </ul>
<b>We will deliver new improved facilities at Aghalee Sports Pavillion and SEYCON as standard design concepts</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	<b>Prosperity</b> <i>Continue our capital investment in facilities</i>	Our Community  Where we live	Prosperity	New	<b>Assets</b> We will deliver new changing room facilities and accessible public toilets in Aghalee. <ul style="list-style-type: none"> <li>• Q1 Project will be tendered.</li> <li>• Q2 Tenders returned, evaluated, awarded and commencement on site.</li> <li>• Q3 On site.</li> <li>• Q4 Practical completion.</li> </ul> We will deliver new changing room facilities at SEYCON <ul style="list-style-type: none"> <li>• Q1 Preparation of detailed design.</li> <li>• Q2 Finalising detailed design and tender documents.</li> <li>• Q3 Project tendered, returned, evaluated, and awarded.</li> <li>• Q4 Commencement on site.</li> </ul>

## **Performance Improvement Objective 2: *We will support our people to thrive in vibrant communities***

For this objective we have identified **four new** improvement projects for 2026/27. They are:

1. We will launch a volunteering scheme engaging people of all backgrounds and increasing the level of residents who play an active role in civic society.
2. Our communities have engaged with expanded Council-supported safety initiatives which protect the most vulnerable in our society.
3. We will provide additional opportunities and widen the Health & Wellbeing programme through the PARS initiative.
4. We will engage with community groups to improve community resilience across the Council area.

The Council has chosen these improvement projects because they support our commitment to helping people thrive in vibrant, inclusive and resilient communities. Together, they seek to increase civic participation, strengthen community safety, improve health and wellbeing, and build the capacity of local groups to support residents. These projects respond to identified community needs, align with the Council's Corporate Plan and Community Plan priorities, and recognise the important role of volunteering, prevention, partnership working and community-led action in delivering better outcomes for people across the Council area.

### **Risks associated with objective 2:**

- Low uptake or sustained participation from volunteers.
- Low community engagement or awareness of safety initiatives.
- Difficulty reaching the most vulnerable groups due to trust, access or communication barriers.
- Low participation levels or uneven uptake across communities.
- Capacity pressures on facilities, staff or delivery partners.
- Difficulty demonstrating measurable wellbeing outcomes.
- Variable capacity and readiness of community groups to engage.
- Over-reliance on a small number of active groups or volunteers.
- Challenges in coordinating multiple groups, partners and initiatives effectively.

**Objective 2:** We will support our people to thrive in vibrant communities

Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme	Prog for Government	Continuing or New?	Measure of Success
<b>We will launch a volunteering scheme engaging people of all backgrounds and increasing the level of residents who play an active role in civic society.</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	<b>People</b> <i>Promote volunteering and participation in public and community life, developing community ownership and management of local assets and facilities</i>	Health & Wellbeing  Our Community	People  Prosperity	New	<p><b>Communities</b> <b>Volunteering Programme for Community &amp; Voluntary Sector</b></p> <ul style="list-style-type: none"> <li>• Q1 Development of programme with 'Volunteer Now' &amp; Community Planning partners</li> <li>• Q2 Supporting the recruitment of volunteers in the Community &amp; Voluntary sector</li> <li>• Q3 Training of volunteers through a capacity building programme</li> <li>• Q4 Host a volunteering &amp; community benefit roadshow celebrating volunteering &amp; showcasing opportunities within our communities</li> </ul> <p><b>HR&amp;OD</b> <b>Volunteering Scheme for Staff</b></p> <ul style="list-style-type: none"> <li>• Q3 Implement staff volunteering scheme (by end of Q3)</li> <li>• Q4 Baseline participation in volunteering scheme (by end of Q4)</li> </ul>
<b>Our communities have engaged with expanded Council-supported safety initiatives which protect the most</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	<b>People</b> <i>Work with partners to build the capacity of community groups and sports clubs to attract more people of all</i>	Health & Wellbeing  Our Community	People	New	<p><b>Communities</b> EVAWG (ending violence against women and girls) initiatives.</p> <ul style="list-style-type: none"> <li>• Q1 Design &amp; develop programme</li> <li>• Q2 Launch programme</li> <li>• Q3 Implementation of programme</li> <li>• Q4 Review &amp; monitoring</li> </ul>

Performance Improvement Project	Improvement area stipulated in S.84(2) LG Act (NI) 2014	Corporate Plan 2024-2028 Strategic Theme	Community Planning Theme	Prog for Government	Continuing or New?	Measure of Success
vulnerable in our society		<i>ages to participate in community life</i>				<b>Sport Services</b> Defib provision and training provided to community hubs. <ul style="list-style-type: none"> <li>• Q1 Develop programme</li> <li>• Q2 Launch, advertise &amp; assess need</li> <li>• Q3 Implementation of programme</li> <li>• Q4 Training provided &amp; roll out of defibs</li> </ul>
<b>We will provide additional opportunities and widen the Health &amp; Wellbeing programme through the PARS initiative.</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation	<b>People</b> <i>Work collaboratively to ensure the sustaining of good physical and mental health, being proactive in our roles to protect the vulnerable in our community</i>	Health & Wellbeing  Our Community	People	New	<b>Sport Services</b> <b>PARS Programme</b> <ul style="list-style-type: none"> <li>• Q1 Identify additional opportunities</li> <li>• Q2 Promotion and awareness of PARS</li> <li>• Q3 Practical implementation</li> <li>• Q4 Evaluation (testimonies)</li> </ul>
<b>We will engage with community groups to improve community resilience across the Council area</b>	Strategic Effectiveness Service Quality Service Availability Fairness Efficiency Innovation Sustainability	<b>Civic Leadership</b> <i>Be resilient in emergency situations, providing leadership for our community</i>  <b>Planet</b> <i>Sustainability</i>	Our Community  Where we live	People	New	<b>Environmental Health</b> <b>Emergency planning - building resilient communities. (Dundonald / Anahilt)</b> Building capacity within these communities to respond to emergencies. <ul style="list-style-type: none"> <li>• Installation of community support facility to enable communities to be first responders.</li> </ul> Work in partnership with our statutory partners eg DfI rivers to increase resilience of local community.

## 7. Statutory indicators

A set of seven performance indicators are in place for Local Government through the Local Government (Performance Indicators and Standards) Order (NI) 2015.

Our arrangements to meet these statutory indicators are through the delivery of our statutory services in planning, economic development and waste and through our annual performance improvement projects.

Resources are allocated to each of these services and approved through the annual budgeting process. Performance measures and indicators are in place for each of the services (see tables above). Monitoring, reporting and scrutiny arrangements are in place with CMT and committees for the management and delivery of these statutory services and statutory indicators.

Progress against the indicators is submitted to the relevant regional body and reports are issued showing comparisons across all 11 councils. Where the statutory target is not met the need to improve in accordance with the general duty set out in the Act is considered.

In respect of planning, we must have regard to external factors such as the need to consult widely which prolongs the application process and means the statutory target cannot always be met.

The quality of our decision making is also of great importance to our members and citizens. Poor decisions can give rise to budgetary implications arising from cost awards from planning appeals and judicial review. It is for these reasons we maintain a focus on continuous improvement which seeks to balance the need for good and timely decision making.

LCCC will report on these in the performance annual report in September 2027, which will set out a self-assessment of our performance during the 2026/27 financial year.

We also publish our performance results against these indicators on our website: [click here to access the Performance page of the website](#)

## 8.1 Waste and recycling

Performance against waste management targets and standard to be achieved for 2026-27 are:

Measure of success	2023/24	2024/25	2025/26	Annual Target 2026/27
The percentage of household waste collected by LCCC that is sent for recycling	50.88%	50.42%	TBC November 2026	50%
The total amount (tonnage) of biodegradable waste that is landfilled by LCCC	14,098 tonnes	12,544 tonnes	TBC November 2026	16,444 tonnes
The total amount (tonnage) of waste collected by LCCC	77,617 tonnes	78,738 tonnes	TBC November 2026	N/A

In 2025/26 the challenges for LCCC included the plateauing of recycling performance through its existing kerbside, household recycling centre and bring collection infrastructure.

The immediate focus for 2026/27 will be to improve recycling rates. Targets within the Waste (Circular Economy) (Amendment) Regulations (Northern Ireland) for municipal waste recycling are as follows:

- 55% recycling by 2025
- 60% recycling by 2030
- 65% recycling by 2035
- the amount of municipal waste landfilled to be reduced to 10% or less of the total amount of municipal waste generated by 2035

Targets within the Climate Change Act (Northern Ireland) 2022 (as yet undefined) are as follows:

- 70% recycling by 2030

Work to deliver a harmonised kerbside collection service across the council will continue in 2026/27 to improve recycling rates, reduce residual waste and move towards the municipal waste recycling targets.

## 8.2 Economic development

Measure of success	2023-24		2024-25		2025-26		2026-27
	Target	Actual	Target	Actual	Target	Actual	
<b>The number of jobs promoted through business start-up activity via the Go for It programme</b>	<b>111</b>	73	<b>116</b>	119	<b>116</b>	136	<b>85 (DfE)</b> <b>116 (Go Succeed)</b>

This business start-up activity is the delivery of the statutory jobs promotion target as set by Department for the Economy (DfE) via the Business Support Programme “Go Succeed”.

The LCCC statutory target was historically for 85 jobs annually. However, DfE introduced a new annual target of 116 jobs in June 2023.

The 2025/26 figure is an internal estimate by LCCC and is due to be finalised by the lead Council for the Programme, Belfast City Council. This is expected to be finalised during the summer 2026.

### 8.3 Planning

Performance against planning targets and standard to be achieved for 2026-27 are:

Measure of success	2023-24	2024-25	2025-26	Annual Target 2026/27
<p>The average processing time of major planning applications</p> <p><i>[An application in the category of major development within the meaning of the Planning (Development Management) Regulations (Northern Ireland) 2015(a)]</i></p>	56.4 weeks	59.2 weeks	62.4 weeks	Major applications processed from date valid to decision or withdrawal within an average of 30 weeks
<p>The average processing time of local planning applications</p> <p><i>[Local applications mean an application in the category of local development within the meaning of the Planning (Development Management) Regulations (Northern Ireland) 2015, and any other applications for approval or consent under the Planning Act (Northern Ireland) 2011 (or any orders or regulations made under that Act)]</i></p>	42.4 weeks	38.8 weeks	29.4 weeks	Local applications processed from date valid to decision or withdrawal within an average of 15 weeks
<p>The percentage of enforcement cases processed within 39 weeks</p> <p><i>[Enforcement cases are investigations into alleged breaches of planning control under Part 5 of the Planning Act (Northern Ireland) 2011 (or under any orders or regulations made under that Act). (b).]</i></p>	83.3%	69.6%	67.6%	70% of all enforcement cases progressed to target conclusion within 39 weeks of receipt of complaint

At this time the information available is unvalidated statistical information and the Annual Statistical Bulletin 2025/26 will not be available until the end of June 2026. Performance within LCCC for major applications for the 2024/25 period was 59.2 weeks and this is not significantly changed with average processing times for this year expected to be 62.4 weeks.

Performance within LCCC for local applications for the 2024/25 period was 38.8 weeks and this has improved by 9.4 weeks with average processing times for this year expected to be 29.4 weeks. This is a significant improvement in the overall processing times. The Council had an internal KPI to reduce the number of older applications pre-dating 31 December 2023 by 90%. Significant progress is made towards reducing the number of older applications which should allow further reduction in overall processing times for local applications in the incoming financial year 2026/27.

The ability to perform against the target for local applications remains a focus for overall performance improvement within the Council. The wider service improvement plan will assist in the incoming financial year to the Council maintaining and improving further the performance in relation to the operation of the Planning function.

Our Planning Unit is responsible for:

- decision making in relation to local and major applications
- making tree preservation orders
- producing a Local Development Plan outlining how land should be used and developed in the future
- planning enforcement

Quarterly statistical reports are compiled by DfI and provided to each of the councils. The reports are available to view on the DfI website by clicking here: [Planning activity statistics | Department for Infrastructure \(infrastructure-ni.gov.uk\)](#) .

## 8. Consultation

An online consultation exercise on the draft improvement objectives and projects was carried out during April and May 2026. Three focus groups were held in various locations within the council area, at different times to enable as wide a reach and opportunity for feedback as possible. A sign language interpreter was present at two of these focus groups sessions as they were promoted as being accessible for the deaf community.

Any comments and suggested amendments from consultees will be incorporated where appropriate in the final published document by 30<sup>th</sup> June 2026. A consultation outcome report will also be published at this time.

As detailed in 'LCCC's Performance Improvement Process' shown in figure 2, page 7 stakeholders can propose new improvement objectives through the feedback loop, during the year and using the contact details below.

### Contacts for feedback and review

If you would like to get in touch, please do so by one of the following methods:

**Telephone:** Performance Improvement Officer on 028 9244 7415 or 07790 778331

**Email:** [performance@lisburncastlereagh.gov.uk](mailto:performance@lisburncastlereagh.gov.uk)

**Write to Us:** Performance Improvement Officer, Organisation Development & Innovation Directorate, Lisburn & Castlereagh City Council, Civic Headquarters, Lagan Valley Island, Lisburn, BT27 4RL.

Lisburn & Castlereagh City Council, on request, will take all reasonable steps to provide this document in alternative formats and in minority languages to meet the needs of those who are not fluent in English.

## Lisburn & Castlereagh City Council

### Section 75 Equality and Good Relations Screening template

#### Part 1. Information about the activity/policy/project being screened

##### Name of the activity/policy/project

Performance Improvement Plan 2026/27

There are 2 Performance Improvement Objectives for 2026/27:

- We will deliver better services that continue to meet people's needs and
- We will support our people to thrive in vibrant communities.

##### Is this activity/policy/project – an existing one, a revised one, a new one?

A new plan that contains continuing objectives from the 25/26 financial year.

The Council has a statutory duty under Part 12 of the Local Government Act (Northern Ireland) 2014 to set improvement objectives and have arrangements in place to secure their achievement. A number of performance targets are also set by Central Government departments in respect of job creation, planning and waste management.

The Council's Performance Improvement Plan 2026-27 sets out what we will do in the year ahead to deliver on our statutory duty, as listed in Part 12 of the Local Government Act 2014. These 'duties' relate to sections 84(1), 85(2) and 89(5) of the Act, whereby the Council has a statutory responsibility to make arrangements to:

- secure continuous improvement;
- secure achievement of its improvement objectives;
- exercise its functions so that any Central Government Departmental specified standards are met.

**What are the intended aims/outcomes the activity/policy/project is trying to achieve?**

The annual Performance Improvement Plan (PIP) provides a rationale for why we have chosen our improvement objectives and details the expected outcomes.

**Who is the activity/policy/project targeted at and who will benefit? Are there any expected benefits for specific Section 75 categories/groups from this activity/policy/project? If so, please explain.**

The PIP is aimed at everyone who uses LCCC services and is not targeted at any particular equality group.

**Who initiated or developed the activity/policy/project?**

The PIP was drafted by the Council's Performance Improvement Officer and has been out for public consultation during April and May 2025, it was approved by the Corporate Management Team, and it will be presented to the Governance & Audit Committee for approval in June 2026 and eventually adopted by full Council by the end of June 2026.

**Who owns and who implements the activity/policy/project?**

The PIP is a corporate document which is written and published annually. It provides a rationale for why we have chosen our annual improvement objectives and details the expected outcomes of these. Progress is monitored, co-ordinated and reported on by the Performance Improvement Officer to CMT and the Governance & Audit Committee.

**Are there any factors which could contribute to/detract from the intended aim/outcome of the activity/policy/project?**

Yes

**If yes, give brief details of any significant factors.**

Legislative

Other - While commitments are included in the PIP, it can be a challenge to ensure that they are actually implemented as intended. The successful implementation of the PIP is dependent on awareness of the PIP and service delivery across all Council functions.

**Who are the internal and external stakeholders (actual or potential) that the activity/policy/project will impact upon? Delete if not applicable**

**Staff**

**Service users**

**Other public sector organisations** eg NIAO and DfC

**Voluntary/community/trade unions**

**Other Elected Members**

**Other policies/strategies/plans with a bearing on this activity/policy/project**

Name of document/activity/policy	Who owns or implements document/activity/policy?
1.The Council’s Corporate Plan & Ambitions 2024 - 2028 <a href="http://lccc-corporate-plan-2024-2028-web (lisburncastlereagh.gov.uk)"><u>lccc-corporate-plan-2024-2028-web (lisburncastlereagh.gov.uk)</u></a>	Chief Executive’s Office/all services
2. Community Plan 2017-2032 <a href="http://community_plan_2017-2032_email-pdf (lisburncastlereagh.gov.uk)"><u>community_plan_2017-2032_email-pdf (lisburncastlereagh.gov.uk)</u></a>	Leisure & Community Wellbeing
3. HR policies and activity	HR & OD
4. Equality Scheme and associated equality policies and plans	Equality Officer
5. Part 12 of the Local Government Act (Northern Ireland) 2014 <a href="https://www.legislation.gov.uk/nia/2014/8/part/12/enacted"><u>https://www.legislation.gov.uk/nia/2014/8/part/12/enacted</u></a>	Department for Communities (DfC)

**Available evidence**

**What evidence/information (qualitative and quantitative) have you gathered or considered to inform this activity/policy? Specify details for each Section 75 category.**

A range of sources have been considered, including the previous Performance Improvement Plans; analysis of previous PIPs, evaluations of consultations, other Council PIPs, etc.

Sec 75 Category	Details of evidence/information
Religious Belief	<p>NI Census 2021 data for the Lisburn and Castlereagh area:</p> <p>58% Protestant (or other Christian)  27% Catholic  2% Other  13% None</p>
Political Opinion	<p>National identity is often used as an indicator of political opinion – unionist/nationalist. Analysis of Census 2021 data for LCCC showed:</p> <p>41% identified as British  16% Irish  21% Northern Irish</p> <p>Political party representation on LCCC from local government elections 2023 (40 Members):</p> <p>DUP – 14  UUP – 6  Alliance – 13  Sinn Fein – 4  SDLP – 2  Independent – 1</p>
Racial Group	<p>Census 2021 statistics suggest 87% of the LCCC population were born in N Ireland and the district has a range of nationalities, including a small number of Syrian refugees. 3.6% of residents speak languages other than English as their first language.</p>
Age	<p>Census 2021 population estimates for LCCC area were:</p> <p>0-14 years – 19%  15-39 years – 30%  40-64 years – 33%  65+ years – 18%</p>
Marital Status	<p>The 2021 census records for people over the age of 16 for the LCCC area:</p> <p>Single (never married or never registered a same-sex civil partnership) – 33%  Married – 52%  Separated – 3%  Divorced or formerly in a civil partnership which is now legally dissolved – 6%</p>

	Widowed or surviving partner from a civil partnership – 6%
Sexual Orientation	Census 2021 data – sexual orientation. Straight or heterosexual 91% Gay, lesbian, bisexual or other sexual orientation 2% Prefer not to say or not stated 7%
Men & Women Generally	The 2021 census population of LCCC local government district was 149,106, of which 49% were male and 51% were female.  There is no official statistic on the number of people in N Ireland who identify as Transgender or non-binary but referrals to advice services are increasing year on year which suggests a small but growing minority.  Women are significantly under-represented as Elected Members on LCCC with only 17.5% female councillors (NI average - 26.4%). At present (April 2021), women are over-represented in the senior management team (3 of 5 (60%) are female).
Disability	The 2021 Northern Ireland Census collected data on ‘persons with a limiting long-term illness’ which covered any long-term illness, health problem or disability which limits daily activities or work. Statistics for LCCC showed: <b>21%</b> of people had a long-term health problem or disability that limited their day-to-day activities; <b>81%</b> of people stated their general health was either good or very good;
Dependants	2021 Census data:  <b>14%</b> of people stated that they provided unpaid care to family, friends, neighbours or others.  People with dependants includes parents of young children, parents of older dependant or disabled people, carers of elderly family members and others.

**Needs, experiences and priorities: Taking into account the information referred to above, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular activity/policy/decision? Specify details for each of the Section 75 categories**

Sec 75 Category	Details of needs/experiences/priorities
Religious Belief	No different experience/needs identified
Political Opinion	No different experience/needs identified
Racial Group	<p>People from minority ethnic backgrounds may experience barriers in accessing or understanding information about the Council’s Performance Objectives and the Performance Improvement Plan, particularly where English is not their first language. There may also be lower awareness of how performance objectives relate to their communities. These needs can be addressed through targeted communication, translation of documents, translators provided at consultation events as appropriate and engagement with relevant community and support groups.</p>
Age	<p>Some older or younger people may experience barriers in accessing or understanding information about the Performance Improvement Plan due to digital exclusion, literacy levels, or differing communication preferences. Consideration of accessible formats, a mix of engagement methods and</p>

	accessibility of consultation events will help mitigate these issues.
Marital Status	No different experience/needs identified
Sexual Orientation	No different experience/needs identified
Men & Women Generally	No different experience/needs identified
Disability	Some disabled people may need to have information about the objectives or the Performance Improvement Plan (PIP) provided in accessible formats as a reasonable adjustment. For e.g. the Draft PI Objectives and PIP were provided in Easy Read format this year. Consultation events were promoted as being accessible for disabled people, including held in accessible buildings and having a BSL interpreter for the deaf community.
Dependants	No different experience/needs identified

**Part 2. Screening questions**

**1 What is the likely impact on equality of opportunity for those affected by this activity/policy, for each of the Section 75 equality categories?**

Sec 75 Category	Details of activity/policy impact	Level of impact (minor/major/none*)
Religious Belief	No differential impact identified, individual projects will undergo	None
Political Opinion		
Racial Group		

Age	equality screening to identify specific impacts.  The detail of the PIP will potentially benefit everyone, regardless of equality category.	
Marital Status		
Sexual Orientation		
Men & Women Generally		
Disability		
Dependants		

\*See Appendix 1 for details.

**2(a) Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?**

Sec 75 Category	IF Yes, provide details	If No, provide details
Religious Belief		No further opportunities identified but can be kept under review.
Political Opinion		
Racial Group		
Age		
Marital Status		
Sexual Orientation		
Men & Women Generally		
Disability	.	
Dependants		

**Equality Action Plan 2021-2025**

Does the activity/policy/project being screened relate to an action in the Equality Action Plan 2021-2025? No

**2(b) DDA Disability Duties (see Disability Action Plan 2021-2025)**

Does this policy/activity present opportunities to contribute to the actions in our Disability Action Plan:

- to promote positive attitudes towards disabled people?
- to encourage the participation of disabled people in public life?

Yes, one of the improvement projects is specifically about enhancement of facilities, specifically accessible public toilets. Disabled people and support groups have been specifically targeted in the public consultation on draft performance improvement objectives. Accessibility of documents and consultation is a priority, and the Equality Screening has been updated following Consultation with disabled people.

**3 To what extent is the activity/policy/project likely to impact on good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	Details of activity/policy impact	Level of impact (minor/major/none*)
Religious Belief		No specific impact identified
Political Opinion		
Racial Group		

\*See Appendix 1 for details.

**4 Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	IF Yes, provide details	If No, provide details
Religious Belief		Not at this time, but can be kept under review
Political Opinion		
Racial Group		

**Multiple identity**

**Provide details of any data on the impact of the activity/policy/project on people with multiple identities. Specify relevant Section 75 categories concerned.**

We are aware that most people have more than one identity and may experience additional disadvantage accordingly. We are proposing measures to accommodate the particular needs of different groups and multiple identity has been taken into account in developing these objectives and plan.

**Part 3. Screening decision/outcome**

Equality and good relations screening is used to identify whether there is a need to carry out a **full equality impact assessment** on a proposed policy or project. There are 3 possible outcomes:

- 1) **Screen out** - no need for a full equality impact assessment and no mitigations required because no relevance to equality, no negative impacts identified or only very minor positive impacts for all groups. This may be the case for a purely technical policy for example.
- 2) **Screen out with mitigation** - no need for a full equality impact assessment but some minor potential impacts or opportunities to better promote equality and/or good relations identified, so mitigations appropriate. Much of our activity will probably fall into this category.
- 3) **Screen in for full equality impact assessment** – potential for significant and/or potentially negative impact identified for one or more groups so proposal requires a more detailed impact assessment. [See Equality Commission guidance on justifying a screening decision.]

**Choose only one of these** and provide reasons for your decision and ensure evidence is noted/referenced for any decision reached.

Screening Decision/Outcome	Reasons/Evidence
Option 1  <b>Screen out</b> – no equality impact assessment and no mitigation required [go to Monitoring section]	
Option 2  <b>Screen out with mitigation</b> – some potential impacts identified but they	The Annual Performance Plan and Performance Improvement Plan are high-level strategic documents that do

<p>can be addressed with appropriate mitigation or some opportunities to better promote equality and/or good relations identified [complete mitigation section below]</p>	<p>not introduce new policies, change eligibility, alter service delivery, or allocate resources in a way that would impact Section 75 groups, and have therefore been screened out of a full Equality Impact Assessment (EQIA).</p> <p>Consultation feedback has been reviewed for equality implications, and no adverse or differential impacts were identified. Individual projects will undergo equality screening to identify any potential impacts.</p>
<p>Option 3</p> <p><b>Screen in</b> for a full Equality Impact Assessment (EQIA)</p> <p>[If option 3, complete timetabling and prioritising section below]</p>	

**Mitigation (Only relevant to Option 2)**

**Can the activity/policy/project plan be amended or an alternative activity/policy introduced to better promote equality of opportunity and/or good relations?** If so, give the **reasons** to support your decision, together with the proposed changes/amendments or alternative activity/policy and ensure the mitigations are included in a revised/updated policy or plan.

Reasonable adjustments for disabled people will be made as required. For example, the objectives and PIP can be provided in accessible formats. Key documents will be provided in Easy Read format.

As people who do not have English as a first language may have difficulty understanding the Performance Improvement Objectives / PIP, translation will be provided if required.

If an older, or younger person has difficulty understanding the PIP, additional efforts will be made to help to ensure they are not disadvantaged.

### Timetabling and prioritising for full EQIA (only relevant to Option 3) - N/A

If the activity/policy has been '**screened in**' for full equality impact assessment, give details of any factors to be considered and the next steps for progressing the EQIA, including a proposed timetable.

Is the activity/policy affected by timetables established by other relevant public authorities? Yes/No. If yes, please provide details.

### Part 4. Monitoring

Public authorities should consider the guidance contained in the Commission's Monitoring Guidance for Use by Public Authorities (July 2007).

Effective monitoring will help a public authority identify any future adverse impact arising from the activity/policy which may lead the public authority to conduct an equality impact assessment, as well as help with future planning and activity/policy development.

**What will be monitored and how? What specific equality monitoring will be done? Who will undertake and sign-off the monitoring of this activity/policy and on what frequency?** Please give details:

All services and departments will carry out regular monitoring of their contribution to the PIP within their areas.

The outcomes of PIP will be monitored and reported upon a quarterly basis through CMT & Governance & Audit Committee by the Performance Improvement Officer, who reports to the Head of HR & Organisational Development.

### Part 5 - Approval and authorisation

	Position/Job Title	Date
<b>Screened by:</b> Kerrie-Anne McKibbin	Performance Improvement Officer	07/05/26
<b>Reviewed by:</b> Annie Wilson	Equality Officer	14/05/26
<b>Approved by:</b> Greg Bowkett	Head of Human Resources & Organisation Development	14/05/26

Note: On completion of the screening exercise, a copy of the completed Screening Report should be:

- approved and 'signed off' by a senior manager responsible for the activity/policy
- included with Committee reports, as appropriate
- sent to the Equality Officer for the quarterly screening report to consultees, internal reporting and publishing on the LCCC website
- shared with relevant colleagues
- made available to the public on request.

Evidence and documents referenced in the screening report should also be available if requested.

### **Appendix 1 – Equality Commission guidance on equality impact**

\*Major impact:

- a) The policy/project is significant in terms of its strategic importance;
- b) Potential equality matters are unknown, because, for example, there is insufficient data upon which to make an assessment or because they are complex, and it would be appropriate to conduct an equality impact assessment in order to better assess them;
- c) Potential equality and/or good relations impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
- d) Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy about which there are concerns amongst affected individuals and representative groups, for example in respect of multiple identities;
- e) The policy is likely to be challenged by way of judicial review;
- f) The policy is significant in terms of expenditure.

Minor impact

- a) The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
- b) The policy, or certain proposals within it, are potentially unlawfully discriminatory, but this possibility can readily and easily be eliminated by

making appropriate changes to the policy or by adopting appropriate mitigating measures;

- c) Any asymmetrical equality impacts caused by the policy are intentional because they are specifically designed to promote equality of opportunity for particular groups of disadvantaged people;
- d) By amending the policy there are better opportunities to better promote equality of opportunity and/or good relations.

No impact (none)

- a) The policy has no relevance to equality of opportunity or good relations;
- b) The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity or good relations for people within the equality and good relations categories.

Revised Template @ April 2022

## Department : All

(Type = 'Corporate Plan')

Tuesday 19th of May 2026

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Finance					
<b>16 : Finance Stat KPI - Prompt Payment Indicators</b>					
Percentage supplier invoices paid within 30 Days	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	100%	100%	100%	100%
Percentage supplier invoices paid within 10 days	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	90%	90%	90%	90%
Economic Development					
<b>38 : New Jobs Number per annum</b>					
Number of new jobs linked to economic development programmes (cumulative)	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	15	40	70	160
Sports Services					
<b>151 : Vitality membership Annual target of Vitality members per year</b>					
Maintain the annual target of 19,500 members of our leisure facilities	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	19,500	19,500	19,500	19,500
Assets					
<b>212 : Assets Rental from the Council's leased assets</b>					
Number of Lettable areas within the Council's available leased assets	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	48	48	48	48
Economic Development					
<b>226 : Labour Market Partnership programme Participants</b>					
Number of participants in the Labour Market Partnership programme (cumulative)	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	0	20	60	100
Planning & Capital Development					
<b>228 : Capital Programme Expenditure measured against Budget</b>					
Cumulative % Expenditure against budget	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	20%	40%	70%	95%
Economic Development					
<b>244 : City Centre Regeneration Growth fund</b>					

Number of key tasks completed (cumulative) to deliver the Growth Fund; Business case completed & agreed at R&G Committee, architecture developed for the delivery of the scheme and agreed detailed guidance and timeline	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	0	3	6	9
Regeneration & Growth					
<b>245 : Progress the Dundonald International Ice Bowl redevelopment. DIIB project proceeding to Construction Phase and building complete</b>					
Building completion	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	70%	80%	90%	100%
Environmental Health, Risk & Emergency Planning					
<b>246 : Enhance burial provision Increase number of plots</b>					
Number of new grave plots in operation	Target	Apr 27			
	Actual	150			
Submission of a Planning Application for a Garden of Remembrance at Blaris Cemetery	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	No	No	No	Yes
Economic Development					
<b>254 : Inclusivity Delivery of specialist employability support and advice for those with a disability.</b>					
Number of people supported (cumulative)	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	0	5	15	25
Recruitment onto specialist programme of support	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	No	Yes	Yes	Yes
Delivery of accredited training	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	No	No	Yes	Yes
Receive bespoke mentoring tailored to each individual action plan	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	No	No	No	Yes
Supporting participants on their journey Employment / Further Education	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	No	No	No	Yes
HR&OD					
<b>258 : Staff Absenteeism</b>					
Average Rolling year absence	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	14.5	14.5	14	14
Leisure & Community Wellbeing					
<b>262 : Health &amp; Wellbeing Programmes &amp; events</b>					
Number of Health & Wellbeing Programmes (cumulative)	Target	Jul 26	Oct 26	Jan 27	Apr 27
	Actual	20	40	60	80

Number of participants on the Health & Wellbeing programmes (cumulative)	Target	500	800	1300	1800	104
	Actual	—	—	—	—	
Number of Community Events (Cumulative)	Target	25	50	75	100	
	Actual	—	—	—	—	

**Our Annual Delivery Plan 2026-2027 is drawn from the following Corporate Objectives 2024-2028**

Civic Leadership	People	Planet	Prosperity
<p>We aim to develop the community’s confidence in Civic Leadership by:</p> <ul style="list-style-type: none"> <li>i. Champion and Drive the Delivery of the Community Plan.</li> <li>ii. Deliver high-quality, cost effective services that meet people’s needs, making use of new approaches to data-driven decision making, continual improvement, innovation and performance management.</li> <li>iii. Identify Commercial and other opportunities to ensure optimum use of rates income.</li> <li>iv. Deliver a suite of sustainable plans, including our Investment Programme, Financial Plan, Workforce Plan and Asset Strategy, ensuring effective, transparent governance in all that we do.</li> <li>v. Be resilient in emergency situations providing leadership for our community.</li> <li>vi. Embed our organisational culture, reflecting the values of the Council by continuing to develop and support skilled and motivated staff. Empower leaders at all levels to support collaborative working and collective decision making.</li> <li>vii. Further the use of digital technology to improve efficiency and increase customer access to services.</li> <li>viii. Provide open and transparent communication and promotion of the Council area with a clear and positive identity.</li> </ul>	<p>We aim for people to live healthier, more fulfilling and longer lives by:</p> <ul style="list-style-type: none"> <li>i. Work collaboratively to ensure the sustaining of good physical and mental health, being proactive in our roles to protect the vulnerable in our community.</li> <li>ii. Promote employee health and wellbeing.</li> <li>iii. Work with partners to build the capacity of community groups and sports clubs to attract more people of all ages to participate in community life.</li> <li>iv. Provide appropriate support for community initiatives and interventions which grow our community, enhancing the quality of life for all.</li> <li>v. Promote volunteering and participation in public and community life, developing community ownership and management of local assets and facilities.</li> <li>vi. Encourage inclusivity and equality of opportunity across our community, promoting the benefits of a diverse society, celebrating culture and good relations between people of different backgrounds and identities.</li> </ul>	<p>We aim to live in resilient and environmentally friendly places by:</p> <ul style="list-style-type: none"> <li>i. Work with our partners to implement our ambitious Local Development Plan for the future development of our area. The Plan will make clear our intentions and guide decisions for sustainable, high quality design, development and regeneration of urban and rural areas to meet the needs of all.</li> <li>ii. Promote sustainable tourism and use of our asset base to increase sustainability.</li> <li>iii. Support a shift to sustainable transport of all types, enhancing access to local amenities across the Council area.</li> <li>iv. Work with residents, businesses and partners to reduce energy consumption, increase recycling and encourage community clean-ups.</li> <li>v. Continue to meet our Waste Management targets, making our area cleaner, greener and more sustainable.</li> <li>vi. Ensure our cemetery provision meets our current and future needs.</li> </ul>	<p>We benefit from a growing and vibrant Economy by:</p> <ul style="list-style-type: none"> <li>i. Promote an ambitious investment programme, prioritising key infrastructure projects including digital infrastructure, smart technology and solutions to attract new employers and grow the prosperity of the Council area.</li> <li>ii. Engage with local, regional, national and international organisations, businesses, social enterprises and partners to access funding opportunities, increase employment and drive sustainable economic growth in our urban and rural areas. This includes a focus on the Belfast Regional City Deal and Dublin-Belfast Economic Corridor partnerships and the UK Prosperity Fund.</li> <li>iii. Help education and training providers to equip our local workforce with the right skills to secure employment or start a business.</li> <li>iv. Build on our reputation as a place to visit, promoting the natural and historic assets of our city, including Destination Royal Hillsborough, towns, villages and countryside to attract greater numbers of international and national tourists thereby building our economy.</li> <li>v. Capital investment in facilities including the redevelopment of the regionally significant Dundonald International Ice Bowl.</li> <li>vi. Working with partners to make optimum use of our land and Capital Assets.</li> </ul>

Our delivery plan for 2026-2027 is linked to the Corporate Plan 2024-2028. The objectives chosen this year are:

Themes	Specific Theme Objective(s)	Action	Success measure	Associated KPI/Milestone	KPI New/ Continuing	Lead Directorate
<b>CIVIC LEADERSHIP</b>	iii	Assets rental from the Council's leased assets	Number of Lettable areas within the Council's available leased assets	Q1:48 Q2:48 Q3:48 Q4:48	Continuing KPIs	R&G
	iv	Finance prompt payment indicators	Percentage supplier invoices paid within 30 Days  Percentage supplier invoices paid within 10 days	Q1:100% Q2:100% Q3:100% Q4:100%  Q1:90% Q2:90% Q3:90% Q4:90%	New CP KPI (previously a PI KPI)	F&CS

Themes	Specific Theme Objective(s)	Action	Success measure	Associated KPI/Milestone	KPI New/ Continuing	Lead Directorate
<b>PEOPLE</b>	i, ii, iii	Vitality membership	Maintain the annual target of 19,500 members of our leisure facilities	Q1:19,500, Q2:19,500, Q3:19,500, Q4:19,500	New KPI	L&CW
	i, ii, iii, iv,	Health & Wellbeing	Health and well being programmes & events	Number of Health & Wellbeing Programmes (cumulative) Q1:20, Q2:40, Q3:60, Q4:80  Number of participants on the Health & Wellbeing Programmes (cumulative) Q1:500, Q2:800, Q3:1300, Q4:1800  Number of Community events (cumulative) Q1:25, Q2:50, Q3:75, Q4:100	Continuing	L&CW
	iii	Staff absenteeism	Average Rolling year absence	Q1: 14.5, Q2: 14.5, Q3: 14, Q4: 14	New CP KPI (previously a PI KPI)	OD&I

Themes	Specific Theme Objective(s)	Action	Success measure	Associated KPI/Milestone	KPI New/ Continuing	Lead Directorate
<b>PLANET</b>	v	Progress the Dundonald International Ice Bowl redevelopment.	DIIB project proceeding to Construction Phase (RIBA stage 5) and complete Phase 2	Building progressed in accordance with programme.  Q1: 70%, Q2: 80%, Q3: 90%, Q4: 100%	Continuing KPI	R&G/ L&CW
	vi	Enhance burial provision	Increase number of plots in line with OBC	Number of new grave plots in operation Annual KPI 150 graves at end of Q4  Submission of a Planning Application for a Garden of Remembrance at Blaris Cemetery Q1:No,Q2:No,Q3:No,Q4:Yes	Continuing KPI  New KPI	ES

Themes	Specific Theme Objective(s)	Action	Success measure	Associated KPI/Milestone	KPI New/ Continuing	Lead Directorate
<b>PROSPERITY</b>	i, ii, iii, iv, vi	Progress the City Centre Regeneration Fund.	City Centre Regeneration Growth fund	<p><b>Number of key tasks</b> completed (cumulative) to deliver the Growth Fund; Business case completed &amp; agreed at R&amp;G Committee, architecture developed for the delivery of the scheme and agreed detailed guidance and timeline</p> <p>Q1:0 Q2:3 Q3:6 Q4:9</p>	Continuing KPI	R&G
	i, v, vi	Capital investment	Capital Programme Expenditure measured against budget	<p>Cumulative % Expenditure against budget</p> <p>Q1:20%, Q2:40%, Q3:70%, Q4:95%</p>	Continuing KPI	R&G
	ii, iii	New jobs	Number of new jobs linked to economic development programmes (cumulative)	Q1:15, Q2:40, Q3:70, Q4:160	Continuing KPI	R&G
	ii, iii	Labour market Partnership Programme	Number of participants in the Labour Market Partnership programme (cumulative)	Q1:0, Q2:20, Q3:60, Q4:100	New CP KPI (previously a PI KPI)	R&G

Themes	Specific Theme Objective(s)	Action	Success measure	Associated KPI/Milestone	KPI New/ Continuing	Lead Directorate
	ii,iii	Specialist employability support	Delivery of specialist employability support and advice for those with a disability	Number of people supported (cumulative) Q1:0, Q2:5, Q3:15, Q4:25  Recruitment onto specialist programme of support Q1:No,Q2:Yes,Q3:Yes,Q4:Yes  Delivery of accredited training Q1:No,Q2:No,Q3:Yes,Q4:Yes  Receive bespoke mentoring tailored to each individual action plan Q1:No,Q2:No,Q3:No,Q4:Yes  Supporting participants on their journey Employment / Further Education Q1:No,Q2:No,Q3:No,Q4:Yes	New CP KPI (previously a PI KPI)	R&G

**Notes**

Underpinning this workplan are the Council objectives of good governance and equality.

These objectives progress towards the overall success outcomes as detailed in the Corporate Plan, working towards our vision of achieving better lives for the people who work, live in or visit the LCCC area.

<b>Committee:</b>	Governance & Audit
<b>Date:</b>	11 June 2026
<b>Report from:</b>	Head of Service - Environmental Health, Risk and Emergency Planning

<b>Item for:</b>	Noting
<b>Subject:</b>	Corporate Risk Register

1.0	<b><u>Background and Key Issues</u></b>
1.1	This report highlights the key corporate risks (Appendix I) currently recorded, their inherent and residual scores and the strategic implications for Council oversight.
1.2	<p><b>Emergency Planning / Business Continuity (CRR 002)</b>  <b>Risk:</b> Inability to respond effectively to command, control and coordination arrangements or concurrent emergencies resulting in impact on resilience.  <b>Owner:</b> Head of Environmental Health, Risk &amp; Emergency Planning  <b>Inherent Risk:</b> 12  <b>Residual Risk:</b> 6 (Stable)  <b>Comment:</b> Core resilience arrangements remain in place, supporting the Council's ability to respond to incidents and maintain service continuity.</p>
1.3	<p><b>Capital Programme (CRR 004)</b>  <b>Risk:</b> Potential failure to deliver the agreed outcomes of the capital programme as a result of affordability or changes in third-party funding arrangements.  <b>Owner:</b> Head of Planning  <b>Inherent Risk:</b> 12  <b>Residual Risk:</b> 6 (Stable)  <b>Comment:</b> Ongoing affordability considerations remain, particularly in the context of wider financial pressures and funding dependencies.</p>
1.4	<p><b>Cyber Security (CRR 006)</b>  <b>Risk:</b> Cyber attack resulting in significant outage or data loss.  <b>Owner:</b> Director Organisation Development &amp; Innovation  <b>Inherent Risk:</b> 16  <b>Residual Risk:</b> 12 (Stable)  <b>Comment:</b> Continues to represent one of the highest-rated risks, reflecting the increasing threat landscape and potential operational disruption.</p>
1.5	<p><b>Financial Sustainability (CRR 007)</b>  <b>Risk:</b> Failure to deliver a balanced budget and longer-term financial resilience and sustainability.  <b>Owner:</b> Head of Finance  <b>Inherent Risk:</b> 16  <b>Residual Risk:</b> 9 (Stable)  <b>Comment:</b> Reflects continued external financial challenges and the need for robust financial planning and savings delivery.</p>
1.6	<p><b>Procurement (CRR 009)</b>  <b>Risk:</b> Non-compliance with procurement and contract regulations, policies and processes resulting in reputational or financial loss and risk of litigation.  <b>Owner:</b> Head of Assets  <b>Inherent Risk:</b> 9  <b>Residual Risk:</b> 6 (Stable)</p>

**Comment:** Controls are in place and continue to be strengthened through improved governance arrangements.

- 1.7 **Burial Grounds Capacity (CRR 011)**  
**Risk:** Risk of insufficient burial ground capacity within the Council area.  
**Owner:** Head of Environmental Health, Risk & Emergency Planning  
**Inherent Risk:** 12  
**Residual Risk:** 9 (Stable)  
**Comment:** Short to medium-term capacity measures have been implemented however, longer-term strategic provision remains required.
- 1.8 **Dundonald International Ice Bowl (DIIB) Project (CRR 012)**  
**Risk:** Risk of not delivering the DIIB project in line with the agreed business case due to its scale, capital investment, and transformational nature.  
**Owner:** Director Leisure & Community Wellbeing  
**Inherent Risk:** 12  
**Residual Risk:** 9 (Stable)  
**Comment:** A significant capital project with ongoing complexity and dependency on financial and programme delivery.
- 1.9 **Information Governance (CRR 013)**  
**Risk:** Inadequate controls relating to information governance leading to non-compliance.  
**Owner:** Director Finance & Corporate Services  
**Inherent Risk:** 16  
**Residual Risk:** 9 (Stable)  
**Comment:** High inherent risk reflecting statutory obligations and the volume of sensitive data held by the Council.
- 1.10 **Compliance (CRR 014)**  
**Risk:** Potential risk of financial penalties through late or incorrect returns to government agencies.  
**Owner:** Director Finance & Corporate Services  
**Inherent Risk:** 12  
**Residual Risk:** 12 (No change)  
**Comment:** Remains a high residual risk and continues to require close monitoring and assurance.
- 1.11 Overall, the Corporate Risk Register (Appendix I) demonstrates that all risks have clearly assigned ownership and established mitigation measures, with residual risk levels remaining stable, indicating that current controls continue to effectively manage risk exposure.
- 1.12 In accordance with the Council's Risk Management Strategy and the commitment to present Directorate Risk Registers to Committee on a bi-annual basis, the following provides a summary of the current position of Directorate Risk Registers:
- 1.13 Environmental Services (Appendix II)
- Increases / Escalations:
- Waste Management (ES3) – Inherent risk increased from medium to high to more accurately reflect the risk before controls are applied. Residual risk remains unchanged at medium.
  - Financial Sustainability (ES5) – Escalated from low to medium, reflecting rising fuel and utility costs linked to wider geopolitical pressures.
  - Climate Change & Sustainability (BC9) – Escalated to Directorate level with consideration for wider corporate inclusion due to council wide impact.
- Reductions:
- 3rd Party Delivery Partnerships (ES2) – Reduced due to improved contractor stability and staffing.

<p>1.14</p>	<ul style="list-style-type: none"> <li>• Service Failure (ES4) – Reduced following delivery of new fleet, although recruitment remains a residual risk.</li> </ul> <p>Organisation Development &amp; Innovation (Appendix III)</p> <p><u>Increases:</u></p> <ul style="list-style-type: none"> <li>• Industrial Relations (ODI 005) – Increased from Medium (6) to Medium (9), reflecting external pay negotiations and potential NJC related action despite positive internal relations.</li> </ul> <p>All other ODI risks remain stable, including Cyber Security and Financial Sustainability.</p>
<p>1.15</p>	<p>Regeneration &amp; Growth (Appendix IV)</p> <p><u>Increases / Additions:</u></p> <ul style="list-style-type: none"> <li>• Staffing Resources (RG 005) – Increased due to labour market pressures and difficulties in filling vacant posts.</li> <li>• Data Processing (RG 013) – Included as a corporate-wide risk across all Directorate Risk Registers, to be managed at a directorate level in line with the specific data and risk exposure relevant to each directorate.</li> </ul> <p><u>Reductions / Removals:</u></p> <ul style="list-style-type: none"> <li>• Development Management (RG 002) – Reduced following fewer legal challenges and improved performance.</li> <li>• BRCD – Destination Royal Hillsborough (RG 010) – Reduced following planning committee member approval and OBC addendum sign off.</li> </ul>
<p>1.16</p>	<p>Communities &amp; Wellbeing (Appendix V)</p> <ul style="list-style-type: none"> <li>• Data Processing LCW 9 – Included as a corporate-wide risk across all Directorate Risk Registers, to be managed at a directorate level in line with the specific data and risk exposure relevant to each directorate.</li> <li>• No other formal score movements recorded at this review.</li> </ul>
<p>1.17</p>	<p>Finance &amp; Corporate Services (Appendix VI)</p> <ul style="list-style-type: none"> <li>• Data Processing FCS 9 – Included as a corporate-wide risk across all Directorate Risk Registers, to be managed at a directorate level in line with the specific data and risk exposure relevant to each directorate.</li> <li>• No score changes recorded.</li> <li>• Key risks including Financial Sustainability, Compliance, Finance System and Mobile Phone Service which remain under review but stable.</li> </ul>
<p>2.0</p>	<p><b><u>Recommendation</u></b> It is recommended that Members:</p> <ol style="list-style-type: none"> <li>1. Note the Corporate Risk Register (Appendix I).</li> <li>2. Note the Directorate Risk Registers (Appendix II to Appendix VI).</li> </ol>
<p>3.0</p>	<p><b><u>Finance and Resource Implications</u></b></p> <p>Not Applicable.</p>
<p>4.0</p>	<p><b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b></p>
<p>4.1</p>	<p>Has an equality and good relations screening been carried out? <span style="float: right;">No</span></p>

4.2	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out  Not required – Internal documentation for Noting only.	
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out.  Not required – Internal documentation for Noting only.	

<b>Appendices:</b>	<p><b>Appendix I</b> - Corporate Risk Register  <b>Appendix II</b> – Environmental Services Risk Register  <b>Appendix III</b> – Organisation Development &amp; Innovation Risk Register  <b>Appendix IV</b> – Regeneration &amp; Growth Risk Register  <b>Appendix V</b> – Communities &amp; Wellbeing Risk Register  <b>Appendix VI</b> – Finance &amp; Corporate Services Risk Register</p>
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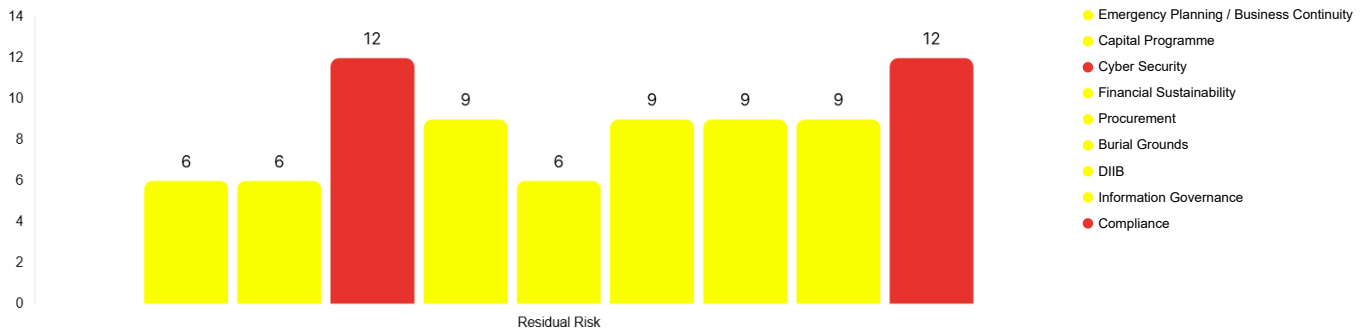


# LCCC CORPORATE RISK LIVE DASHBOARD

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

## CORPORATE SUMMARY

### Corporate Risk Summary



## CORPORATE RISK REGISTER

### Corporate Risks

High Risk	Ref.	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
🚩	CRR 002	<b>Emergency Planning / Business Continuity</b>	Inability to respond to Command, Control & Coordination arrangements or concurrent emergencies resulting in impact on resilience.	HOS Environmental Health, Risk & Emergency Planning	12	<a href="#">CRR 2 Emergency Planning / Business Continuity</a>	6	↔	
🚩	CRR 004	<b>Capital Programme</b>	Potential failure to deliver the agreed outcomes of the capital programme as a result of affordability or changes in third party funding arrangements.	HOS Planning	12	<a href="#">CRR 4 Capital Programme</a>	6	↔	
🚩	CRR 006	<b>Cyber Security</b>	Cyber attack resulting in significant outage or data loss.	Director Organisation Development & Innovation	16	<a href="#">CRR 6 Cyber Security</a>	12	↔	
🚩	CRR 007	<b>Financial Sustainability</b>	Failure to deliver balanced budget and longer term financial resilience and sustainability.	HOS Finance	16	<a href="#">CRR 7 Financial Sustainability</a>	9	↔	
🚩	CRR 009	<b>Procurement</b>	Non compliance with procurement and contract regulations, policies and processes resulting in reputation/financial loss and risk of litigation.	HOS Assets	9	<a href="#">CRR 9 Procurement</a>	6	↔	
🚩	CRR 011	<b>Burial Grounds</b>	Risk of insufficient LCCC burial ground capacity within the Council area.	HOS Environmental Health, Risk & Emergency Planning	12	<a href="#">CRR 011 Burial Grounds</a>	9	↔	
🚩	CRR 012	<b>DIIB</b>	Risk of not delivering the DIIB project in line with agreed business case due to the significant Capital Investment representation on LCCCs Capital Programme and significant transformational project to modernise the facility.	Director of Leisure & Comm Wellbeing	12	<a href="#">CRR 012 DIIB</a>	9	↔	
🚩	CRR 013	<b>Information Governance</b>	Inadequate controls relating to information governance leading to non compliance.	Director of Finance & Corporate Services	16	<a href="#">FCS 5 Information Governance</a>	9	↔	
🚩	CRR 014	<b>Compliance</b>	Potential risk of financial penalties through late or incorrect returns to government agencies.	Director of Finance & Corporate Services	12	<a href="#">FCS 7 Compliance</a>	12	↔	

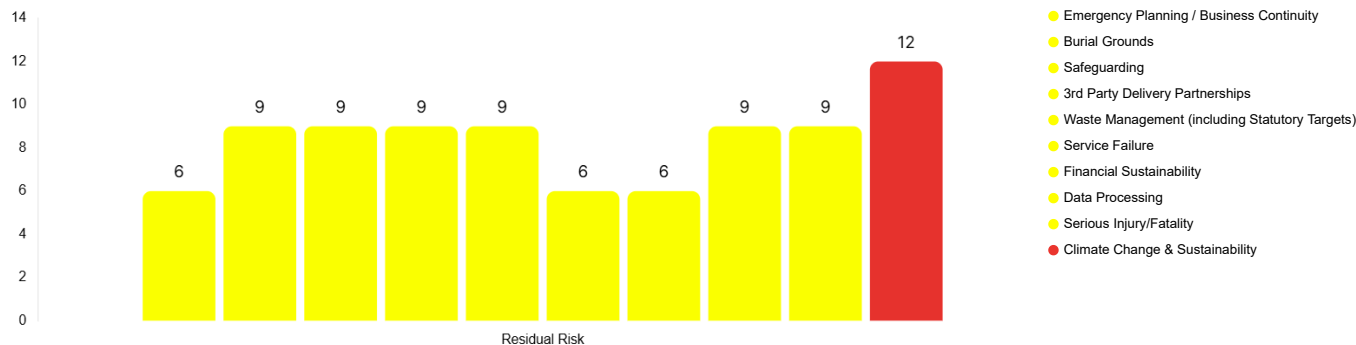


**ENVIRONMENTAL SERVICES  
DEPARTMENTAL RISK  
LIVE DASHBOARD**

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

**ENVIRONMENTAL SERVICES RISK SUMMARY**

**Environmental Services Departmental Risks**



**ENVIRONMENTAL SERVICES DEPARTMENTAL RISK REGISTER**

**Environmental Services Risk Register**

Ref.	High Risk	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
CRR 002	⚠	<b>Emergency Planning / Business Continuity</b>	Inability to respond to Command, Control & Coordination arrangements or concurrent emergencies resulting in impact on resilience.	HOS Environmental Health, Risk & Emergency Planning	12	<a href="#">CRR 2 Emergency Planning / Business Continuity</a>	6	↔	
CRR 011	⚠	<b>Burial Grounds</b>	Risk of insufficient LCCC burial ground capacity within the Council area.	HOS Environmental Health, Risk & Emergency Planning	12	<a href="#">CRR 011 Burial Grounds</a>	9	↔	
ES 1	⚠	<b>Safeguarding</b>	Failure to adequately safeguard vulnerable groups due to insufficient controls in place resulting in harm to vulnerable person (s).	HOS Environmental Health, Risk & Emergency Planning	16	<a href="#">ES 1 Safeguarding</a>	9	↔	
ES 2	⚠	<b>3rd Party Delivery Partnerships</b>	Failure of key partnerships due to under resource/financial support resulting in failure to deliver expected benefits, service improvements and targets (Contractors, delivery partners - ARC21 and Funders)	Director Environmental Services	12	<a href="#">ES 2 3rd Party Delivery Partnerships</a>	9	↓	Decreased from high to medium risk due to Wood contractor now in place through STA and stability in staffing issues at Bryson.
ES 3	⚠	<b>Waste Management (including Statutory Targets)</b>	LCCC provides waste collection & disposal services within a legislative context. Failure to deliver these services in part or in full, or failure to meet targets set out in legislation would place the Council in a default position regarding statutory obligations, which brings a legal, financial and reputational risk.	HOS Operations	12	<a href="#">ES 3 Waste Management</a>	9	↑	Inherent risk increased from medium to high to more accurately reflect the risk before controls are applied. The residual risk remains unchanged at medium.
ES 4	⚠	<b>Service Failure</b>	Risk of service failure due to insufficient staffing resources due to competing priorities.	Director Environmental Services	9	<a href="#">ES 4 Service Failure</a>	6	↓	Inherent risk reduced from high to medium on basis of new fleet. Drivers and mechanic recruitment remain a risk. 4 new fleet received with further 4 to be received April and another 7 by end of 2026.
ES 5	⚠	<b>Financial Sustainability</b>	Failure to deliver balanced budget and longer term financial resilience and sustainability.	Director Environmental Services	9	<a href="#">ES 5 Financial Sustainability</a>	6	↑	Increased from low to medium risk due to emerging pressures associated with utility and fuel price increases arising from the conflict in the Middle East.
ES 8	⚠	<b>Data Processing</b>	The risk of a data breach due to unauthorised access / use of personal data leading to financial losses, reputational damage and/or legal liability.	Director Environmental Services	16	<a href="#">ES 8 Data Processing</a>	9	↔	
ES 9	⚠	<b>Serious Injury/Fatality</b>	Breach in internal H&S arrangements resulting in injuries / loss of life / illness.	HOS Environmental Health, Risk & Emergency Planning	12	<a href="#">ES 9 Serious Injury / Fatality</a>	9	↔	
BC 9	⚠	<b>Climate Change &amp; Sustainability</b>	Failure to achieve Statutory targets including Net Zero by 2050.	Colin Duff	16	<a href="#">BC 9 Climate Change &amp; Sustainability</a>	12	*	Escalated to Environmental Services Directorate Risk Register with consideration for inclusion on all Directorate Risk Registers due to corporate wide impact.



# ORGANISATION DEVELOPMENT & INNOVATION DEPARTMENTAL RISK LIVE DASHBOARD

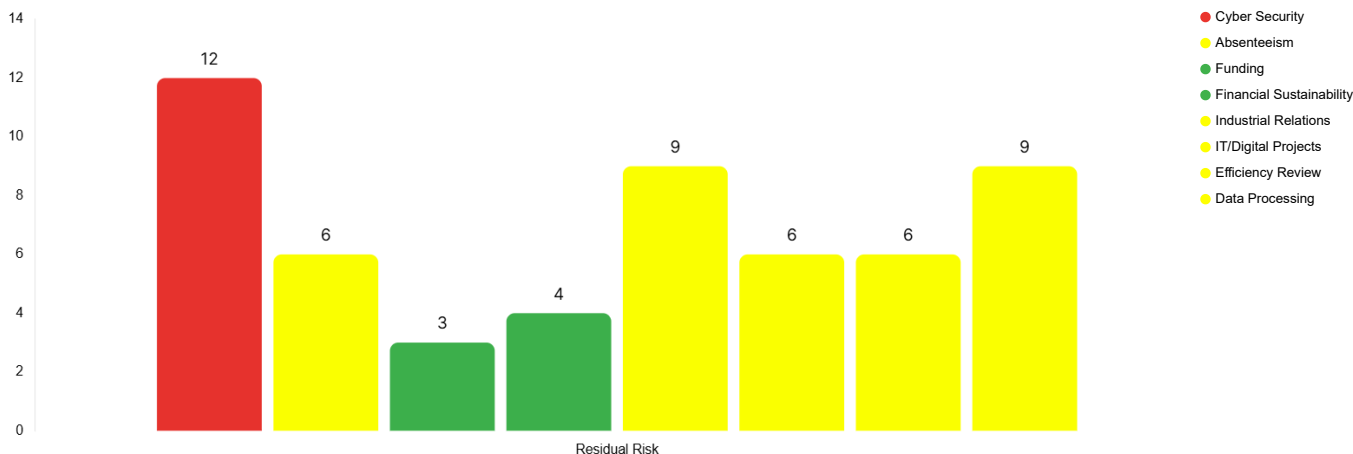
### Useful Links

- [ODI Departmental Risk Register](#)
- [ODI Actions](#)
- [Copy of ODI Overdue Actions](#)

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

## ORGANISATION DEV & INNOVATION RISK SUMMARY

### Organisation Dev & Innovation Departmental Risks



## ORGANISATION DEV & INNOVATION RISK REGISTER

### Organisation Dev & Innovation Risk Register

Ref.	High Risk	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
CRR 006	High	Cyber Security	Cyber attack resulting in significant outage or data loss.	Director Organisation Development & Innovation	16	<a href="#">CRR 6 Cyber Security</a>	12	↔	
ODI 001	Medium	Absenteeism	Risk of insufficient staffing resources due to high levels of absenteeism within the Council impacting on service delivery and over-reliance on agency staff resulting in increased financial costs.	Director Organisation Development & Innovation	9	<a href="#">ODI 001 Absenteeism</a>	6	↔	
ODI 003	Medium	Funding	Funding Streams availability and implications for delivery of the Plan (eg 10 Yr Investment Plan, BRCD, European Funding etc)	Director Organisation Development & Innovation	8	<a href="#">ODI 003 Funding</a>	3	↔	
ODI 004	Medium	Financial Sustainability	Failure to deliver balanced budget and longer term financial resilience and sustainability.	Director Organisation Development & Innovation	16	<a href="#">ODI 004 Financial Sustainability</a>	4	↔	
ODI 005	Medium	Industrial Relations	Risk of industrial action resulting in potential disruption to service delivery due to staff shortage.	Director Organisation Development & Innovation	6	<a href="#">ODI 005 Industrial Relations</a>	9	↑	Risk score increased from Medium (6) to Medium (9). While internal industrial relations remain positive, the wider external environment indicates potential progression towards industrial action in response to the current NJC pay offer, including possible Part 3 Green Book action.
ODI 007	Medium	IT/Digital Projects	Failure to deliver IT projects on time and within budget resulting in service delivery impact and costs.	Director Organisation Development & Innovation	9	<a href="#">ODI 007 IT Projects</a>	6	↔	1No ongoing project - Digital Depot. Currently at Initiation Stage.
ODI 009	Medium	Efficiency Review	Failure to provide effective HR&OD and Innovation service.	Director Organisation Development & Innovation	9	<a href="#">ODI 009 Efficiency Review</a>	6	*	Combined departmental risk.
ITC 02	Medium	Data Processing	The risk of a data breach due to unauthorised access / use of personal data leading to financial losses, reputational damage and/or legal liability.	Neil Thompson	16	<a href="#">ITC 02 Data Processing</a>	9	↔	Risk ownership transferring to Governance & Communications June 2026.

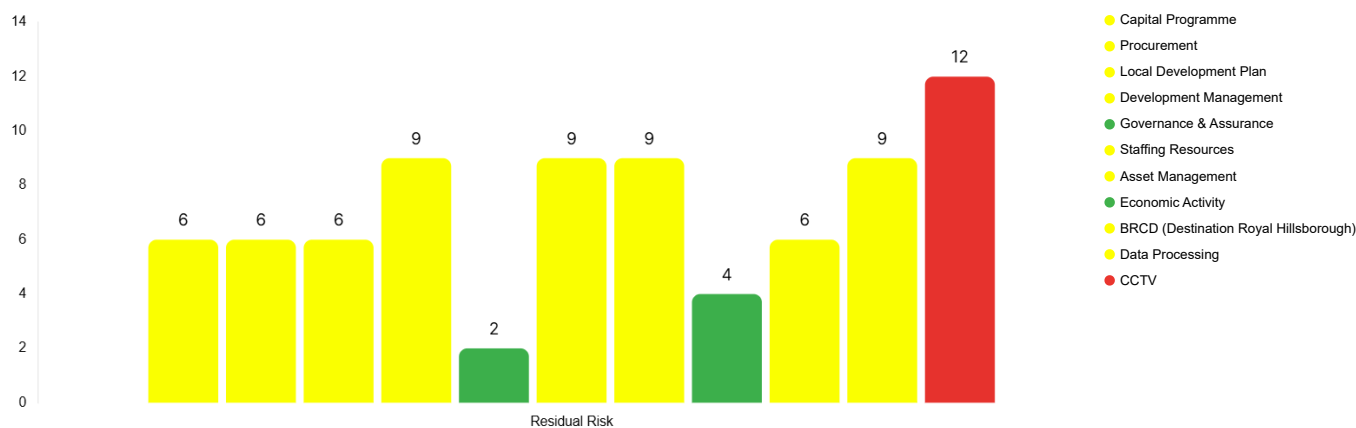


**REGENERATION & GROWTH DEPARTMENTAL RISK REGISTER**  
**LIVE DASHBOARD**

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

**REGENERATION & GROWTH RISK SUMMARY**

**Regeneration & Growth Departmental Risks**



**REGENERATION & GROWTH DEPARTMENTAL RISK REGISTER**

**Regeneration & Growth Risk Register**

Ref.	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
CRR 004	Capital Programme	Potential failure to deliver the agreed outcomes of the capital programme as a result of affordability or changes in third party funding arrangements.	HOS Planning	12	<a href="#">CRR 4 Capital Programme</a>	6	↔	
CRR 009	Procurement	Non compliance with procurement and contract regulations, policies and processes resulting in reputation/financial loss and risk of litigation.	HOS Assets	9	<a href="#">CRR 9 Procurement</a>	6	↔	
RG 001	Local Development Plan	Challenges to the Local Development Plan.	HOS Planning	9	<a href="#">RG 001 Local Development Plan</a>	6	↔	
RG 002	Development Management	Legal challenge to planning decisions.	HOS Planning	12	<a href="#">RG 002 Development Management</a>	9	↓	Legal challenges less frequent and improvement in terms of performance. Reduced from high to medium risk.
RG 003	Governance & Assurance	Failure to implement appropriate governance and assurance frameworks.	Director of Regenerat	6	<a href="#">RG 003 Governance &amp; Assurance</a>	2	↔	
RG 005	Staffing Resources	Insufficient staffing resources due to competing priorities: Absenteeism, concurrent emergencies, vacant posts/skills shortages.	Director of Regenerat	16	<a href="#">RG 005 Staffing</a>	9	↑	Risk increased from Medium (6) to Medium (9) due to labour market shortages and resulting vacant posts.
RG 006	Asset Management	Failure to ensure that the Council's property assets are managed and controlled to meet the council's strategic aims, ensure service delivery and value for money.	HOS Assets	12	<a href="#">RG 006 Asset Management</a>	9	↔	
RG 007	Economic Activity	Failure to identify, maximise and deliver an economic development programme that aligns with our stakeholder needs and the needs of the local economy in the context of the national and regional economic position.	HOS Economic Development	6	<a href="#">RG 007 Economic Activity</a>	4	↔	
RG 010	BRCD (Destination Royal Hillsborough)	Delivery of project within budget given the interdependencies with DfI our delivery partners with HRP and land assembly inertia.	Director of Regeneration & Growth	12	<a href="#">RG 010 BRCD</a>	6	↓	Risk has reduced from Medium (9) to Medium (6) following approval of the scheme by the Planning Committee Members and the signing of the addendum to the OBC by DfE.
RG 013	Data Processing	The risk of a data breach due to unauthorised access / use of personal data leading to financial losses, reputational damage and/or legal liability.	Director of Regeneration & Growth	16	<a href="#">RG 013 Data Processing</a>	9	*	Removed from Corporate Risk Register to be managed by all Directorates.
AS 12	CCTV	Risk of non-compliance / data breach / community safety in absence of policy and governance arrangements.	HOS Assets	12	<a href="#">AS 12 CCTV</a>	12	↔	

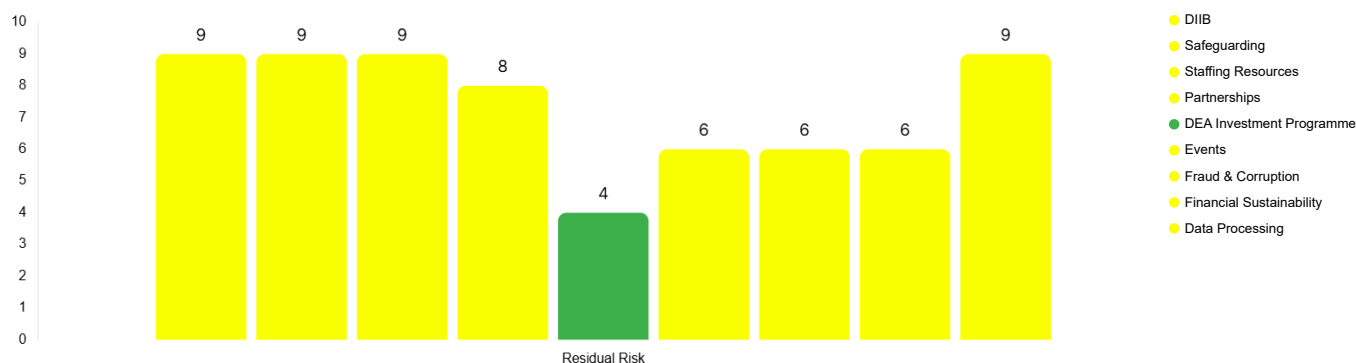


# COMMUNITIES & WELLBEING DEPARTMENTAL RISK LIVE DASHBOARD

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

## COMMUNITIES & WELLBEING RISK SUMMARY

### Communities & Wellbeing Departmental Risks



## COMMUNITIES & WELLBEING DEPART RISK REGISTER

### Communities & Wellbeing Risk Register

Ref.	High Risk	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
CRR 012	⚠	DIIB	Risk of not delivering the DIIB project in line with agreed business case due to the significant Capital Investment representation on LCCCs Capital Programme and significant transformational project to modernise the facility.	Director of Leisure & Comm Wellbeing	12	<a href="#">CRR 012 DIIB</a>	9	↔	
ES 1	⚠	Safeguarding	Failure to adequately safeguard vulnerable groups in regional facilities due to insufficient controls in place resulting in harm to vulnerable person (s).	HOS Environmental Health, Risk & Emergency Planning	16	<a href="#">ES 1 Safeguarding</a>	9	↔	
LCW 1	⚠	Staffing Resources	Insufficient permanent staffing resources due to volume of turnover, absence and reliance on 3rd party resource suppliers.	Director of Leisure & Comm Wellbeing	16	<a href="#">LCW 1 Staffing</a>	9	↔	
LCW 2	⚠	Partnerships	Risk of failure of key partnerships to deliver expected benefits, service improvements and targets.	Director of Leisure & Comm Wellbeing	12	<a href="#">LCW 2 Partnerships</a>	8	↔	
LCW 4	⚠	DEA Investment Programme	Failure to deliver the DEA Investment Programme in time and within budget due to resourcing/governance arrangements.	Director of Leisure & Comm Wellbeing	12	<a href="#">LCW 4 DEA Investment Programme</a>	4	↔	
LCW 5	⚠	Events	Staging, facilitating or cancellation of large scale events.	Director of Leisure & Comm Wellbeing	9	<a href="#">LCW 5 Events</a>	6	↔	
LCW 6	⚠	Fraud & Corruption	Risk of fraud and bribery due to staff vulnerability in relation to procurement, invoicing, cash handling, bookings and fees etc. resulting in potential litigation.	Director of Leisure & Comm Wellbeing	9	<a href="#">LCW 6 Fraud &amp; Corruption</a>	6	↔	
LCW 7	⚠	Financial Sustainability	Failure to deliver balanced budget and longer term financial resilience and sustainability.	Director of Leisure & Comm Wellbeing	12	<a href="#">LCW 7 Financial Sustainability</a>	6	↔	
LCW 9	⚠	Data Processing	The risk of a data breach due to unauthorised access / use of personal data leading to financial losses, reputational damage and/or legal liability.	Director of Leisure & Comm Wellbeing	16	<a href="#">LCW 9 Data Processing</a>	9	*	Removed from Corporate Risk Register to be managed by all Directorates.

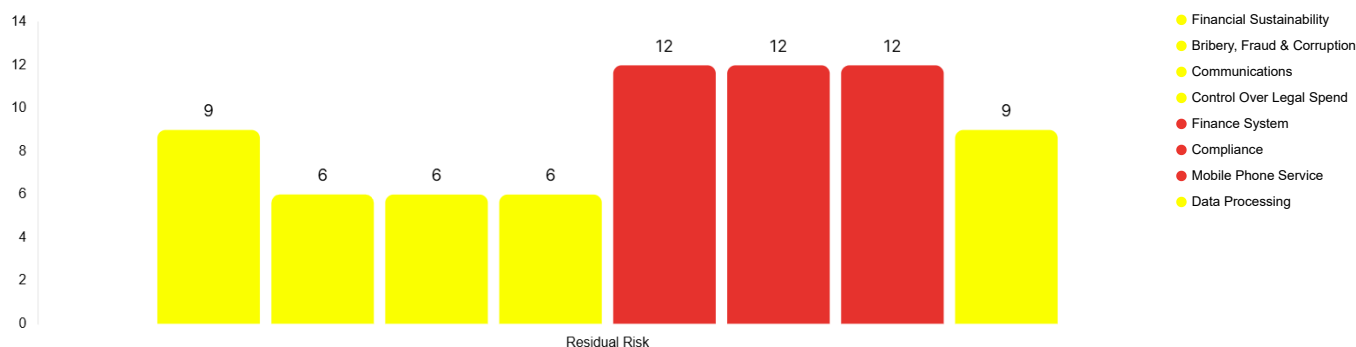


**FINANCE & CORPORATE SERVICES DEPARTMENTAL RISK LIVE DASHBOARD**

Risk Matrix				
Likelihood	Minor	Moderate	Major	Catastrophic
Very Likely	4	8	12	16
Likely	3	6	9	12
Unlikely	2	4	6	8
Very Unlikely	1	2	3	4
	Minor	Moderate	Major	Catastrophic

**FINANCE & CORPORATE SERVICES RISK SUMMARY**

**Finance & Corporate Services Departmental Risks**



**FINANCE & CORPORATE SERVICES RISK REGISTER**

**Finance & Corporate Services Risk Register**

Ref.	High Risk	Risk	Risk Description	Risk Owner	Inherent Risk	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
CRR 007	☐	<b>Financial Sustainability</b>	Failure to deliver balanced budget and longer term financial resilience and sustainability.	HOS Finance	16	<a href="#">CRR 7 Financial Sustainability</a>	9	↔	
CRR 014	☑	<b>Compliance</b>	Potential risk of financial penalties through late or incorrect returns to government agencies.	Director of Finance & Corporate Services	12	<a href="#">FCS 7 Compliance</a>	12	↔	
FCS 1	☐	<b>Bribery, Fraud &amp; Corruption</b>	Lack of effective internal control and governance framework, resulting in internal control failure, increased risk of bribery, fraud and/or corruption.	Director of Finance & Corporate Services	9	<a href="#">FCS 1 Bribery Fraud Corruption</a>	6	↔	
FCS 2	☐	<b>Communications</b>	The risk of inadequate, delayed or inaccurate information and/or communications resulting in operational delays or reputational damage as a result of under resource and/or lack of coordination.	Director of Finance & Corporate Services	9	<a href="#">FCS 2 Communications</a>	6	↔	
FCS 4	☐	<b>Control Over Legal Spend</b>	Overspend on Legal Costs	Director of Finance & Corporate Services	8	<a href="#">FCS 4 Legal Spend</a>	6	↔	
FCS 6	☑	<b>Finance System</b>	Technical issues associated with implementation of new Finance System.	Director of Finance & Corporate Services	12	<a href="#">FCS 6 Finance System</a>	12	↔	
FCS 8	☑	<b>Mobile Phone Service</b>	Signal and connection issues with new mobile phone service provider Gamma resulting in intermittent signal and connection failures which may impair resilience, service delivery and public safety.	Director of Finance & Corporate Services	12	<a href="#">FCS 8 Mobile Phone Service</a>	12	↔	
FCS 9	☐	<b>Data Processing</b>	The risk of a data breach due to unauthorised access / use of personal data leading to financial losses, reputational damage and/or legal liability.	Director of Finance & Corporate Services	16	<a href="#">FCS 9 Data Processing</a>	9	*	Removed from Corporate Risk Register to be managed by all Directorates.

<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Director of Finance & Corporate Services

<b>Item for:</b>	Noting
<b>Subject:</b>	Code of Audit Practice (Local Government) 2026

1.0	<b><u>Background and Key Issues</u></b>	
1.1	The Northern Ireland Audit Office has issued the Code of Audit Practice (Local Government) 2026, which was approved by the NI Assembly and effective from 15 April 2026. The Code is applicable to the audit of all Northern Ireland local government bodies' financial statements from the financial year 2025-26 onwards.	
	<a href="https://www.niauditoffice.gov.uk/news-centre/code-audit-practice-local-government">https://www.niauditoffice.gov.uk/news-centre/code-audit-practice-local-government</a>	
1.2	Alongside the Code, a revised <b><u>Statement of responsibilities of Local Government Auditor and Local Government Bodies</u></b> has also been issued. This is aligned to the Code of Audit Practice and summarises the responsibilities of the Local Government Auditor and local government bodies and what is expected of both parties.	
1.3	No immediate actions are required by the Council	
2.0	<b><u>Recommendation</u></b>	
	It is recommended that Members note the Northern Ireland Audit Office Code of Audit Practice (Local Government) 2026 and the Statement of Responsibilities of Local Government Auditor and Local Government Bodies.	
3.0	<b><u>Finance and Resource Implications</u></b>	
	Not applicable.	
4.0	<b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b>	
4.1	Has an equality and good relations screening been carried out?	No
4.2	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out	
	Not applicable.	
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b>or</b> rationale why the screening was not carried out.	

Not applicable.	
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**Appendices:**

<https://www.niauditoffice.gov.uk/news-centre/code-audit-practice-local-government>

[Statement of responsibilities of Local Government Auditor and Local Government Bodies](#)



<b>Committee:</b>	Governance & Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Internal Audit Manager

<b>Item for:</b>	<b>Decision</b>
<b>Subject:</b>	Anti-Fraud, Bribery and Corruption Policy Statement and Strategy

1.0	<p><b><u>Background and Key Issues</u></b></p> <p>The purpose of this report is to bring a refreshed Anti-Fraud, Bribery and Corruption Policy Statement and Strategy policy to the attention of the Governance and Audit Committee.</p> <p>The Council expect all employees, agency assignees, casual workers, elected members, contractors, consultants, suppliers and service users to work and interact with us in good faith and to be fair and honest.</p> <p>The purpose of this report is to bring the revised Anti-Fraud, Bribery and Corruption Policy Statement and Strategy to the attention of the Governance and Audit Committee.</p> <p>Most of the document has remained the same as the previous approved version available on the staff intranet. Links to guidance have been updated to latest versions. Additional information regarding Bribery has been included as the Council does not have a separate anti-bribery policy and the topic sits well within the revised document.</p> <p>Flow charts have been added to the document at the request of the CMT.</p>	
2.0	<p><b><u>Recommendation</u></b></p> <p><b>That members approve the Anti-Fraud, Bribery and Corruption Police Statement and Strategy.</b></p>	
3.0	<p><b><u>Finance and Resource Implications</u></b></p> <p>None</p>	
4.0	<p><b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b></p>	
4.1	Has an equality and good relations screening been carried out?	Yes
4.2	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out	N/A
	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out.	N/A

This is not a new policy only updated for the latest guidance.

**Appendices: 1 Anti-Fraud, Bribery and Corruption Policy Statement and Strategy  
2 Equality Screening**



**Lisburn and Castlereagh City Council**

<b>Title</b>	<b>ANTI-FRAUD, <u>BRIBERY</u> AND CORRUPTION POLICY STATEMENT &amp; STRATEGY</b>
<b><u>Original</u> Policy Author:</b>	Head of Service Audit, Risk & Performance. (HoS ARP)
<b>Status:</b>	Final
<b>Senior Officer responsible for policy:</b>	-Internal Audit Manager
<b>Date of Inception:</b>	30 <sup>th</sup> September 2016
<b>Date of Review:</b>	<u>24<sup>th</sup> March -2026</u> <sup>4</sup>
<b>Date of Approval by Corporate Management Team</b>	
<b>Date of Approval by Committee:</b>	
<b>Date of ratification by Full Council:</b>	
<b>Minute Reference:</b>	
<b>Date placed on Intranet:</b>	
<b>Policy Review Dates:</b> <i>(where applicable)</i>	Last review date was 31 <sup>st</sup> October 2020

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## Anti-Fraud, Bribery and Corruption Strategy

### 1. Introduction

We are committed to protecting the public money we look after and to making sure that the opportunity for fraud or any other financial impropriety is reduced to the lowest possible risk.

**We expect all employees, agency assignees, elected members, contractors, consultants, suppliers and service users to work and interact with us in good faith and to be fair and honest.**

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Should allegations be made, we will deal with them in a firm and controlled manner.

As well as being potentially criminal acts, fraud and financial impropriety can impact on the council's finances, its reputation, its staff and its stakeholders.

There is a clear commitment from the Council and Senior Management that fraud will not be tolerated and the Council is committed to ensuring that opportunities for fraud are reduced to the lowest possible level of risk.

### 2. Aims

The aims of this policy and related processes are as follows:

- To reduce the risk of fraud, loss and impropriety within the council to an absolute minimum and maintain that level of risk.
- To protect the council's valuable resources by ensuring they are not lost through fraud or impropriety but are used for developing and improving council services.
- To help create a counter-fraud culture which highlights the council's zero tolerance of fraud, which defines the role and responsibilities of stakeholders.
- To ensure that where allegations of fraud or other financial impropriety arise, there is a clear process to ensure that they can be reported, are properly investigated and appropriate action is taken.

### 3. Scope

This policy is concerned with:

- External fraud committed against the Council, for example through the procurement of goods and services, contractors in the course of their work or other persons.
- Internal fraud committed against the Council, for example travel and subsistence fraud, theft of assets, via procurement and the mismanagement of contracts; and
- Internal fraud committed against Council employees or elected members, for example theft of personal property.

- [Bribery where an attempt to give or receive something such as money, presents, or something else of personal gain in exchange for something else.](#)

The Strategy provides overarching governance to the Council's suite of counter fraud, [bribery and corruption](#) policies and procedures which include:

- The Council's [Constitution](#), incorporating the Members' Code of Conduct, Officers' Code of Conduct, Contract Procedure Rules, Financial Procedure Rules.
- [Raising Concerns Policy](#)~~Whistleblowing Policy.~~
- [Gifts & Hospitality Policies for both employees and elected members.](#)
- [Declaration of Personal Interests](#)
- [Information Security Policy.](#)
- [Risk Policy](#)

The strategy has also taken into consideration the following best practice from the Northern Ireland Audit Office (NIAO):

- [Planning Fraud Risks | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](#)
- [Internal Fraud Risks | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](#)
- [Grant Fraud Risks | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](#)
- [Procurement Fraud risk guide | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](#)
- [Managing the Risk of Bribery and Corruption Good Practice Guide.pdf](#)

#### 4. Background

This Strategy adheres to the CIPFA Code of Practice on Managing the Risk of Fraud and Corruption 2014 (the Code). The Code requires leaders of public sector organisations to have a responsibility to embed effective standards for countering fraud and corruption in their organisations in order to support good governance and demonstrate effective financial stewardship and strong public financial management.

The Council resolved to adopt the principles of the Code and report annually on conformance to it.

The five key elements of the CIPFA Code are to:

1	Acknowledge the responsibility of the Elected Members and the Corporate Management Team – for countering fraud and corruption	ACKNOWLEDGE
2	Identify the <del>fraud and corruption risks</del> <a href="#">risks of fraud and corruption</a>	
3	Develop an appropriate anti-fraud and corruption strategy	

4	Provide resources to implement the strategy	PREVENT
5	Take action in response to fraud and corruption	PURSUE

**5. What is Fraud? A few Definitions.**

A person is guilty of fraud if he is in breach of any of the sections listed in subsection (2) of the Fraud Act 2006, which ~~provide for~~ provides different ways of committing the offence.

These ~~are:-~~are:-

1. Fraud by false ~~representation;~~representation.
2. Fraud by failure to disclose information when there is a legal duty to do so; and
3. Fraud by abuse of position.

In each case:

- The defendant's conduct must be ~~dishonest;~~dishonest.
- His/her intention must be to make a gain; or cause a loss or the risk of a loss to another.
- No gain or loss needs ~~actually to~~ have been made.
- The maximum sentence is up to 10 years' imprisonment.

**What is Bribery?**

Bribery is a specific offence falling within the broad spectrum of corruption. The introduction of the Bribery Act in 2010 provides a much wider definition of Bribery than ever before.

The types of bribery that take place in the public sector are numerous. Some simple examples include:

- bribery in order to secure or keep a contract.
- bribery to secure an order.
- bribery to gain any advantage over a competitor.
- bribery of a local, national or foreign official to secure a contract.
- bribery to turn a blind eye to a health safety issue or poor performance or substitution of materials or false labour charges.
- bribery to falsify an inspection report or obtain a certificate
- bribery of planning officers and or elected members to secure a positive decision.

**What is Corruption?**

Corruption is the deliberate misuse of a position for direct or indirect personal gain.

This includes offering, giving, requesting or accepting a bribe or reward, which influences actions or the actions of someone else. The Bribery Act 2010 (the Bribery Act) makes it possible for individuals to be convicted where they are deemed to have given their consent or

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tacit approval in giving or receiving a bribe.

The Bribery Act provides a new definition of what a bribe is:-

*“A bribe is a financial or other advantage intended to induce or reward the improper performance of a person’s function or activity, where benefit could create a conflict between personal interests and business interests”*

The Act also created the Corporate Offence of “*Failing to prevent bribery on behalf of a commercial organisation*” (corporate liability). To protect itself against the corporate offence, the Act requires an organisation to have “adequate procedures in place to prevent bribery”. ~~The Council has a separate Anti-Bribery Policy which discusses bribery and the provisions of the Bribery Act in detail, including advice for staff on escalating concerns.~~ In addition, this Strategy, the Council’s Codes of Conduct and the ~~Raising Concerns Whistleblowing Policy~~, along with the educating of management and staff (e.g. through induction, e- learning etc.) are designed to meet the requirement.

Corruption and bribery pose a serious risk to the council's security, economic probity and reputation.

## 6. Countering the Risk of Fraud, Bribery and Corruption within the Council.

### a). Managing the Risk of Fraud, Bribery and Corruption

Whilst all stakeholders have a part to play in reducing the risk of fraud, elected members and senior management are ideally positioned to influence the ethical tone of the organisation and play a crucial role in fostering a culture of high ethical standards and integrity.

As with any risk faced by the council, it is the responsibility of managers to ensure that fraud, bribery and corruption risk is adequately managed within their individual service areas and in the context of supporting the achievement of strategic priorities, business plans, projects, ~~programmes~~programs, objectives and outcomes. This is particularly important in high-risk areas such as procurement and contract management, HR, planning and grants. In making this assessment it is important that managers are proactive in considering the risk of fraud, bribery and corruption occurring. Once the ~~fraud~~ risk has been evaluated, appropriate action should be taken by management to mitigate those risks on an ongoing basis, for example through introducing and operating effective systems of internal control (“first line of ~~defence~~defense”).

Adequate supervision, recruitment and selection, scrutiny and healthy skepticism must not be seen as distrust but simply as good management ~~practice~~practice, shaping attitudes and creating an environment opposed to fraudulent activity.

Good corporate governance procedures are a strong safeguard against fraud and corruption. The Council’s Governance and Audit Committee plays a key role in scrutinising the Council’s approach to both fraud and risk management; and its wider resiliency to financial irregularity in general (“second line of ~~defence~~see”).

The Council’s Internal Audit Service undertakes risk-based assurance work each year centered on a management approved Internal Audit Plan. This assurance work involves a review of systems and procedures, including a review of the management of risk (of both fraud and other types of risk) whereby system vulnerabilities are brought to the attention of management along with recommendations to strengthen procedures (“third line of ~~defence~~defense”).

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#### b). Fighting Fraud, Bribery and Corruption Locally: Acknowledge – Prevent – Pursue

The Council seeks to fulfil its responsibility to reduce fraud and protect its resources by a strategic approach consistent with that outlined in both CIPFA's "Code of Practice on Managing the Risk of Fraud and Corruption" and in the Local Government Fraud Strategy – "Fighting Fraud Locally", and its three key themes of Acknowledge / Prevent / Pursue. See **Appendix 2** for details.

### 7. Avenues for Reporting Suspicions of Fraud, Bribery and Corruption

#### a). Staff and Agency Assignees (flowchart at Appendix 4)

Staff will often be the first to notice the potential for fraud or financial impropriety.

Staff who have concerns regarding management or staff members should report them as soon as possible to their immediate line manager. If there is a concern that management may be involved, the matter should be reported to the next appropriate level. If staff feel unable to raise a particular matter with their line manager, for whatever reason, they should raise the matter with the HoS-ARPI Internal Audit Manager or their relevant Director.

We will take all reasonable steps to make sure that cases are treated in the strictest confidence. We are fully committed to supporting and protecting staff who raise legitimate concerns.

The Council will, where requested, seek to safeguard the confidentiality of individuals who report any suspicions unless this is incompatible with a fair investigation or legal imperative. Our Raising Concerns Policy Whistleblowing Policy is intended to encourage and enable staff to raise serious concerns.

If these channels have been followed and the member of staff still has concerns, or the member of staff feels that the matter is so serious that they cannot discuss it with any of the above, they should discuss it with the Chief Executive. If staff feel that they cannot discuss their concerns with anyone above, they should refer the matter to the Chair of the LCCC Governance and Audit Committee. Or can be made directly to the Northern Ireland Audit Office.

Details of how to report a fraud are set out in the Councils Fraud Response plan (See **Appendix 1**). Staff should not attempt to investigate any suspicions of fraud themselves.

If an allegation of fraud or other financial impropriety is made in good faith, but is not confirmed by the investigation, no action will be taken against the originator. If, however, the allegation is demonstrably made for an ulterior and undesirable purpose it will be deemed not to have been made in good faith, and a disciplinary investigation may be undertaken with the potential for disciplinary action being taken against the individual making the allegation.

Any action to prevent the reporting of suspected fraud or any other financial impropriety or any attempts at intimidation will be treated seriously; the person involved may be subject to disciplinary action.

Where the concern is regarding another elected member this should be reported to the Standards Commission Northern Ireland at [standardscommissioner@niassembly.gov.uk](mailto:standardscommissioner@niassembly.gov.uk).

The ~~HoS-AR~~Internal Audit Manager is responsible for the external reporting of all discovered fraud, proven or suspected, including attempted fraud within the Council to the Local Government Auditor (**Appendix 3**). Therefore, it is essential that the ~~HoS-AR~~Internal Audit Manager is notified immediately of any concerns raised.

#### **b). Elected members (flowchart at Appendix 5)**

Elected members who have concerns regarding council employees should report them as soon as possible to the Chief Executive or the Internal Audit Manager.

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Where the concern is regarding another elected member this should be reported to the Standards Commission Northern Ireland at [standardscommissioner@niassembly.gov.uk](mailto:standardscommissioner@niassembly.gov.uk).

#### **c). Contractors, Consultants and Suppliers (flowchart at Appendix 6)**

Contractors, Consultants and Suppliers who have concerns regarding employees should report them as soon as possible to the Chief Executive or the Internal Audit Manager.

Concerns regarding Elected Members should be reported to the Standards Commission Northern Ireland at [standardscommissioner@niassembly.gov.uk](mailto:standardscommissioner@niassembly.gov.uk).

#### **d). Members of the public/Service Users (flowchart at Appendix 7)**

Service users can report suspicions of fraud, bribery and corruption via a specific link on the Council's website.

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Where the concern is regarding another elected member this should be reported to the Standards Commission Northern Ireland at [standardscommissioner@niassembly.gov.uk](mailto:standardscommissioner@niassembly.gov.uk).

## 8. Reporting, Advice, Support

The Council's approach to suspected fraud is detailed at **Appendix 1**.

The Council has established a Fraud Response Group. The primary role of the Fraud Response Group will be to consider and approve the referral of cases to the PSNI. The group will also provide advice and guidance to the ~~Internal Audit Manager~~HoS-AR on the reporting of investigations to Council Committee(s). The membership of the Fraud Response Group is as follows:

- Chief ~~Executive~~Executive.
- ~~Head of Audit, Risk & Performance~~Internal Audit Manager~~Manager~~.
- Head of HR (when ~~Required~~required);).
- Head of Finance (when ~~Required~~required); and
- Legal Assistance if necessary.

In all cases the council will co-operate fully with the PSNI and pursue prosecutions where possible. In exceptional circumstances the Fraud Response Group may meet with the PSNI to decide who is best placed to undertake ~~the further~~further investigation.

The Council recognises that the primary responsibility for the prevention and detection of fraud rests with management. If anyone believes that others are committing a fraud or suspects

corrupt practices, these concerns should be raised in the first instance directly with line management or to ~~HoS ARP~~ Internal Audit Manager. In some ~~circumstances~~ circumstances, employees may wish ~~can take to take~~ advantage of the protection afforded by the council's Raising Concerns Whistleblowing Policy.

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The ~~HoS ARP~~ Internal Audit Manager will ~~update~~ update Members of the G&A Committee of any fraud (suspected or actual) and raising concerns whistleblowing cases, ~~that~~ which have been notified to the NIAO since the last Committee meeting. Only a high-level summary will be provided to avoid prejudicing any investigation.

The ~~HoS for ARP~~ Internal Audit Manager will also notify the NIAO using the Initial Notification of Frauds Template (**Appendix 3**) and update the LCCC fraud and raising concerns whistleblowing register.

### 9. Specific Areas of Responsibility

The following table outlines the specific responsibilities of council post holders, bodies & others:

-

Stakeholder	Specific Responsibilities
Chief Executive and Chief Financial Officer	Accountable for the effectiveness of the Council's arrangements for countering fraud and corruption in relation to members' interests. Legal duties with regard to the proper administration of financial affairs' including ensuring that the Council's accounting control systems include measures to enable the prevention and detection of inaccuracies and fraud, and the reconstitution of any lost records and a requirement for an adequate and effective internal audit of accounting records and of the system of internal control in accordance with the proper practices in relation to internal control.
Governance & Audit Committee	This body monitors the adequacy and effectiveness of the arrangements in place for ensuring an adequate internal control environment and for combating fraud and corruption.

Fraud Response Group	To refer cases, where necessary, to the PSNI for further investigation. The group will also provide advice and guidance to the <del>HoS-ARP</del> <u>Internal Audit Manager</u> on the reporting of investigations to Council Committee(s).
Elected Members	Comply with the Members' Code of Conduct and related Council policies and procedures, to be aware of the possibility of fraud, corruption and theft, and to report any genuine concerns accordingly.
External Audit	Statutory duty to ensure that the Council has adequate arrangements in place for the prevention and detection of fraud, corruption and theft.
<del>Head of Service Audit, Risk &amp; Performance</del> <u>Internal Audit Manager</u>	Chairs the Fraud Response Group and is responsible for communicating to Members on suspected fraud in accordance with the Governance & Audit Committee's Terms of Reference. Provides advice to the Internal Audit Team on carrying out any investigations of frauds/alleged fraud which have been notified to Council.  Reports to the NIAO on all frauds, proven or suspected, including attempted fraud with LCCC (See template at <b>Appendix 3</b> ).
<del>Audit and Risk Teams</del>	Responsible for developing and maintaining advice and guidance on the Council's approach to managing the risks of fraud, bribery and corruption. The <del>Audit team works under the guidance of the Internal Audit Manager</del> <u>Manager</u> and Risk Team <del>works under the guidance of the Head of Service ARP (HoS-ARP).</del> <u>Internal Audit</u> <del>to compile</del> a risk-based annual Internal Audit Plan designed to evaluate the effectiveness of the control environment. <del>Internal Audit is</del> <u>They are</u> also responsible <del>for</del> <u>for</u> : - <ul style="list-style-type: none"> <li>• Undertaking or provide assistance to the council in undertaking <del>investigations;</del> <u>investigations.</u></li> <li>• Reporting, as appropriate, to the Fraud Response Group and the Governance and Audit Committee on <del>investigations;</del> <u>investigations.</u></li> <li>• Liaising with the PSNI during the course of investigations, where <del>appropriate;</del> <u>appropriate.</u></li> <li>• Co-ordinating the council's input to the National Fraud <del>Initiative;</del> <u>Initiative.</u></li> <li>• <del>Updating</del> <u>Keeping</u> the Fraud Risk Register <del>updated;</del> <u>where new risks are identified to enable services to assess and score accordingly.</u></li> <li>• <del>Updating the LCCC Fraud Register;</del> <u>and</u></li> <li>• Completing the annual fraud questionnaire for NIAO and submit</li> </ul>

	this to the Chief Executive for approval.
Corporate Management, Heads of Service and Managers generally.	To promote staff awareness and ensure that all suspected or reported irregularities are immediately referred to the management or the <del>HoS ARP</del> <u>Internal Audit Manager</u> . To ensure that there are mechanisms in place within their service areas to assess the risk of fraud, <u>bribery</u> , corruption and theft and to reduce these risks by implementing strong internal controls.
<u>LCCC Staff and Elected Members</u>	To comply with council policies and procedures, to be aware of the possibility of fraud and corruption, and to report via the <del>Whistleblowing-Raising Concerns Policy</del> <u>procedure</u> any genuine concerns to management or the <del>HoS ARP</del> <u>Internal Audit Manager</u> .
Public, Service Users, Contractors etc.	To be aware of the possibility of fraud and corruption against the council and to report any genuine concerns / suspicions.

10.

**Strategy Review**

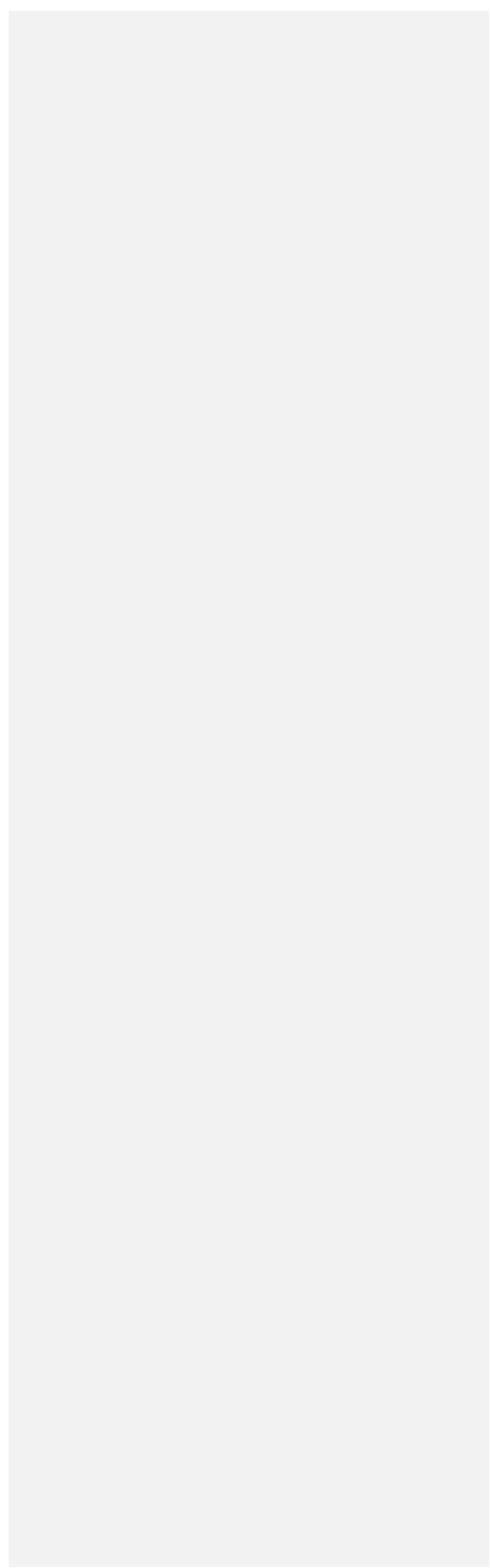
The Council seeks to fulfil its responsibility to reduce fraud, bribery and corruption and protect our resources by a strategic approach consistent with that outlined in both:

- CIPFA's Code of Practice on Managing the Risk of Fraud and Corruption (2014); and
- Local Government Auditor Guidance Fraud Strategy – Fighting Fraud Locally
- Updated guidance issued by NIAO such as mentioned in section 3 or any new CIPFA guidance that may be made available.

The Chief Executive and the council's Governance and Audit Committee will ensure the continuous review and amendment of this strategy, and the action plan contained within it, to ensure that it remains compliant with good practice public sector standards, primarily CIPFA's

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Code of Practice on Managing the Risk of Fraud & Corruption.



## **APPENDIX 1: Fraud Response Plan**

### **1. Introduction**

The Council has prepared this Fraud Response Plan to act as a procedural guide which must be followed in the event of a fraud, or attempted fraud, being suspected. The plan sets out how Council staff, elected members and others should report suspicions of fraud, bribery and corruption and how the Council will handle them.

Adherence to this plan will ensure that timely and effective action is taken to prevent further losses, maximise recovery and minimise recurrence of losses, identify the perpetrators and maximise the likelihood of success if any disciplinary/ legal action is taken.

### **2. What Should An Employee/Agency Worker Do If They Suspect Fraud or Corruption?**

Line managers and staff should be alerted to the possibility that unusual events or transactions could be symptoms of fraud or attempted fraud and that there may be collusion between staff and third parties in cases of fraud.

Typically, there are four main ways in which a suspicion or concern about fraud, bribery and corruption may come to light:

- ~~A concern~~ Concerns raised by a member of staff, elected member or an external ~~party;~~ party.
- Management carrying out their role via specific management checks or during internal audit reviews; reviews.
- The National Fraud Initiative; and
- As a result of a third-party compliance check or External Audit.

It is LCCC policy that there will be consistent handling of all attempted, suspected, or proven fraud cases without regard to the position held or length of service of the individual(s) involved.

Staff who have concerns should report them as soon as possible to their immediate line manager. If there is a concern that management may be involved, the matter should be reported to the next appropriate level.

If staff feel unable to raise a particular matter with their line manager, for whatever reason, they should raise the matter directly with the ~~HoS-ARP~~ Internal Audit Manager or their relevant Director. Alternatively, staff may report their concerns via the LCCC ~~Whistleblowing~~ Raising Concerns Policy.

If these channels have been followed and the member of staff still has concerns, or the member of staff feels that the matter is so serious that they cannot discuss it with any of the above, they should discuss their concerns with the Chief Executive. If staff feel that they cannot discuss their concerns with anyone above, they should refer the matter to the Chair of the LCCC Governance and Audit Committee.

Additionally, management should immediately report the fraud or suspected fraud raised with them

to the ~~HoS ARP~~Internal Audit Manager.

The ~~HoS A~~Internal Audit Manager ~~RP will then will~~ log all suspected frauds within the Council, inform the Local Government Auditor -and provide an update of the outcome to the Local Government Auditor.

An individual raising a concern must not discuss it with colleagues or friends or undertake investigative work.

Line management should not undertake any preliminary ~~enquires~~enquiries until any suspicion has been ~~reported to~~reported to the Internal Audit and advice has been taken from the ~~HoS ARP~~Internal Audit Manager. It is imperative that ~~enquires~~enquiries should not prejudice subsequent investigations or corrupt evidence.

**3. What Should An Elected Member ~~Of The Public~~ Do If They Suspect Fraud or Corruption?**

~~If an A~~ member of the public who suspects fraud involving the LCCC, its staff or contractors is strongly encouraged to report their concerns:

~~By contacting the Councils~~ HoS ARPInternal Audit Manager on 07740494102 028 9244 7663 or by ~~emailing the~~ HoS ARPInternal Audit Manager, elected member has a concern regarding a Council official regarding fraud, bribery or corruption they should contact the Chief Executive or the Internal Audit Manager.

The Internal Audit Manager will log all suspected frauds within the Council, inform the Local Government Auditor and provide an update of the outcome to the Local Government Auditor.

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**4. What Should ~~Initial~~ Contractors, Consultants and Suppliers Do If They Suspect Fraud or Corruption?**

If a Contractor, Consultant or Supplier has a concern regarding the involvement of a Council official in suspected fraud, bribery or corruption they should contact the Chief Executive or the Internal Audit Manager.

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Concerns may also be raised via the Raising Concerns link on the Council website.

The Internal Audit Manager will be advised of concerns and log all suspected frauds within the Council, inform the Local Government Auditor and provide an update of the outcome to the Local Government Auditor. **Investigation**

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**5. What Should Members Of The Public Do If They Suspect Fraud or Corruption?**

If a member of the public becomes aware of suspected fraud, corruption or bribery taking place within the Council they should raise their concerns via the Raising Concerns link on the Council's website.

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The Internal Audit Manager will log all suspected frauds within the Council, inform the Local Government Auditor and provide an update of the outcome to the Local Government Auditor.

**6. Initial Investigation**

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On receiving allegations of suspected fraud or other financial impropriety, the ~~HoS ARP~~ Internal Audit Manager must be notified. It will carry out some initial enquiries known as a fact finding or preliminary investigation will be carried out. This is to determine the potential validity of the allegations and to evaluate whether fuller investigation is or may be required. ~~If a further investigation is required~~ The Internal Audit Manager HoS ARP will immediately notify the Local Government Auditor of the concerns raised ~~and include within the Council's Fraud Register.~~ Governance and Audit Committee Members will also be briefed of the allegation at the next G&A Committee (high level summary as to not prejudice any future investigation).

Cases which do not relate to allegations of fraud will be referred directly to management to consider further operational investigation and or advise on control weaknesses that may need addressed.

The ~~Internal Audit Manager HoS ARP~~ or Internal Audit Unit may complete the preliminary ~~initial~~ investigation or will appoint someone to conduct a ~~preliminary~~ initial but urgent fact-finding exercise. The appointee should not be conflicted in any way in relation to the matter under investigation. This discreet preliminary enquiry should be carried out as soon as possible.

The investigating officer will conduct an initial discreet enquiry, without alerting the suspect, to ascertain the facts surrounding the suspicion or discovery of fraud. The main purpose of this enquiry is to confirm or repudiate, as far as possible, the suspicions which have arisen. The preliminary enquiry should cover:

- the type of suspected irregularity suspected or realised and the circumstances that led to it e.g. established working procedures not being adhered to, officers completing work that they are not ~~authorised~~ authorised to do, etc.;
- how the suspected fraud was realised.;
- the value and type of resource lost – actual or estimated.;
- the period over which ~~the suspected~~ suspected fraud may have occurred, if ~~known~~ known, i.e. the date it was realised.;
- names of staff who may be linked with the suspected fraud.;
- ~~whether~~ Whether collusion with others is suspected e.g. other employees, ~~persons~~ people contracted by the Council, persons who do not have any legitimate business interest with the ~~Council~~ Council.
- names of all officers who have been involved in the investigation so ~~far~~ far.
- action taken by individual managers and the individual who reported the suspicion e.g. discussions, explanations sought; and
- Any other information or observations that might be useful to the investigation.

All documentation relating to the enquiry will be securely held in a safe place. If, ~~as a result of~~ because of, the preliminary enquiry, it is clear that fraud has not taken place the case will be closed, with a clear reason for closure recorded.

If the preliminary enquiry confirms that a fraud has been attempted or perpetrated and staff are implicated at this stage, an investigation under the Disciplinary Procedure should be initiated and if there is a potential charge of gross misconduct, suspension should be considered.

## 5.7. Detailed Investigation

Where initial enquiries indicate that suspected fraud or other financial impropriety may have occurred the Internal Audit Manager ~~HoS ARP~~ will:

- initiate a detailed confidential investigation and develop terms of reference for the investigation (including allocation of resources);
- take immediate steps to safeguard any evidence and prevent the risk of losses;
- consider recommending to the Council's Fraud Response Group (see below) immediate referral to the PSNI; and
- Liaise with the HoS of Finance, HoS for HR, and Legal Services, as appropriate, regarding the above issues.

The Internal Audit Manager ~~HoS ARP~~ and the Internal Audit Unit as per the approved Internal Audit Chapter will have full and unrestricted access to all necessary records, systems, properties and personnel. All council furniture and contents, including desks and computers are open to inspection when there is reasonable suspicion of a dishonest or fraudulent activity which makes such inspection appropriate. There is no assumption of privacy as per the relevant UK legislation and guidance such as the following: -

Key UK Government guidance includes:

- Bribery Act guidance published by the Ministry of Justice in 2012 and
- Home Office and Cabinet Office guidance published in 2016.

Also

- Schedule 2 of the GDPR – Prevention and Detection of a crime.
- CIPFA Counter Fraud Centre guidance – 6. Lawful Business Practice Regs (interception of communications) 2000 – Prevention and Detection of a crime.

Depending on the conclusions reached by the detailed investigation, the following actions are all possible outcomes:

- no action, if there is insufficient evidence to support the allegations.
- recommendation to the Fraud Response Group to refer the matter to the PSNI if there is sufficient evidence that a criminal act may have occurred.
- possible action under disciplinary procedures, which may include suspension or relocation of staff pending further investigations.
- referral of the case to management to investigate under the Disciplinary Procedure.
- Formal disciplinary action may be taken regarding staff who are found, after investigation, to have increased the likelihood of fraud ~~as a result of~~ because of a serious dereliction of duty.
- Recommendations to management to improve internal controls in the area(s) affected.

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### 6.8. Preservation of Evidence

A key consideration in any investigation must always be how to secure or preserve sufficient evidence to prove fraud. For the purposes of criminal proceedings, the admissibility of evidence is governed by the Police and Criminal Evidence (Northern Ireland) Order 1989 (PACE). Although PACE does not apply in civil or disciplinary proceedings it should nevertheless be regarded as 'best practice'.

If an individual is charged with a criminal offence (and this may not have been planned at the outset of the investigation), all investigations and relevant evidence will be open to discovery by that individual's defense. It is therefore vital that detailed and accurate records are kept from the outset, including accurate notes of when, where and from whom the evidence was obtained and by whom.

### 7.9. Physical Evidence

It is vitally important to have arrangements in place for the safe and secure storage of evidence and other investigative material. Control should be taken of evidence before the opportunity arises for it to be removed or destroyed by the suspect(s). Physical evidence may therefore have to be seized at an early stage of the investigation before any witness statements are collected or interviews conducted. Similarly, electronic evidence must be secured.

If an investigation of an internal fraud is being conducted, the Council has a right to access its own records, devices and other relevant assets and may bring disciplinary action against any member of staff who tries to prevent this.

When taking control of physical evidence, original material is essential – photocopies are not acceptable. Records should be kept of the time that it was taken and the place that it was taken from. If evidence consists of several items, each one should be tagged with a reference number which corresponds with the written record. Taking photographs and/or video recordings of the scene may also prove helpful.

When conducting investigations, it is essential to be mindful of the provisions of the Human Rights Act, in particular the right to privacy and to a fair trial or hearing. It is therefore important that investigations are carried out in a proportionate manner and not without sufficient evidence. Any officer who is considering conducting such an investigation, should seek advice prior to beginning.

### 8.10. Interviews

Any decisions about interviewing suspects, including police involvement, will be taken by the Internal Audit Manager HoS-ARP and the Fraud Response Group, if appropriate. All interviews will be properly conducted in controlled conditions. Detailed notes must be kept of questions and answers. A statement will be produced and sent to the interviewee to sign as a true statement of the interview.

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### 9.11. Dealing with Employees Under Suspicion

If a member of staff is suspected of involvement in a fraudulent activity, the Internal Audit Manager HoS-ARP or the Fraud Response Group if appropriate, will consider the appropriate course of action. This may range from close overt monitoring/supervision to precautionary suspension; however, it should be noted that suspension does not in any way imply guilt.

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If a decision to suspend is taken, the individual(s) will be removed from the premises in a tactful & respectful manner and will not be allowed access to office assets or records – manual or electronic. Employees who are allowed to remain at work may be kept under constant overt surveillance. If necessary, an immediate search of the employee’s work area and storage cabinets will be carried out. This should must be carried out with discretion.

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**40.12. Communication & Action on Conclusion of an Investigation**

The following communication should be observed in all cases:

- The Governance and Audit Committee should be kept informed as appropriate; (care will be taken as to the detail that is reported so as not to prejudice any future internal or external investigations).
- A lessons-learned document should be circulated throughout the Council, if appropriate.
- This Fraud Response Plan will be reviewed to determine whether it needs to be updated in light of the findings from the investigation; and
- Consideration should be given to informing other public sector organisations, e.g. other Government Departments, NIAO, Other Councils and grant paying organisations.

The Council will seek to recover any funds or assets lost through fraud where possible. Recovery may also include any legal costs incurred during the investigation. If necessary, this may be through civil action.

**APPENDIX 2: Local Government Fraud Strategy – “Fighting Fraud Locally”, & the three key themes of Acknowledge / Prevent / Pursue**

<b>ACKNOWLEDGE</b>	<b>Committing Support</b>	The council's commitment to tackling fraud threat is clear. There are strong anti – fraud arrangements and support those who come forward to report suspected fraud. All reports will be treated seriously and acted upon. Staff awareness of fraud risks will be kept up to date through e-learning and other training. The council's suite of counter fraud strategies, policies and procedures is widely published and kept under regular review.
<b>GE</b>	<b>Assessing Risks</b>	The council will continuously assess those areas most vulnerable to the risk of fraud as part of its risk management arrangements. These risk assessments will inform our internal controls and counter fraud priorities. Elected members and senior officers have an important role to play in scrutinising risk management procedures and risk registers. Additionally, the Internal Audit Service will carry out assurance work in areas of higher risk to assist management in preventing fraudulent activity.
<b>GE</b>	<b>Robust Response</b>	The council will strengthen measures to prevent fraud. The Internal Audit service will work with management and all internal associates such as HR, Finance, and policy makers to ensure new and existing systems and policy initiatives are adequately fraud proofed.

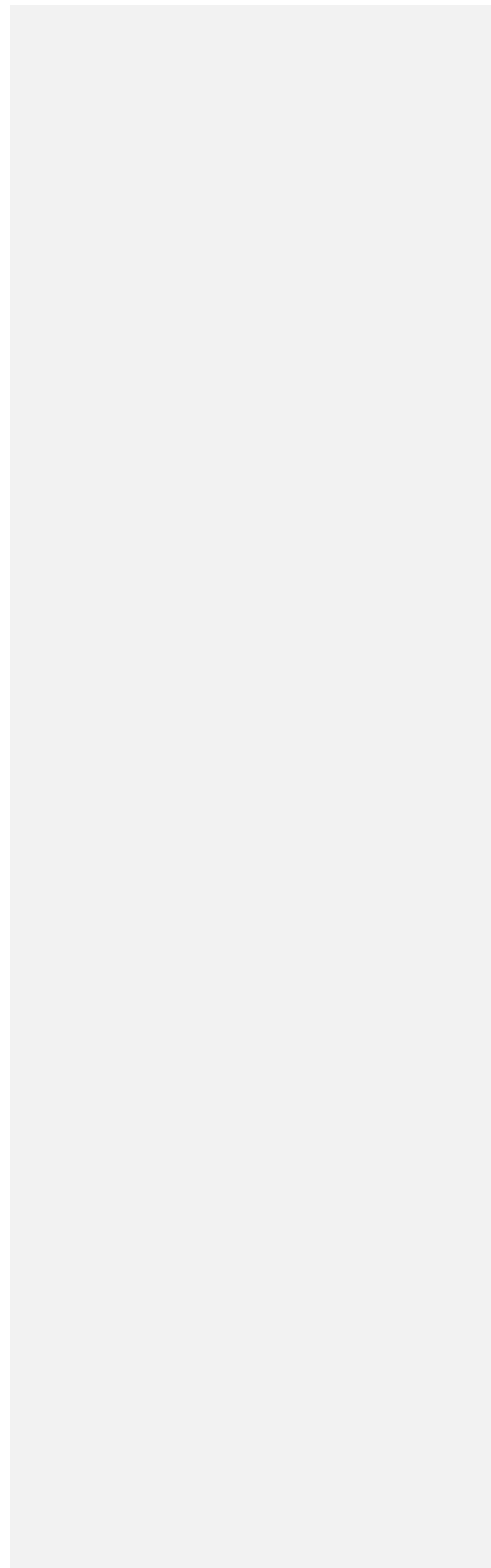
<b>PREVENT</b>	<b>Better Use of Information Technology</b>	The council will make use of data and analytical software to prevent and detect fraudulent activity. It will look for opportunities to share data and fraud intelligence to increase our capability to uncover potential and actual fraud. The council will play an active part in the biennial National Fraud Initiative (NFI) data matching exercise.
	<b>Fraud Controls and Processes</b>	The council will educate managers with regard to their responsibilities for operating effective internal controls within their service areas. The council will provide strong management and good governance that provides scrutiny and independent challenge to risks. Management controls will be constantly developed. Routine Internal Audit Service reviews will seek to highlight vulnerabilities in the control environment and make recommendations for improvement.
	<b>Anti-Fraud Culture</b>	The council will promote and develop a strong counter fraud culture, raise awareness, provide a fraud e-learning tool and provide information on all aspects of our counter fraud work.

<b>PURSUE</b>	<b>Fraud Recovery</b>	A crucial element of the response to tackling fraud is recovering any monies lost through fraud. This is an important part of the council's strategy and will be rigorously pursued, where possible.
	<b>Punishing Fraudsters</b>	The council will apply sanctions to individuals or organisations where an investigation reveals fraudulent activity. This may include legal action, criminal and/or disciplinary action and seeking damages.
	<b>Enforcement</b>	All instances of suspected fraud will be investigated, with instances of suspected fraud being detected through; planned proactive work, referred from internal or external stakeholders, or received via the whistleblowing procedure.  The council will work with internal / external organisations, including law enforcement agencies in investigating and prosecuting suspected fraud.

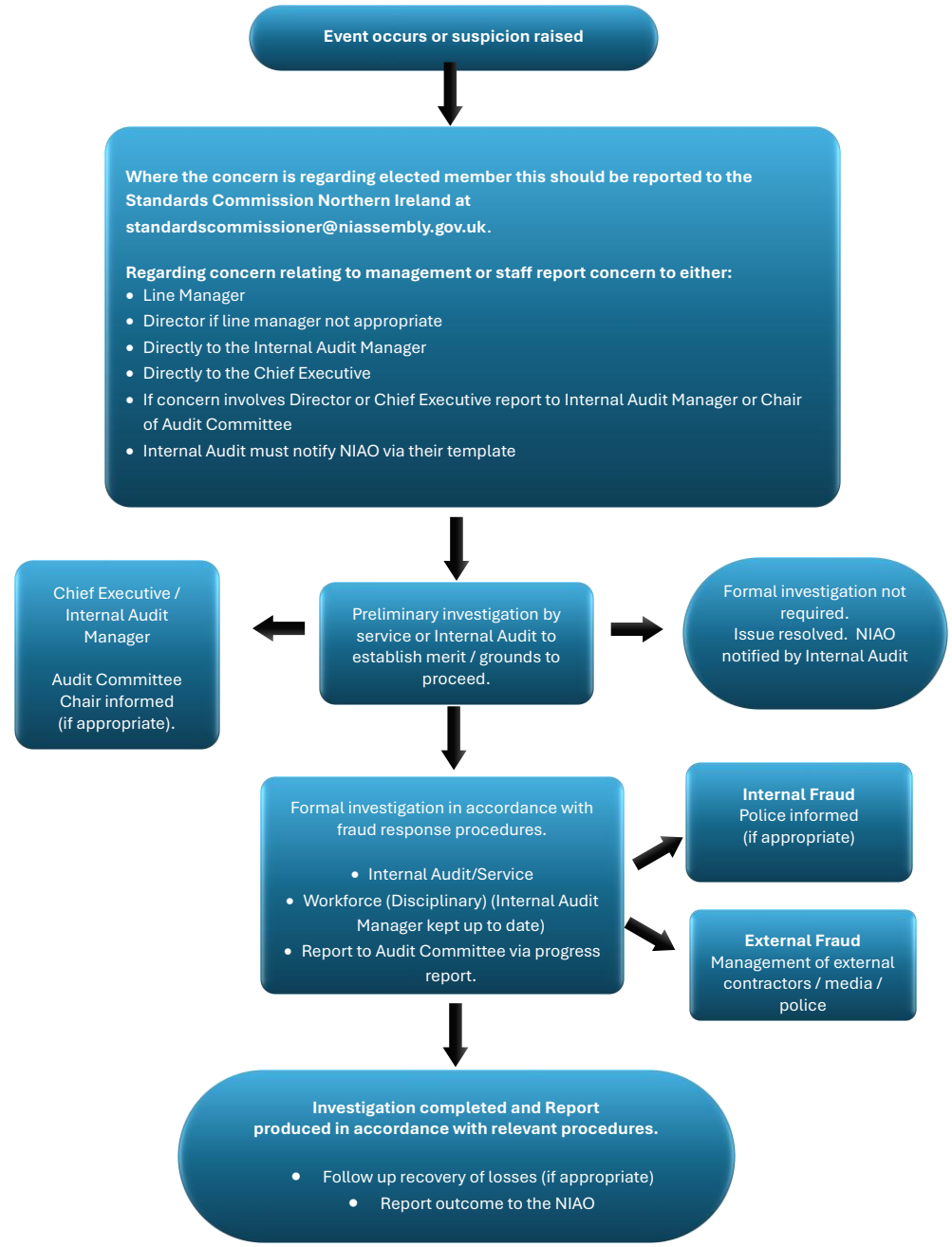
**APPENDIX 3: Initial Notification of Frauds to the NIAO Template**

1	Fraud Reference Number (LCCC unique identifier)	
2	Name of body (e.g. specific district council or other local government body)	
3	Name of department/division in district council/ other local government body	
4	Specific location of fraud (e.g. name of depot)	
5	Date fraud or suspected fraud discovered?	
6	Is the case being reported as actual, suspected or attempted fraud?	
7	Type of fraud?	
8	What was the cause of the fraud?	
9	Brief outline of case	

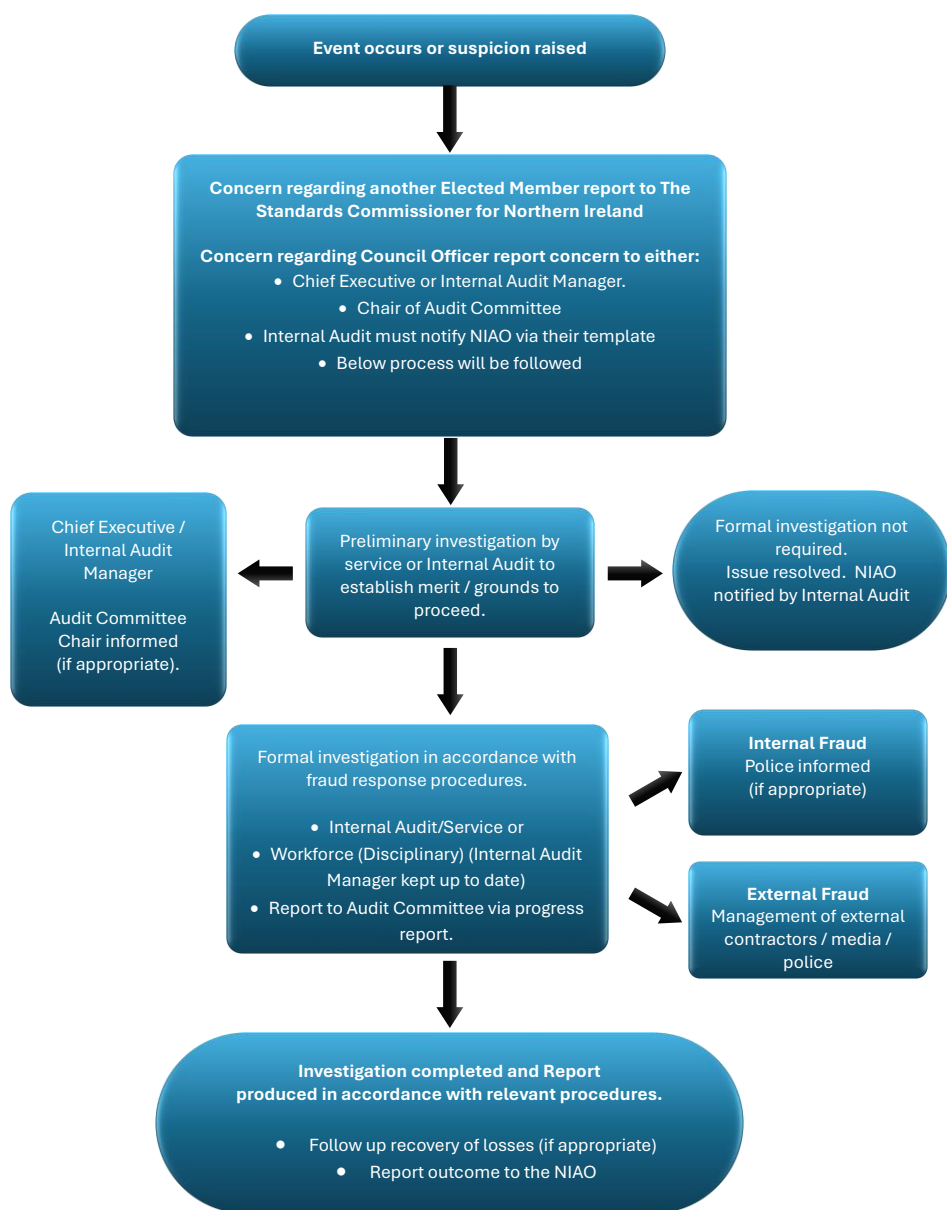
10	Amount of loss or estimated value	
11	How was the fraud discovered?	
12	Who perpetrated the fraud?	
13	Has PSNI been notified?	
14	Any other action taken so far?	
15	Please give contact details for this fraud in case follow up is required	



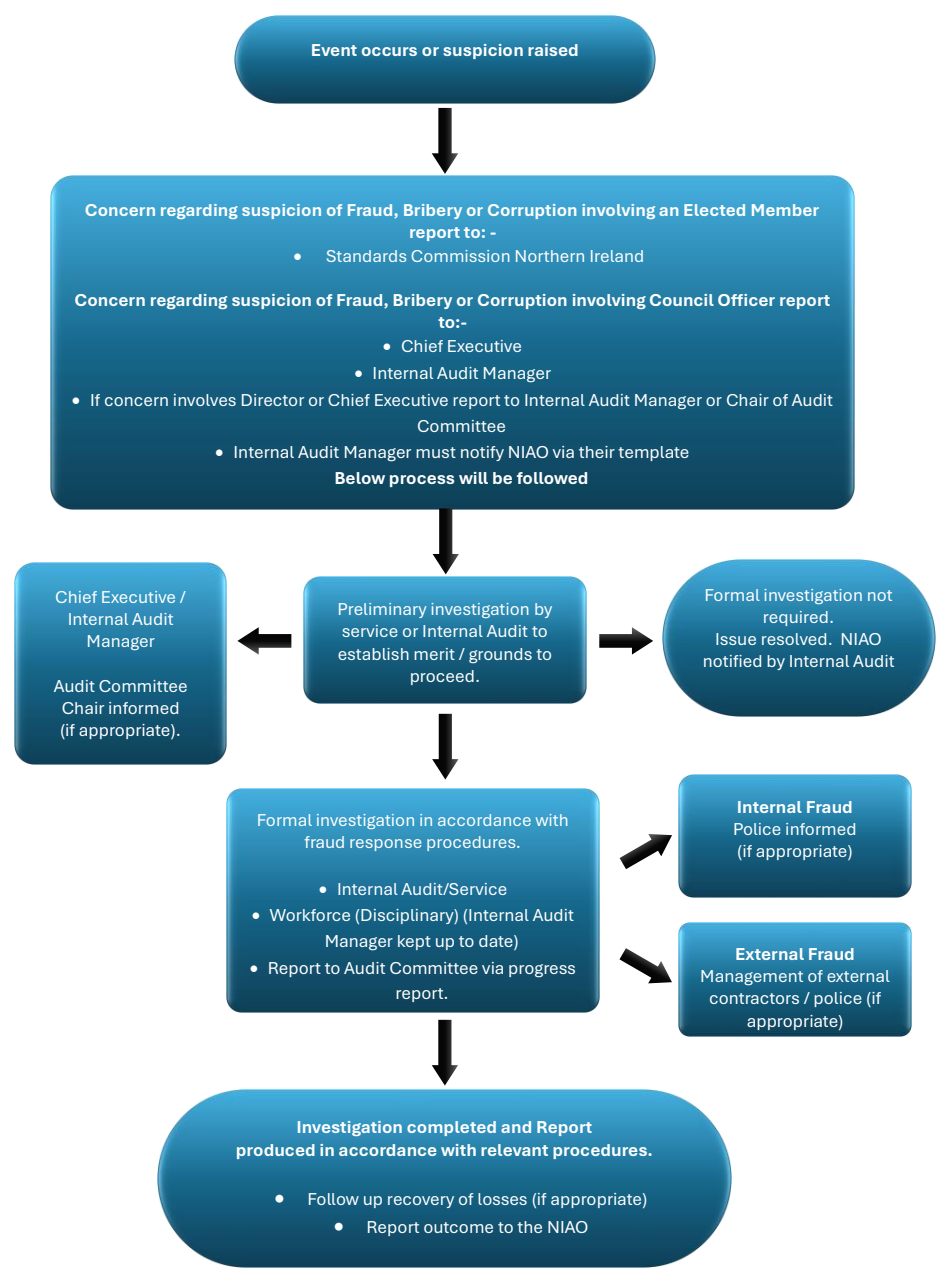
### Appendix 4 - Employee Reporting - Fraud Response Flow Chart



### Appendix 5 - Elected Member Reporting - Fraud Response Flow Chart



### Appendix 6 - Contractors, Consultants or Suppliers Reporting - Fraud Response Flow Chart



### Appendix 7 - Members of the Public/Service Users Reporting - Fraud Response Flow Chart



## Lisburn & Castlereagh City Council

### Section 75 Equality and Good Relations Screening

#### Part 1. Information about the activity/policy/project being screened

##### Name of the activity/policy/project

Anti-Fraud, Bribery and Corruption Policy Statement and Strategy

##### Is this activity/policy/project – an existing one, a revised one, a new one?

This is a revised policy

**What are the intended aims/outcomes the activity/policy/project is trying to achieve?** To provide a procedural guide for reporting and handling suspected fraud, bribery, or corruption involving the Council, its staff, or contractors. It applies to all employees, ensuring consistent handling of cases and protection for those reporting concerns in good faith.

**Who is the activity/policy/project targeted at and who will benefit? Are there any expected benefits for specific Section 75 categories/groups from this activity/policy/project? If so, please explain.**

The policy is targeted at All Council employees, agency staff and others working within Council premises. It is not applicable to the general public.

**Who initiated or developed the activity/policy/project?**

The policy was revised by Internal Audit, in line with NIAO guidance.

**Who owns and who implements the activity/policy/project?**

The policy is owned by the Chief Executive's Office, and implemented by relevant directors and HR staff, with Internal Audit oversight as required.

**Are there any factors which could contribute to/detract from the intended aim/outcome of the activity/policy/project?** No

**If yes, give brief details of any significant factors.**

**Who are the internal and external stakeholders (actual or potential) that the activity/policy/project will impact upon? Delete if not applicable**

Staff will be impacted by this strategy.

**Available evidence**

**What evidence/information (qualitative and quantitative) have you gathered or considered to inform this activity/policy? Specify details for each Section 75 category.** Internal employee data has been considered for all Section 75 groups, but it is incomplete. Work is ongoing to improve data collection and reporting through the new HR system.

Section 75 Category	Details of evidence/information
Religious Belief	Protestant – 63.9% Roman Catholic – 23.5% Non-determined – 12.6%
Political Opinion	No relevant information
Racial Group	Indian – 0.1% Other – 0.4% Unknown – 15.4% White – 84.2%
Age	<18 years – 1.3% 18-25 – 15.8% 26-35 – 14.3% 36-45 – 22.3% 46-55 – 24.7% 56+ - 21.5%
Marital Status	Married/Civil Partnership – 39.2% Divorced/Separate 3.2% Single – 41.4% Widow 0.2% Unknown – 16.0%

Sexual Orientation	LGBTQ – 1.1% Heterosexual – 25.7% Unknown – 73.2%
Men & Women Generally	Male – 54.6% Female – 45.4%
Disability	Declared disability – 0.66%
People with and without Dependants	Have dependants – 22.1% No dependants – 35.4% Unknown – 42.5 %

**Taking into account the information referred to above, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular activity/policy/decision? Specify details for each of the Section 75 categories**

<b>Section 75 Category</b>	<b>Details of needs/experiences/priorities</b>
Religious Belief Political Opinion	No differential needs identified, policy applies equally to all staff and there is assurance of strict confidentiality and protection from victimisation.
Racial Group	Information and reporting routes should be accessible to staff whose first language is not English. Access to clear information and support if needed to understand the process or complete reporting documentation.
Age Marital Status Sexual Orientation Men & Women Generally	No differential needs identified, policy applies equally to all staff and there is assurance of strict confidentiality and protection from victimisation.

Disability	Information and reporting routes should be accessible to staff with sensory, cognitive, or mental health disabilities.
People with and without Dependants	No differential needs identified, policy applies equally to all staff.

**Part 2. Screening questions**

**1 What is the likely impact on equality of opportunity for those affected by this activity/policy, for each of the Section 75 equality categories?**

Section 75 Category	Details of likely impact – will it be positive or negative? If none anticipated, say none	Level of impact - major or minor* - see guidance below
Religious Belief	No differential or adverse impact has been identified.	None
Political Opinion		
Racial Group		
Age		
Marital Status		
Sexual Orientation		
Men & Women Generally		
Disability		
People with and without Dependants		

\* See Appendix 1 for details.

**2(a) Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?**

Section 75 Category	IF Yes, provide details	If No, provide details
Religious Belief	No further opportunities identified. The policy ensures accessible, confidential reporting for all staff and promotes awareness of fraud procedures and an ethical workplace culture.	
Political Opinion		
Racial Group		
Age		
Marital Status		
Sexual Orientation		
Men & Women Generally		
Disability		
People with and without Dependents		

**Equality Action Plan 2021-2025**

Does the activity/policy/project being screened relate to an action in the Equality Action Plan 2021-2025?

No

**2(b) DDA Disability Duties (see Disability Action Plan 2021-2025)**

Does this policy/activity present opportunities to contribute to the actions in our Disability Action Plan:

No

**3 To what extent is the activity/policy/project likely to impact on good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	Details of likely impact. Will it be positive or negative? [if no specific impact identified, say none]	Level of impact – minor/major*

Religious Belief	None	N/A
Political Opinion		
Racial Group		

\*See Appendix 1 for details.

**4 Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	IF Yes, provide details	If No, provide details
Religious Belief		No opportunities identified, the reporting process is fair, impartial and free from bias.
Political Opinion		
Racial Group		

**Multiple identity**

There is no data to suggest that employees with multiple identities (e.g. disabled staff from minority ethnic backgrounds, LGBTQ+ older staff, etc.) would experience a differential impact. All staff are subject to the same reporting and investigative procedures, with confidentiality and protection assured.

### Part 3. Screening decision/outcome

Equality and good relations screening is used to identify whether there is a need to carry out a **full equality impact assessment** on a proposed policy or project.

There are 3 possible outcomes:

- 1) **Screen out** - no need for a full equality impact assessment and no mitigations required because no relevance to equality, no negative impacts identified or only very minor positive impacts for all groups. This may be the case for a purely technical policy for example.
- 2) **Screen out with mitigation** - no need for a full equality impact assessment but some minor potential impacts or opportunities to better promote equality and/or good relations identified, so mitigations appropriate. Much of our activity will probably fall into this category.
- 3) **Screen in for full equality impact assessment** – potential for significant and/or potentially negative impact identified for one or more groups so proposal requires a more detailed impact assessment. [See Equality Commission guidance on justifying a screening decision.]

**Choose only one of these** and provide reasons for your decision and ensure evidence is noted/referenced for any decision reached.

Screening Decision/Outcome	Reasons/Evidence
<p>Option 1</p> <p><b>Screen out</b> – no equality impact assessment and no mitigation required [go to Monitoring section]</p>	<p>The policy applies consistently to all staff, with clear protections for confidentiality, fairness, and non-victimisation. Identified needs (accessibility for disabled staff and support for those whose first language is not English) are addressed through flexible reporting options, reasonable adjustments, and clear processes. As these needs are met within existing procedures, no further mitigation is required.</p>
<p>Option 2</p> <p><b>Screen out with mitigation</b> – some potential impacts identified but they can be addressed with appropriate mitigation or some opportunities to</p>	

<p>better promote equality and/or good relations identified [complete mitigation section below]</p>	
<p>Option 3</p> <p><b>Screen in</b> for a full Equality Impact Assessment (EQIA)</p> <p>[If option 3, complete timetabling and prioritising section below]</p>	

**Mitigation (Only relevant to Option 2)**

**Can the activity/policy/project plan be amended or an alternative activity/policy introduced to better promote equality of opportunity and/or good relations? N/A**

**Timetabling and prioritising for full EQIA (only relevant to Option 3)**

If the activity/policy has been ‘**screened in**’ for full equality impact assessment, give details of any factors to be considered and the next steps for progressing the EQIA, including a proposed timetable.

Is the activity/policy affected by timetables established by other relevant public authorities? N/A


**Part 4. Monitoring**

Public authorities should consider the guidance contained in the Commission’s Monitoring Guidance for Use by Public Authorities (July 2007).

Effective monitoring will help a public authority identify any future adverse impact arising from the activity/policy which may lead the public authority to conduct an equality impact assessment, as well as help with future planning and activity/policy development.

**What will be monitored and how? What specific equality monitoring will be done? Who will undertake and sign-off the monitoring of this activity/policy and on what frequency?** Monitoring will be through normal HR systems. Where disclosures are not anonymous, equality data (e.g., disability, ethnicity) may be recorded to review trends. Oversight is by the Internal Audit Manager and relevant Director.

**Part 5 - Approval and authorisation**

	<b>Position/Job Title</b>	<b>Date</b>
Screened by: Maureen Leonard	Internal Audit Manager	03/12/2025
Reviewed by: Annie Wilson	Equality Officer	03/12/2025
<b>Approved by:</b>		31/03/2026

Note: On completion of the screening exercise, a copy of the completed Screening Report should be:

- approved and ‘signed off’ by a senior manager responsible for the activity/policy
- included with Committee reports, as appropriate
- sent to the Equality Officer for the quarterly screening report to consultees, internal reporting and publishing on the LCCC website
- shared with relevant colleagues
- made available to the public on request.

Evidence and documents referenced in the screening report should also be available if requested.

## Appendix 1 – Equality Commission guidance on equality impact

### \*Major impact:

- a) The policy/project is significant in terms of its strategic importance;
- b) Potential equality matters are unknown, because, for example, there is insufficient data upon which to make an assessment or because they are complex, and it would be appropriate to conduct an equality impact assessment in order to better assess them;
- c) Potential equality and/or good relations impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
- d) Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy about which there are concerns amongst affected individuals and representative groups, for example in respect of multiple identities;
- e) The policy is likely to be challenged by way of judicial review;
- f) The policy is significant in terms of expenditure.

### Minor impact

- a) The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
- b) The policy, or certain proposals within it, are potentially unlawfully discriminatory, but this possibility can readily and easily be eliminated by making appropriate changes to the policy or by adopting appropriate mitigating measures;
- c) Any asymmetrical equality impacts caused by the policy are intentional because they are specifically designed to promote equality of opportunity for particular groups of disadvantaged people;
- d) By amending the policy there are better opportunities to better promote equality of opportunity and/or good relations.

### No impact (none)

- a) The policy has no relevance to equality of opportunity or good relations;
- b) The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity or good relations for people within the equality and good relations categories.

<b>Committee:</b>	Governance and Audit Committee
<b>Date:</b>	11 <sup>th</sup> June 2026
<b>Report from:</b>	Internal Audit Manager

<b>Item for:</b>	<b>Decision</b>
<b>Subject:</b>	Raising Concerns Policy

1.0	<p><b><u>Background and Key Issues</u></b></p> <p>This is not a new policy. The purpose of this report is to bring the refreshed Raising Concerns Policy, formerly known as the Whistleblowing Policy to the attention of the Governance and Audit Committee for approval.</p> <p>This policy was updated by the Policy Officer and reviewed by the Internal Audit Manager. The policy has been to the CMT on previous occasions with Senior Managers comments addressed where relevant. It has been through HOST and the Trade Unions.</p> <p>This policy is internal to the council and aimed at ALL staff including agency staff and casual workers. A separate external policy will be developed for the public to raise concerns. External concerns are currently dealt with through the council's complaints policy.</p> <p>The amendments are in line with NIAO Guidance. A copy of which has been distributed for noting.</p>	
2.0	<p><b><u>Recommendation</u></b></p> <p><b>Approve the policy.</b></p>	
3.0	<p><b><u>Finance and Resource Implications</u></b></p> <p>None</p>	
4.0	<p><b><u>Equality/Good Relations and Rural Needs Impact Assessments</u></b></p>	
4.1	Has an equality and good relations screening been carried out?	YES
4.2	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out.	N/A
	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	Brief summary of the key issues identified and proposed mitigating actions <b><u>or</u></b> rationale why the screening was not carried out.	N/A
	It is not a new policy. Only the name and a few updates to updated guidance documentation has been changed.	

**Appendices: 1 Raising Concerns Policy. 2 Equality and Good Relations Screening**



## RAISING CONCERNS POLICY AND PROCEDURES

Version	Revision Date	Revised by	Section Revised
1.0	December 2016	Transition/Project Officer	Re – Draft of two former Council policies.
1.1	October 2018	Policy Officer	Revision of existing policy in line with legal updates.
1.2	<del>January August 2026</del> 5	Policy Officer/ <u>Internal Audit Manager</u>	Revision in line with revision timeframe for policies and NIAO guidance for change of name from Whistleblowing to Raising Concerns

Document Owner: Chief Executive.	Document No: V1.2	Status:	Date Approved at Committee:	Date Approved at Council:
Security Classification: Unrestricted	Next Review Date: June 2026	Version V1.3	Department: Chief Executive's Department	Available from: Staff Intranet

## RAISING CONCERNS: POLICY AND PROCEDURES

### 1. Introduction

Lisburn & Castlereagh City Council is committed to providing the highest possible standards of openness and accountability in the delivery of its services. However, the Council recognises that in spite of its efforts, concerns about impropriety or malpractice may still arise.

This policy, formerly the Whistleblowing Policy, has been updated in line with Northern Ireland Audit Office guidelines.

The purpose of this policy is to reassure staff **agency workers/casual workers** that they can raise genuinely held concerns about potential wrongdoing in confidence, through a clear internal reporting process, without putting their position at risk. The policy also sets out the procedures for making disclosures as well as recording and investigating allegations or concerns.

**Commented [ML1]:** Added in for clarity regarding question from Trade Unions

### 2. Types of Concern Covered

This policy does not deal with complaints about the Council's processes, performance, or standards of service, for which separate procedures exist. Instead, it relates to concerns about serious malpractice, abuse, neglect, or wrongdoing, notably when the interests of others or the Council are at risk. Concerns of this nature are likely to involve matters such as unlawful or inappropriate conduct, serious safety or security deficiencies, breaches of confidence, or danger to the public or environment.

Staff concerned about an incidence or suspicion of fraud, may also wish to refer to the Council's [Anti-Fraud, Bribery & Corruption Policy Statement & Strategy](#). This document highlights the procedures whereby suspected instances of this nature may be reported and dealt with.

**Commented [ML2]:** A new link will be put here once the updated Anti-Fraud, Bribery & Corruption Policy Statement and Strategy has been approved

If you are an employee of the Council and wish to make a complaint about your employment, or how you have been treated personally, please use the [Council's Grievance Procedure or, depending on the circumstances, the Council's Dignity at Work - Staff intranet](#).

### 3. Reporting Concerns:

#### 3.1 Assurance

The Council is committed to taking raising concerns seriously. If you raise a genuine concern under these arrangements, you will be protected by the [Public Interest Disclosure \(NI\) Order 1998](#) and will not be at risk of losing your job or suffering any form of retribution. Provided you can demonstrate you are acting in the public interest, it will not matter if you are genuinely mistaken.

However, this assurance does not extend to anyone where it can be shown that they are acting for purely malicious intent or personal gain. Making allegations of this nature which are found to have no foundation **and have been made in bad faith** may be regarded by the Council as a serious disciplinary offence and treated accordingly.

**Commented [ML3]:** As per request from trade unions

#### 3.2 Confidentiality

Should you wish to raise a matter in confidence, please ensure that this is made clear from the outset, so that appropriate arrangements can be made.

Be assured, the Council will not tolerate the harassment or victimisation of anyone who raises a genuine concern. However, we recognise that there may be circumstances when you would, at least

initially, prefer to speak in confidence to an officer of the Council. If this is the case, please say so at the outset. If you ask us not to disclose your identity, we will not do so without your consent, unless required to by law.

You should be aware, however, that there may be times when we are unable to resolve a concern without revealing your identity, for example: -

- Where your personal evidence is essential, or,
- Where an investigation leads to criminal proceedings, and you, as a complainant, may be called to give evidence in a court of law.

In such cases, we will discuss with you in advance whether and how the matter can best proceed.

### 3.3 Anonymity

Disclosures can be made anonymously, but it should be borne in mind that this will make it much more difficult for us to look into the matter, to protect your position, or to give you a response to your concerns. Whilst anonymous reports will be considered, we can only apply raising concerns arrangements more fully if we know who you are and can discuss the matter with you in confidence.

### 3.4 How to raise a concern

Please refer to the flowcharts which provide a graphical representation of the process at Appendix 2, pages 10 to 15.

Please remember that you do not need to have firm evidence of malpractice before raising a concern. However, we do ask that you explain, as fully as you can, the information or circumstances that give rise to your concern. There are four options available to you, should you wish to raise a concern.

**StepOption 1** – Take Advice: Deciding to make a disclosure is a serious step and should not be undertaken lightly. Those considering undertaking such a step are strongly encouraged to seek an independent opinion on the best way to proceed.

**Commented [ML4]:** Previously stated as option 1 but changed to Step 1. Same for the next few paragraphs

In addition to your own sources, advice is available from an independent, charitable organisation called “Protect”, which runs a free, confidential advice line. They provide advice on how to safely and effectively raise a concern. The charity can be contacted as follows: -

**Telephone helpline: 020 3117 2520.**

(Mon, Tue, Thurs: 9:30am – 1pm, 2pm – 5:30pm; Wed, Fri: 9:30am – 1pm. Closed on bank holidays).

**Website:** [Protect – Speak up stop harm – \(protect-advice.org.uk\)](http://protect-advice.org.uk)

See flowchart 1 on page [10/11/10/11](#) for details.

**Commented [ML5]:** Page numbers changed to show where flowcharts are

**-StepOption 2 (1)** – Raise the issue with your Line Manager: If possible, you should raise concerns about risk, malpractice, or wrongdoing at work, first with your immediate line manager. You can raise concerns verbally, via the telephone or by arranging to meet an appropriate council officer (see below, step 3). Alternatively, concerns may be raised through recognised trade unions.

Managers should record the details of **all** such concerns by capturing the background and history of the concern(s) and by providing an outline of what was said, giving names, dates, times, and places where possible. They should also detail why particular concerns are thought to exist and provide any other details they believe to be relevant.

Managers should ask the worker as early as possible in the conversation if they wish the matter to be dealt with under the raising concerns policy and procedure. They should record that this was asked, along with the response and, if affirmed, that the person or persons raising the concerns should be afforded the protection of the law and the council's raising concerns policy.

To assist, a report format template is provided at Appendix 1, pages 8 and 9. This is not mandatory but is provided to assist the potential discloser and the manager to structure their conversation effectively and to help provide a level of protection to each should the matter progress to a more substantial level.

Line Management will record your concerns and inform the relevant Director of the disclosure in confidence. **The Internal Audit Manager will also be informed of the disclosure for recording purposes.**

Should you feel unable to approach your first line manager with your concerns, you are encouraged to approach the second line manager, or the person who most closely fulfils that role. The process for disclosing your concerns to the second line manager is the same as that for the first. Both are set out in flowcharts 2 (1) and 2 (2) on pages 12 and 13.

**StepOption 2 (2)** – Raise Concerns with second Line Manager - If, for whatever reason, you feel that raising a concern with your line manager is not appropriate or has not worked, please raise the matter with your second line manager, that is your manager's manager.

Again, this can be done verbally or in writing and notes should be made of any meeting where concerns are raised and should include dates, times, and an outline of what was said.

**StepOption 3** - Raise Concerns with Designated ManagerBody. This may be another manager who you feel able to speak to other than 1<sup>st</sup> or 2<sup>nd</sup> line manager. This may be Head of Service, Director, HR Manager or directly to the Internal Audit Manager. See flowchart on page 14

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***The Council would prefer to hear about your concerns directly but recognises that there may be circumstances in which you may instead wish to report a serious concern about wrongdoing to an outside body.***

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**Step 4 - Raise Concerns with Designated Body.** The Council is of the view that it is better that a concern is raised with the appropriate regulator (e.g. the Northern Ireland Audit Office or the Health & Safety Executive for Northern Ireland) than not at all. See flow chart on page 154.

<https://www.economy-ni.gov.uk/sites/default/files/publications/economy/Public-Interest-Disclosure-PID-guidance.pdf>

~~The process for making a disclosure to a Designated body is set out on flowchart 3 at page 12.~~ Again, your concerns will be recorded, and the relevant Director will be informed of the disclosure in strict confidence. **The Internal Audit Manager will also be informed of the disclosure for recording purposes.**

Commented [ML6]: Added in as a requirement to inform Northern Ireland Audit Office if there are any fraud implications

~~Option 4 – Raise Concerns with Designated body~~ – You can also raise concerns about possible

Commented [CM7]: State how this differs from option 3

fraud and corruption with the Comptroller and Auditor General (C&AG) or the Local Government Auditor (LGA) by emailing: -

[raisingconcerns@niauditoffice.gov.uk](mailto:raisingconcerns@niauditoffice.gov.uk).

Any information provided will be evaluated as audit evidence.

Any concerns will, if you wish, be treated in confidence.

Should the designated body inform the Council of the disclosure, the information will be provided to the relevant Director in confidence and to the Internal Audit Manager for recording purposes.

If a disclosure is made to someone not listed above, then the policy will only protect you as the person raising the concern if it can be demonstrated that you:-

- Reasonably believe that the information is substantially true.
- Did not act maliciously or for personal gain.
- Can be seen to have acted reasonably, taking into account the circumstances.

Additionally, if a protected disclosure is made outside the organisation you, as the person raising concerns must: -

- Reasonably believe your employer would treat you unfairly if you made the disclosure to your employer or a prescribed person, or,
- Reasonably believe that your disclosure to the employer would result in the destruction or concealment of information about the wrongdoing; or,
- Have previously disclosed the same or very similar information to your employer or a prescribed person.

Please see Flowchart four for further details, on page 15.

#### **4. What Happens Next?**

Once your concern has been disclosed via one of the options set out above, the issue will be notified to the Internal Audit Manager to be recorded confidentially. The main purpose of this is to ensure that allegations are properly progressed, investigated, and monitored, with any emerging trends identified at an early stage and that final outcomes are recorded. The identities of information disclosers are not provided to the Internal Audit Manager unless Internal Audit need to investigate further, and identities are not recorded via the Internal Audit recording process.

If a concern clearly falls within the raising concerns/ wrongdoing category, any necessary preliminary enquiries will be made and, if a suspicion of wrongdoing is confirmed, a formal investigation will be carried out.

When dealing with your concern, we will make arrangements to tell you who is dealing with the matter, how they can be contacted and whether further assistance may be needed from you. If specifically requested, we will write to you summarising the concern(s) and setting out how we propose to handle any subsequent investigation.

The person to whom the concern has been raised may ask you how you think the matter might best be resolved, although we will not consider ourselves to be bound to work within your views.

It is important that, should any person making a disclosure have any personal interest in the matter, that they make this known at the earliest possible opportunity. If the concern falls more properly within other procedures (for example, the Council's Grievance Procedure), the discloser(s) will be informed.

The council will provide as much feedback as we properly can, and, if requested, we will confirm it in writing. However, the council may not be able to disclose the precise action we take, where this would infringe on a duty of confidence owed by the council to others. In some cases, the council may also be prevented from giving precise details for legal reasons.

#### **5. Code of Conduct for Local Government Employees**

[The Code of Conduct for Local Government employees](#) outlines the framework within which Council employees work and details the core values and standards of behaviour which they are expected to uphold.

This policy is consistent with the code of conduct in that a Council worker who reasonably believes that they are being required to act in a way which conflicts with the core values and standards set out in the Code, or if they become aware of the actions of others which they believe are improper, unethical or otherwise inconsistent with the Code, they are required to raise the matter with their line management in the first instance

Should it be felt that this is not appropriate, the matter may be reported under these raising concerns arrangements or any other procedure designed for this purpose that may be introduced from time to time. The council publishes most policies and procedures on the Council's intranet site.

#### **6. Complaints From Third Parties**

You should keep in mind that the protection afforded by the Public Interest Disclosure (NI) Order 1998 only relates to internal staff and does not apply to members of the public.

Procedures through which members of the public may report concerns about possible serious impropriety or wrongdoing within the Council are set out within the [Council's Complaints Procedure](#).

Council staff are reminded that they have a duty of care to ensure that any such concerns received from members of the public are dealt with in line with the complaint's procedure as promptly and effectively as possible.

#### **7. Affiliated bodies/Partnering Arrangements**

The Council has a wide range of interests and occasionally enters into initiatives with others that seek to improve the Council area or the lives of residents, visitors and those that work within the area. The structures and governance arrangements of these bodies vary depending on: -

- The terms and conditions are attached to funding sources.
- The source of the funding.
- The type of structure (whether a company limited by guarantee, a charity, or a community interest company for example).

- The aims and objectives of the initiative.

In some cases, Officers may be appointed to work for or within such bodies. Should individual officers be required to serve on such a body, they should take all steps necessary to familiarise themselves with the governance arrangements of that body, as they may differ markedly from those within the Council.

However, should officers develop concerns, this policy applies, and provided they follow the steps, procedures and protocols outlined, they will be afforded the protection available to other Council employees.

**APPENDIX 1**

**RAISING CONCERNS REPORT FORM**

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact the Council. Please note that you may be called upon to assist in the investigation, if found to be necessary.






*Note: Please follow the guidelines as laid out in the Raising Concerns Policy*

<b>REPORTER'S CONTACT INFORMATION</b> (Please leave contact and identifying sections blank should the reporter wishes to remain anonymous.) <b>NB: THE REPORTER MUST BE ASKED IF THEY WISH TO MAKE THEIR DISCLOSURE UNDER THE RAISING CONCERNS POLICY. YOU MUST RECORD THAT THIS WAS ASKED AND THE REPLY.</b>	
NAME	
APPOINTMENT	
DEPARTMENT	
CONTACT NUMBER	
E-MAIL ADDRESS	
<b>SUSPECT'S INFORMATION</b>	
NAME	
APPOINTMENT	
DEPARTMENT	
CONTACT NUMBER	
E-MAIL ADDRESS	
<b>WITNESSES' INFORMATION (if any)</b>	
NAME	
APPOINTMENT	
DEPARTMENT	
CONTACT NUMBER	
E-MAIL ADDRESS	
<b>COMPLAINT:</b> <i>Briefly describe the misconduct / improper activity and how you know about it. Specify what, who, when, where and how. If there is more than one allegation, number each allegation and use as many pages as necessary.</i>	

Is this disclosure made under the Council's Raising Concerns Procedure?	YES	NO
	Details:	Details:
1. What misconduct / improper activity occurred?		
2. Who committed the misconduct / improper activity?		
3. When did it happen and when did you notice it?		
4. Where did it happen?		
5. Is there any evidence that you could provide?		
6. Are there any other parties involved other than the suspect stated above?		
7. Do you have any other details or information which would assist us in the investigation?		
8. Any other comments?		
Date:	Signature:	

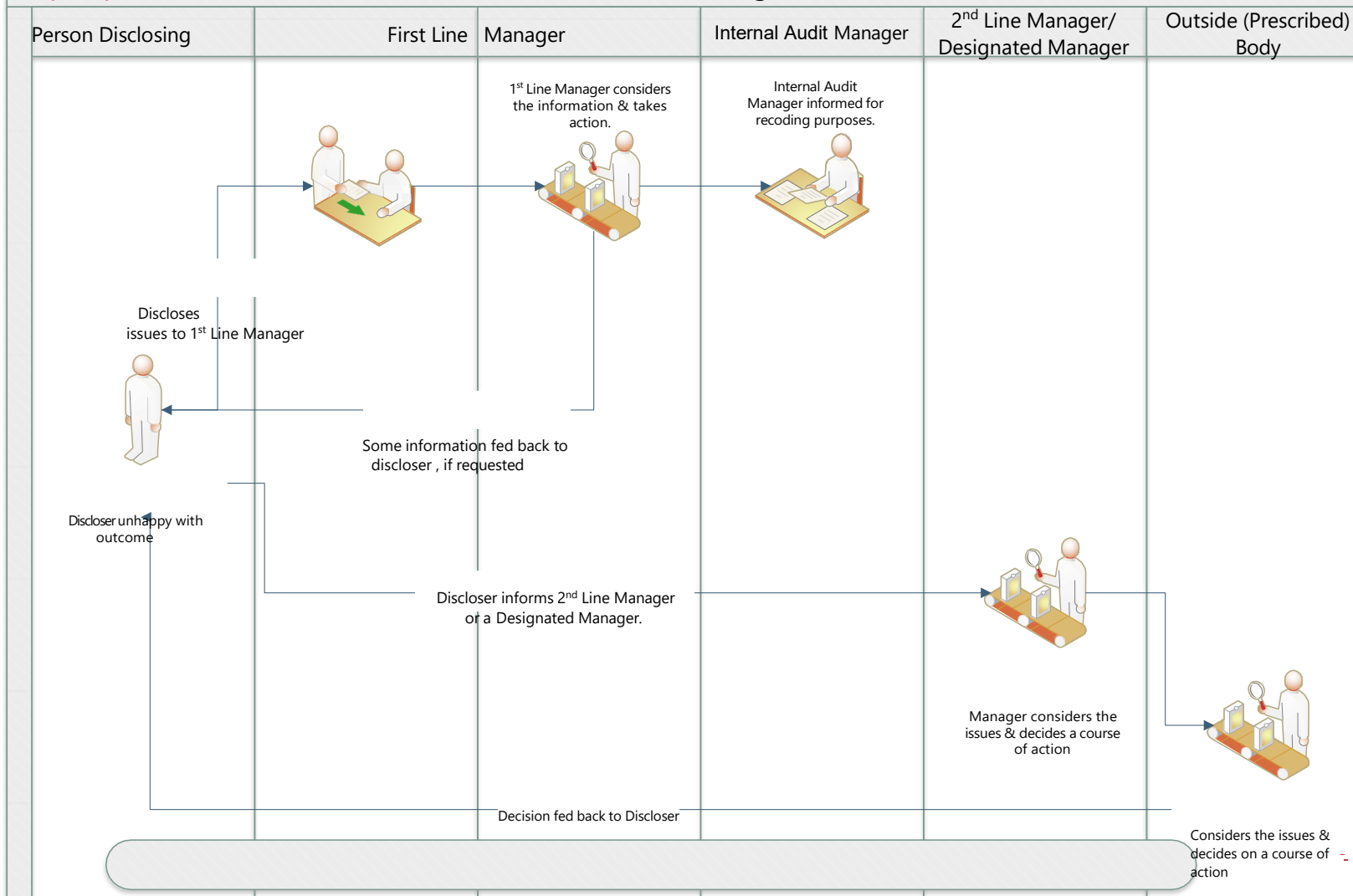
Step ~~Step~~ One : Seek Advice.

APPENDIX 2

	Sources of Advice	Telephone	Website	Address	Email
Protect					
Phase	<p>Protect</p> <p>An independent charity that provides independent advice to those who feel they have witnessed wrongdoing but are unsure how to proceed.</p>	020 3117 2520	<a href="https://www.protect-advice.org.uk">Protect - Speak up stop harm - (protect-advice.org.uk)</a>	The Green House 244-254 Cambridge Heath Road London E2 9DA	<a href="https://www.protect-advice.org.uk">Advice Line - Protect - Speak up stop harm (protect-advice.org.uk)</a>
Phase	<p>Labour Relations Agency. Provides advice for workers, employers or individuals on matters of employment practices &amp; relations</p>	<p>Main Switchboard: 03300 552 220</p> <p>Enquiries: 03300 555 300</p>	<a href="https://www.lra.org.uk/">https://www.lra.org.uk/</a>	2, 4 Cromac Ave, Belfast BT7 2JA	<a href="https://www.lra.org.uk/contact">https://www.lra.org.uk/contact</a>

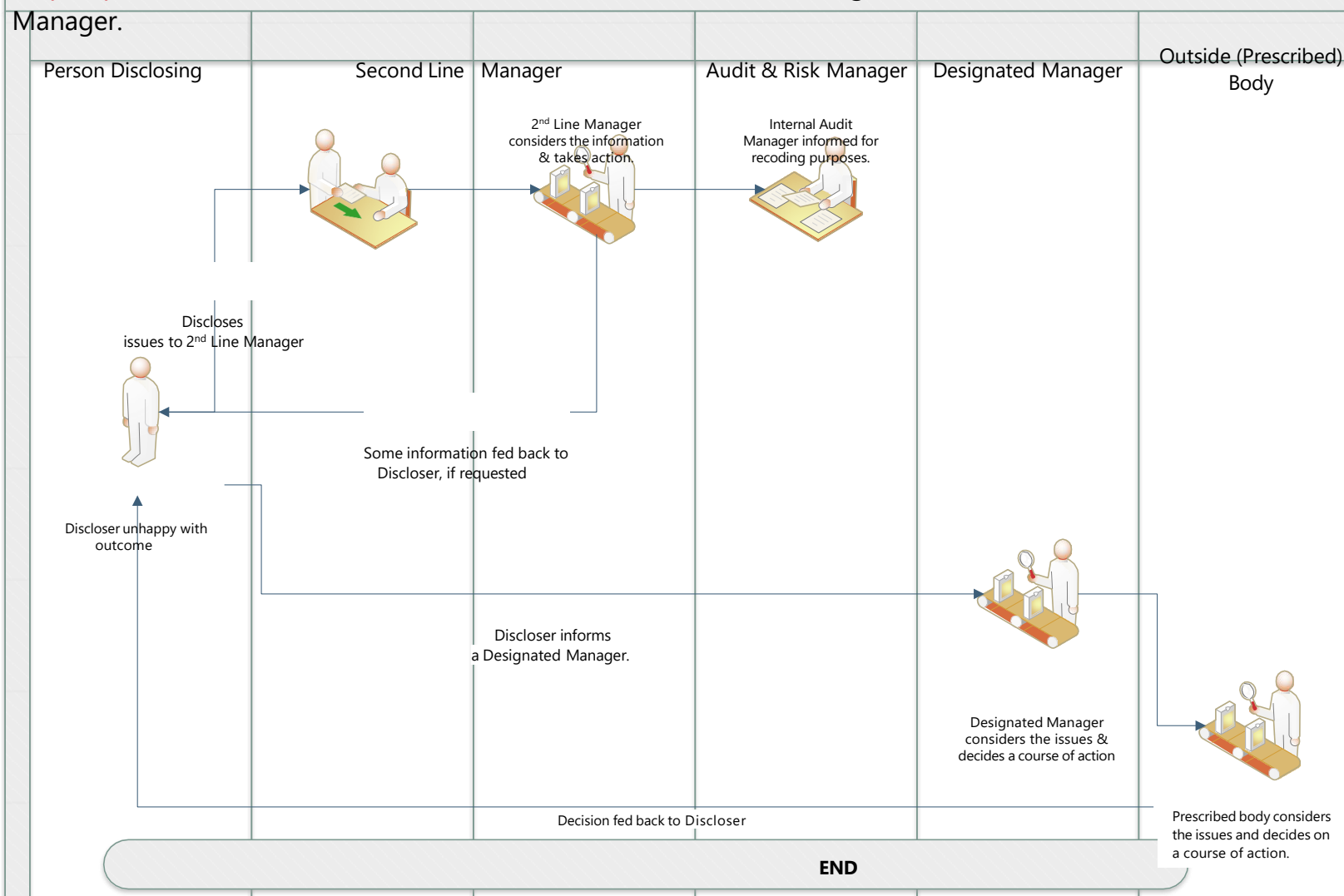
	<p>Law Society of NI. Provides assistance with finding a solicitor or barrister specialising in employment law.</p>	<p>028 9023 1614</p>	<p><a href="https://www.lawsoc-ni.org/">https://www.lawsoc-ni.org/</a></p>	<p>96 Victoria St, Belfast, Co. Antrim, BT1 3GN</p>	<p><a href="https://lawsoc-ni.org/contact.aspx">https://lawsoc-ni.org/contact.aspx</a></p>
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**Step Two (1) : Raise Concerns with Immediate Line Manager**



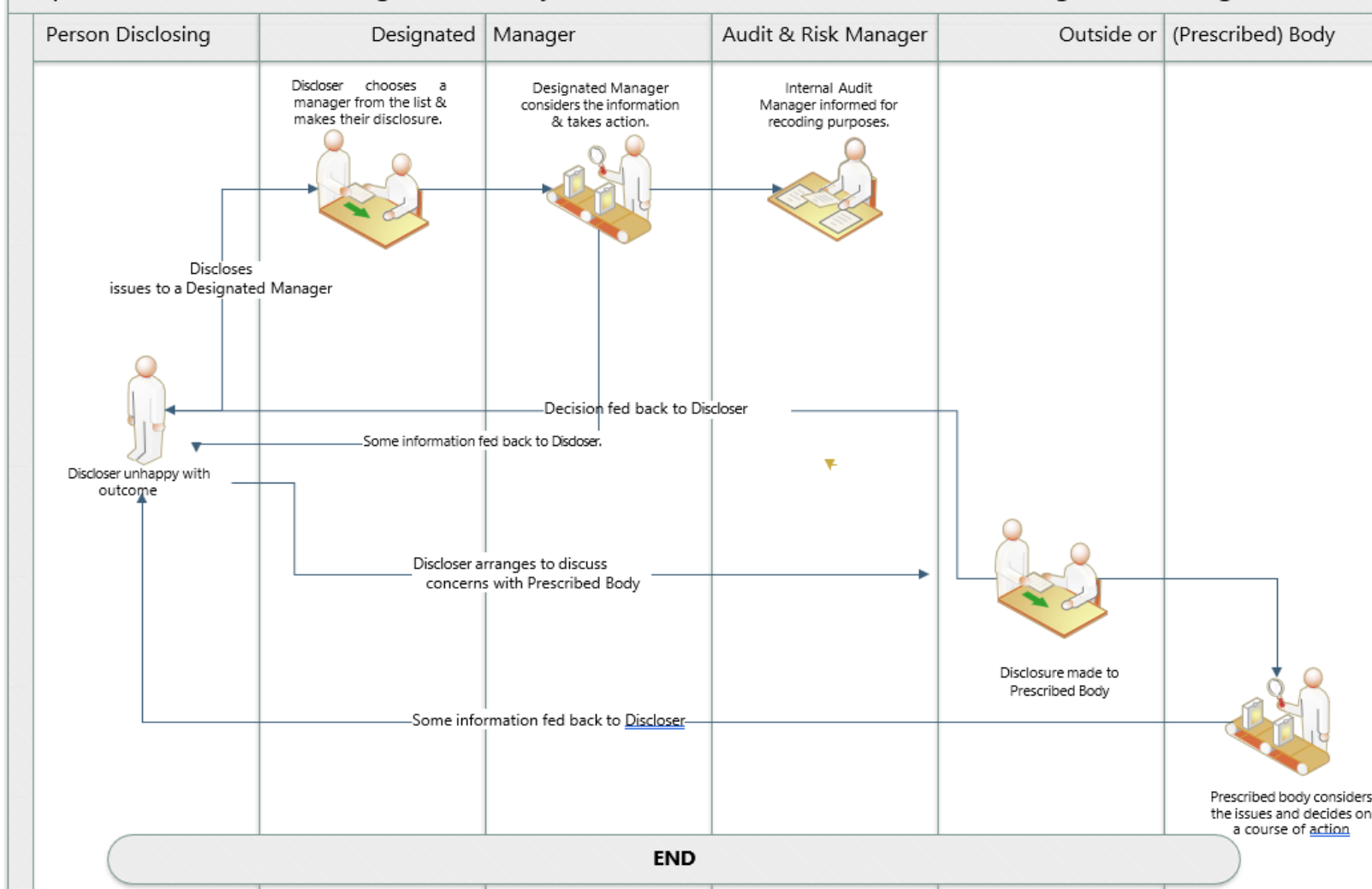
**END**

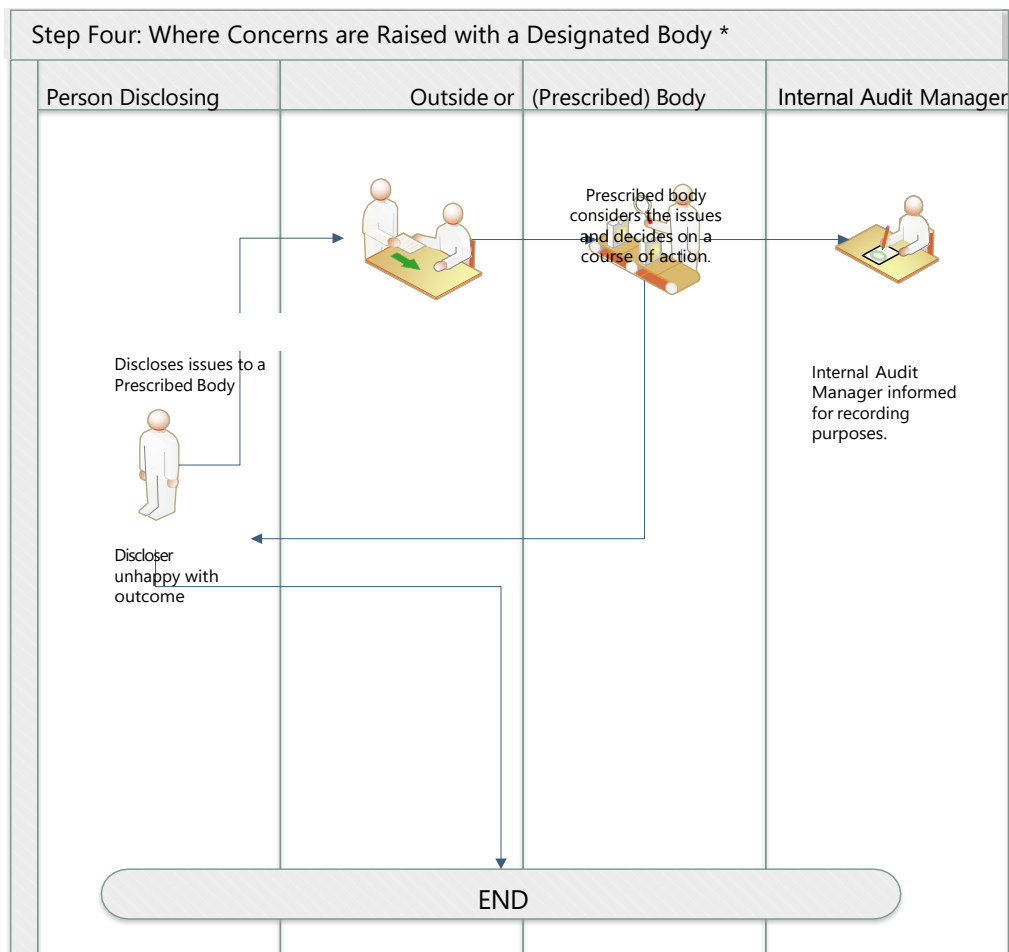
**Step Two (2): Where it is not Wished to Disclose to 1<sup>st</sup> Line Manager, Raise Concerns With 2<sup>nd</sup> Line**





Step Three: Where Line Management are By - Passed & Concerns Raised with a Designated Manager.





\*Once the issues have been considered and examined by the prescribed body and a decision made, the discloser will be provided with some information on the outcome if this was requested at the time the disclosure was made.

This marks the end of the process. Should the discloser be unsatisfied with the outcome it is open to them to place the matter before the Northern Ireland Local Government Ombudsman. However, the Ombudsman's office will require that the issue is progressed through all stages of the Councils complaints procedure prior to examining the matter.

**It is important to note that the Ombudsman will not deal with any employment contract matters but will refer any concerns or queries like these back to the complainant to take up with their employment body.**

## Lisburn & Castlereagh City Council

### Section 75 Equality and Good Relations Screening

#### Part 1. Information about the activity/policy/project being screened

##### Name of the activity/policy/project

Raising Concerns Policy

##### Is this activity/policy/project – an existing one, a revised one, a new one?

This is a revised policy, formerly known as the Whistleblowing Policy

##### What are the intended aims/outcomes the activity/policy/project is trying to achieve?

The aim is to reassure staff that they can raise genuinely held concerns about potential wrongdoing in confidence, through a clear internal reporting process, without putting their position at risk. The policy also sets out the procedures for making disclosures as well as recording and investigating allegations or concerns.

##### Who is the activity/policy/project targeted at and who will benefit? Are there any expected benefits for specific Section 75 categories/groups from this activity/policy/project? If so, please explain.

The policy is targeted at All Council employees, agency staff and others working within Council premises. It is not applicable to the general public.

##### Who initiated or developed the activity/policy/project?

The policy was revised by Internal Audit, in line with NIAO guidance.

##### Who owns and who implements the activity/policy/project?

The policy is owned by the Chief Executive's Office, and implemented by managers and HR staff, with Internal Audit oversight as required.

##### Are there any factors which could contribute to/detract from the intended aim/outcome of the activity/policy/project? No

If yes, give brief details of any significant factors.

##### Who are the internal and external stakeholders (actual or potential) that the activity/policy/project will impact upon? Delete if not applicable

Staff will be impacted by this strategy.

**Available evidence**

**What evidence/information (qualitative and quantitative) have you gathered or considered to inform this activity/policy? Specify details for each Section 75 category.** Internal employee data has been considered for all Section 75 groups, but it is incomplete. Work is ongoing to improve data collection and reporting through the new HR system.

Section 75 Category	Details of evidence/information
Religious Belief	Protestant – 63.9% Roman Catholic – 23.5% Non-determined – 12.6%
Political Opinion	No relevant information
Racial Group	Indian – 0.1% Other – 0.4% Unknown – 15.4% White – 84.2%
Age	<18 years – 1.3% 18-25 – 15.8% 26-35 – 14.3% 36-45 – 22.3% 46-55 – 24.7% 56+ - 21.5%
Marital Status	Married/Civil Partnership – 39.2% Divorced/Separate 3.2% Single – 41.4% Widow 0.2% Unknown – 16.0%

Sexual Orientation	LGBTQ – 1.1% Heterosexual – 25.7% Unknown – 73.2%
Men & Women Generally	Male – 54.6% Female – 45.4%
Disability	Declared disability – 0.66%
People with and without Dependants	Have dependants – 22.1% No dependants – 35.4% Unknown – 42.5 %

**Taking into account the information referred to above, what are the different needs, experiences and priorities of each of the following categories, in relation to the particular activity/policy/decision? Specify details for each of the Section 75 categories**

Section 75 Category	Details of needs/experiences/priorities
Religious Belief Political Opinion	No differential needs identified, policy applies equally to all staff and there is assurance of strict confidentiality and protection from victimisation.
Racial Group	Information and reporting routes should be accessible to staff whose first language is not English. Access to clear information and support if needed to understand the process or complete reporting documentation.
Age Marital Status Sexual Orientation Men & Women Generally	No differential needs identified, policy applies equally to all staff and there is assurance of strict confidentiality and protection from victimisation.

Disability	Information and reporting routes should be accessible to staff with sensory, cognitive, or mental health disabilities.
People with and without Dependants	No differential needs identified, policy applies equally to all staff.

**Part 2. Screening questions**

**1 What is the likely impact on equality of opportunity for those affected by this activity/policy, for each of the Section 75 equality categories?**

Section 75 Category	Details of likely impact – will it be positive or negative? If none anticipated, say none	Level of impact - major or minor* - see guidance below
Religious Belief	No differential impact identified.	None
Political Opinion		
Racial Group		
Age		
Marital Status		
Sexual Orientation		
Men & Women Generally		
Disability		
People with and without Dependants		

\* See Appendix 1 for details.

**2(a) Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?**

Section 75 Category	IF Yes, provide details	IF No, provide details
Religious Belief	No further opportunities identified at this time.	

Political Opinion	The policy already promotes equality of opportunity by providing confidential, accessible reporting routes for all staff, including reasonable adjustments for disabled staff and support for those whose first language is not English.
Racial Group	
Age	
Marital Status	
Sexual Orientation	
Men & Women Generally	
Disability	
People with and without Dependents	

**Equality Action Plan 2021-2025**

Does the activity/policy/project being screened relate to an action in the Equality Action Plan 2021-2025?

No

**2(b) DDA Disability Duties (see Disability Action Plan 2021-2025)**

Does this policy/activity present opportunities to contribute to the actions in our Disability Action Plan:

No

**3 To what extent is the activity/policy/project likely to impact on good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	Details of likely impact. Will it be positive or negative? [if no specific impact identified, say none]	Level of impact – minor/major*
Religious Belief	None	N/A
Political Opinion		
Racial Group		

\*See Appendix 1 for details.

**4 Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?**

Good Relations Category	IF Yes, provide details	If No, provide details
Religious Belief		No opportunities identified, the reporting process is fair, impartial and free from bias.
Political Opinion		
Racial Group		

**Multiple identity**

There is no data to suggest that employees with multiple identities (e.g. disabled staff from minority ethnic backgrounds, LGBTQ+ older staff, etc.) would experience a differential impact. The policy applies consistently to all staff with strong confidentiality and protection assurances.

### Part 3. Screening decision/outcome

Equality and good relations screening is used to identify whether there is a need to carry out a **full equality impact assessment** on a proposed policy or project.

There are 3 possible outcomes:

- 1) **Screen out** - no need for a full equality impact assessment and no mitigations required because no relevance to equality, no negative impacts identified or only very minor positive impacts for all groups. This may be the case for a purely technical policy for example.
- 2) **Screen out with mitigation** - no need for a full equality impact assessment but some minor potential impacts or opportunities to better promote equality and/or good relations identified, so mitigations appropriate. Much of our activity will probably fall into this category.
- 3) **Screen in for full equality impact assessment** – potential for significant and/or potentially negative impact identified for one or more groups so proposal requires a more detailed impact assessment. [See Equality Commission guidance on justifying a screening decision.]

**Choose only one of these** and provide reasons for your decision and ensure evidence is noted/referenced for any decision reached.

Screening Decision/Outcome	Reasons/Evidence
<p>Option 1</p> <p><b>Screen out</b> – no equality impact assessment and no mitigation required [go to Monitoring section]</p>	<p>The policy applies consistently to all staff and includes clear protections around confidentiality, fairness and non-victimisation.</p> <p>The only needs identified relate to:</p> <ul style="list-style-type: none"> <li>• Accessibility for disabled staff, and</li> <li>• Support for staff whose first language is not English.</li> </ul> <p>These needs are addressed within the policy’s flexible reporting options, the availability of reasonable adjustments, the ability to raise concerns verbally or in writing, and the use of clear processes supported by forms and flowcharts.</p>

	Because these needs have been recognised and can be met within existing procedures, no further mitigation is required.
<p>Option 2</p> <p><b>Screen out with mitigation</b> – some potential impacts identified but they can be addressed with appropriate mitigation or some opportunities to better promote equality and/or good relations identified [complete mitigation section below]</p>	
<p>Option 3</p> <p><b>Screen in</b> for a full Equality Impact Assessment (EQIA)</p> <p>[If option 3, complete timetabling and prioritising section below]</p>	

**Mitigation (Only relevant to Option 2)**

**Can the activity/policy/project plan be amended or an alternative activity/policy introduced to better promote equality of opportunity and/or good relations? N/A**

**Timetabling and prioritising for full EQIA (only relevant to Option 3)**

If the activity/policy has been ‘**screened in**’ for full equality impact assessment, give details of any factors to be considered and the next steps for progressing the EQIA, including a proposed timetable.

Is the activity/policy affected by timetables established by other relevant public authorities? N/A

## Part 4. Monitoring

Public authorities should consider the guidance contained in the Commission's Monitoring Guidance for Use by Public Authorities (July 2007).

Effective monitoring will help a public authority identify any future adverse impact arising from the activity/policy which may lead the public authority to conduct an equality impact assessment, as well as help with future planning and activity/policy development.

**What will be monitored and how? What specific equality monitoring will be done? Who will undertake and sign-off the monitoring of this activity/policy and on what frequency?** Monitoring will be through normal HR systems. Where disclosures are not anonymous, equality data (e.g., disability, ethnicity) may be recorded to review trends. Reporting goes to Internal Audit only in specific cases (e.g., suspected fraud). Oversight is by the Internal Audit Manager and relevant Director.

## Part 5 - Approval and authorisation

	Position/Job Title	Date
Screened by: Maureen Leonard	Internal Audit Manager	03/12/2025
Reviewed by: Annie Wilson	Equality Officer	03/12/2025
<b>Approved by:</b>	David Burns	18/03/2026

Note: On completion of the screening exercise, a copy of the completed Screening Report should be:

- approved and 'signed off' by a senior manager responsible for the activity/policy
- included with Committee reports, as appropriate
- sent to the Equality Officer for the quarterly screening report to consultees, internal reporting and publishing on the LCCC website
- shared with relevant colleagues
- made available to the public on request.

Evidence and documents referenced in the screening report should also be available if requested.

## Appendix 1 – Equality Commission guidance on equality impact

### \*Major impact:

- a) The policy/project is significant in terms of its strategic importance;
- b) Potential equality matters are unknown, because, for example, there is insufficient data upon which to make an assessment or because they are complex, and it would be appropriate to conduct an equality impact assessment in order to better assess them;
- c) Potential equality and/or good relations impacts are likely to be adverse or are likely to be experienced disproportionately by groups of people including those who are marginalised or disadvantaged;
- d) Further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy about which there are concerns amongst affected individuals and representative groups, for example in respect of multiple identities;
- e) The policy is likely to be challenged by way of judicial review;
- f) The policy is significant in terms of expenditure.

### Minor impact

- a) The policy is not unlawfully discriminatory and any residual potential impacts on people are judged to be negligible;
- b) The policy, or certain proposals within it, are potentially unlawfully discriminatory, but this possibility can readily and easily be eliminated by making appropriate changes to the policy or by adopting appropriate mitigating measures;
- c) Any asymmetrical equality impacts caused by the policy are intentional because they are specifically designed to promote equality of opportunity for particular groups of disadvantaged people;
- d) By amending the policy there are better opportunities to better promote equality of opportunity and/or good relations.

### No impact (none)

- a) The policy has no relevance to equality of opportunity or good relations;
- b) The policy is purely technical in nature and will have no bearing in terms of its likely impact on equality of opportunity or good relations for people within the equality and good relations categories.