



March 14th, 2024

Chairman: Councillor R McLernon

Vice-Chairman: Mr E Jardine, Independent Member

Aldermen: O Gawith and S P Porter

Councillors: D Bassett, P Burke, S Burns, D J Craig, A P Ewing J Gallen, A Givan, C Kemp, P Kennedy, S Lowry, M McKeever and A Martin

Ex Officio: The Right Worshipful the Mayor, Councillor A Gowan

Deputy Mayor, Councillor G McCleave

Notice Of Meeting

A meeting of the Governance and Audit Committee will be held on **Wednesday, 20th March 2024** at **6:00 pm** for the transaction of the undernoted Agenda.

For those Members attending this meeting remotely, the Zoom details are included in the Outlook invitation that has been issued.

Food will be available in Lighters from 5.15 pm.

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)

3.0 REPORT BY PERFORMANCE IMPROVEMENT OFFICER

3.1 Compliments and Complaints Report - Quarter 3 2023/24

- ▢ *Item 3.1 Complaints Report Q3.pdf* Page 1

- ▢ *Item 3.1 Appendix I - Compliments & Complaints Dashboard Q3.pdf* Page 3

- ▢ *Item 3.1 Appendix II Compliments & Complaints Report Q3.pdf* Page 5

3.2 Service KPI - Quarter 3 2023/24 (all directorates)

- ▢ *Item 3.2- Service KPIs 2023 2024 Review.pdf* Page 17

- ▢ *Item 3.2 Appendix I ES Q3 Service KPIs 2.pdf* Page 19

- ▢ *Item 3.2 Appendix II F&CS Q3 Service KPIs.pdf* Page 22

- ▢ *Item 3.2 Appendix III OD&I Q3 Service KPIs 2.pdf* Page 24

- ▢ *Item 3.2 Appendix IV LS Q3 Service KPIs 2.pdf* Page 28

- ▢ *Item 3.2 Appendix V Regen & Growth Q3 Service KPIs.pdf* Page 33

3.3 Performance Improvement Objectives, Case Studies & Associated KPIs – 3rd Quarter Review

- ▢ *Item 3.3 - Q3 PIO Casestudies & KPIs.pdf* Page 37

- ▢ *Item 3.3 Appendix I Quarter 3 monitoring G&A.pdf* Page 39

- ▢ *Item 3.3 Appendix II Q3 Performance KPIs.pdf* Page 59

3.4 Draft Performance Improvement Objectives & Projects 2024/25

- ▢ *Item 3.4 - Performance Improvement Objectives & Projects 24 25.pdf* Page 63

Item 3.4 Appendix I Performance Improvement Objectives for 24 25.pdf **Page 65**

3.5 NI Public Service Ombudsman (NIPSO) Model Complaints Handling Procedure

Item 3.5 - NIPSO Model Complaints Handling Procedure.pdf **Page 68**

Item 3.5 Appendix I DRAFT LCCC CHP Customer guidance.pdf **Page 69**

Item 3.5 Appendix II Equality screening CHP.pdf **Page 79**

4.0 REPORT BY ENVIRONMENTAL HEALTH MANAGER (ACTING)

4.1 Corporate Risk Register

Item 4.1 Corporate Risk Register Report Mar 24.pdf **Page 91**

item 4.1 Appendix I - Corporate Risk Dashboard.pdf **Page 93**

5.0 REPORT BY INTERNAL AUDIT MANAGER

5.1 G & A Committee - Self Evaluation Report

Item 6.1 Self Evaluation Report.pdf **Page 94**

Item 6.1 Appendix 1 Self Evaluation Report 23-24 - Final.pdf **Page 95**

6.0 CONFIDENTIAL BUSINESS

All items are confidential due to containing information relating to the financial or business affairs of any particular person (including the Council holding that information)

6.1 NIPSO/NIAO - Adjudication Hearing Correspondence

Confidential by virtue of the fact that it contains information relating to the financial or business affairs of any particular person (including the Council holding that information).

6.2 Draft Audit Strategy 2024/29 & Draft Operational Plan 2024/25

Confidential by virtue of the fact that it contains information relating to the financial or business affairs of any particular person (including the Council holding that information).

Internal Audit Strategy 2024/2029 and Internal Audit Operational Plan
2024-2025

Appendix 1 confidential - Internal Audit Strategy 2024-2029 and Internal Audit
Operational Plan 2024-2025

6.3 Internal Audit Progress Report

Confidential by virtue of the fact that it contains information relating to the financial or business affairs of any particular person (including the Council holding that information).

Internal Audit Progress Report

Appendix 1 confidential - Internal Audit Progress Report

6.4 LCCC Audit Strategy 2023/24

Confidential by virtue of the fact that it contains information relating to the financial or business affairs of any particular person (including the Council holding that information).

6.5 Annual Audit Letter

Confidential by virtue of the fact that it contains information relating to the financial or business affairs of any particular person (including the Council holding that information).

7.4 Annual Audit Letter - March 2024 cover report.pdf

Item 7.4 - Appendix 1 confidential- AAL 2022-2023 - NIAO to Cara McCrory 260124.pdf

Item 7.4 - Appendix 2 confidential - Annual Audit Letter LCCC 2022-23.pdf

7.0 ANY OTHER BUSINESS

Committee:	Governance & Audit Committee
Date:	20 th March 2024
Report from:	Performance Improvement Officer

Item for:	Noting
Subject:	Compliments and Complaints Report – Q3 2023/24

1.0	<u>Background and Key Issues:</u>	
1.1	Lisburn & Castlereagh City Council (LCCC) 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	LCCC has a Complaints Handling procedure which allows customers to make a complaint and details what happens to their complaint after it is received.	
1.3	Compliments and complaints are captured on the Council's Customer Care System and Complaints are dealt with through the Council's complaints handling procedure.	
1.4	Attached under Appendix I is a dashboard report which details the number of comments, complaints and compliments in Quarter 3 (October - December inclusive) of 2023/24.	
1.5	This dashboard is a new report which aims to summarise the Council's Customer Care activity and present the information in graphical form.	
1.6	Attached under Appendix II is a comparative report taken from the Customer Care System. This report provides more detail on the Council's Customer Care activity during Quarter 3 (October - December inclusive) of 2023/24.	
1.7	Members are asked to consider both formats and provide feedback on whether, going forward, the committee would be content with receiving the dashboard only (appendix I) with the full report (appendix II) coming to committee once per year.	
2.0	<u>Recommendation</u>	
	It is recommended that Members note the appended report.	
3.0	<u>Finance and Resource Implications</u> N/A	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 or rationale why the screening was not carried out	No – not applicable as this report is for noting and does not require decision.
4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No

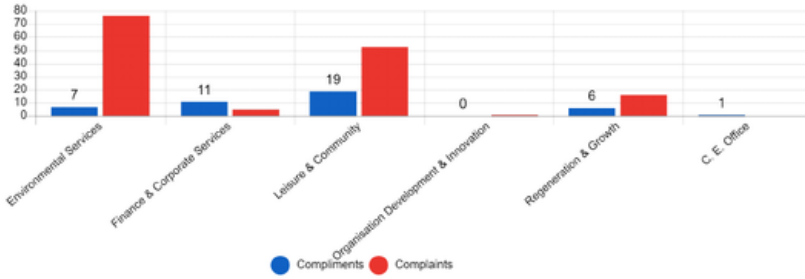
4.4	Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.	No – not applicable as this report is for noting and does not require decision.
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Appendices:	Appendix I – Dashboard Report showing Compliments & complaints during Q3 (October - December 2023 inclusive) Appendix II – Detailed report showing Compliments & complaints during Q3 (October - December 2023 inclusive)
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Compliments & Complaints

Q3

Compliments & Complaints



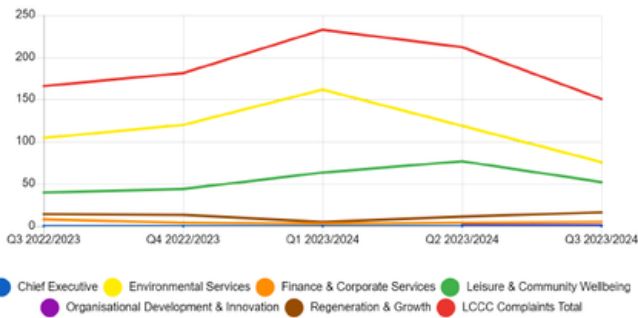
Number of Reportal App Calls

58

Escalated Complaints

5

Complaints Analysis



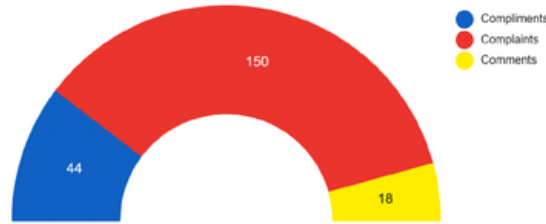
Customer Care Analysis

Period	Compliments	Complaints	Service Requests	Comments	Total Calls
Q3 2022-2023	42	166	698	139	1045
Q4 2022-2023	36	181	598	16	831
Q1 2023-2024	42	233	628	23	926
Q2 2023-2024	50	212	1216	23	1501
Q3 2023-2024	44	150	1207	18	1419

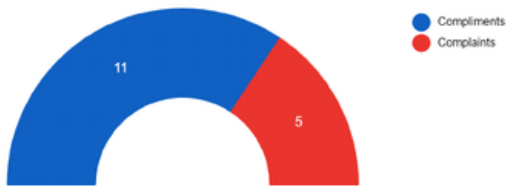
Analysis of Calls

Directorate/Other	Compliments	Complaints	Service Requests	Comments	TOTAL
C. E. Office	1	0	0	0	1
Environmental Services	7	76	1205	3	1291
Finance & Corporate Services	11	5	0	0	16
Leisure & Community	19	52	2	11	84
Organisational Development & Innovation	0	1	0	0	1
Regeneration & Growth	6	16	0	4	26
Non Council					60
TOTAL	44	150	1207	18	1419

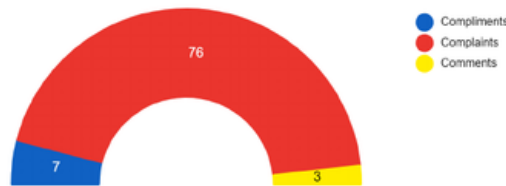
Total Call by Type



Finance & Corporate Services Calls



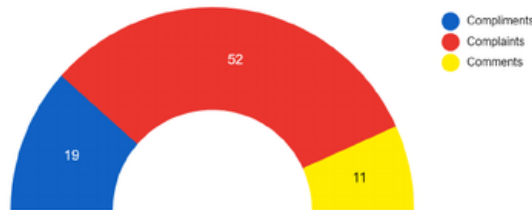
Environmental Services Calls



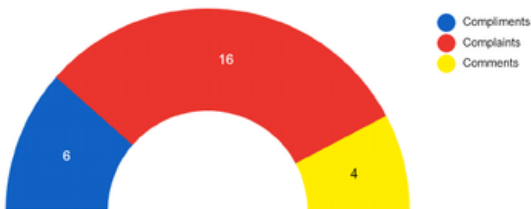
Organisational Development & Innovation Calls



Leisure & Community Calls



Regeneration & Growth Calls



C. E. Office



Non Council Calls

60

Customer Satisfaction Per Directorate

Rating	Chief Executive	Environmental Services	Finance & Corporate Services	Leisure & Community	Regeneration & Growth	Organisational Development & Innovation	Total	Percent
Excellent	0	2	0	4	1	0	7	88%
Good	0	0	0	0	0	0	0	0%
Acceptable	0	0	0	0	0	0	0	0%
Poor	0	0	1	0	0	0	0	12%
Total	0	2	1	4	1	0	8	

Details of Complaints with NIPSO

Case Reference	Date Escalated	Directorate	Complaint	Outcome
CC Ref.050007	03/01/23	Regeneration & Growth	Planning	No further action - 13th November 2023
CCO2	15/08/23	Regeneration & Growth	Planning	No further action - 2nd November 2023
CCO3	11/12/23	Environmental Services (EH)	Noise concerns	Response provided - Awaiting Decision

Customer Satisfaction Per Directorate



Compliments & Complaints Report

Q3

1st October –
31st December 2023

Lisburn & Castlereagh City Council

1.0 Customer Care Analysis

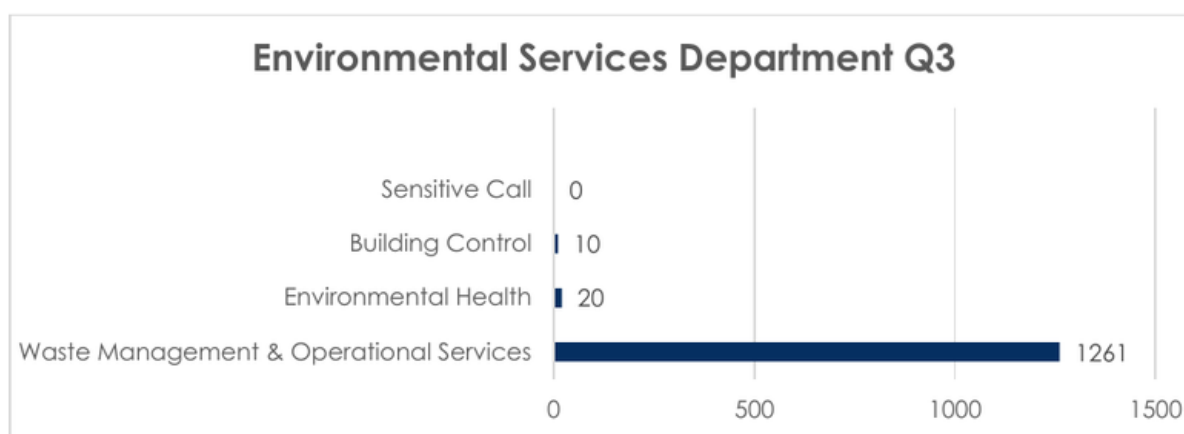
Call Type	Q3 2022-2023	Q4 2022-2023	Q1 2023-2024	Q2 2023-2024	Q3 2023-2024
Service Requests	698	598	628	1216	1207
Complaints	166	181	233	212	150
Compliments	42	36	42	50	44
Comments	139	16	23	23	18
TOTAL CALLS	1045	831	926	1501	1419

Customer Care cases decreased from 1501 in Q2 to **1419** in Q3, a decrease of 82. There was also a **significant decrease** in Complaints of **62** from 212 in Q2 to **150** in Q3.

1.1 Analysis of Customer Care Cases in Q3 per Department

Department	Comments	Complaints	Compliments	Service Requests	TOTAL
C.E. Office	0	0	1	0	1
Environmental Services	3	76	7	1205	1291
Finance & Corporate Services	0	5	11	0	16
Leisure & Community	11	52	19	2	84
Organisation Development & Innovation	0	1	0	0	1
Regeneration & Growth	4	16	6	0	26
Non Council	-	-	-	-	60
TOTAL	18	150	44	1207	1479

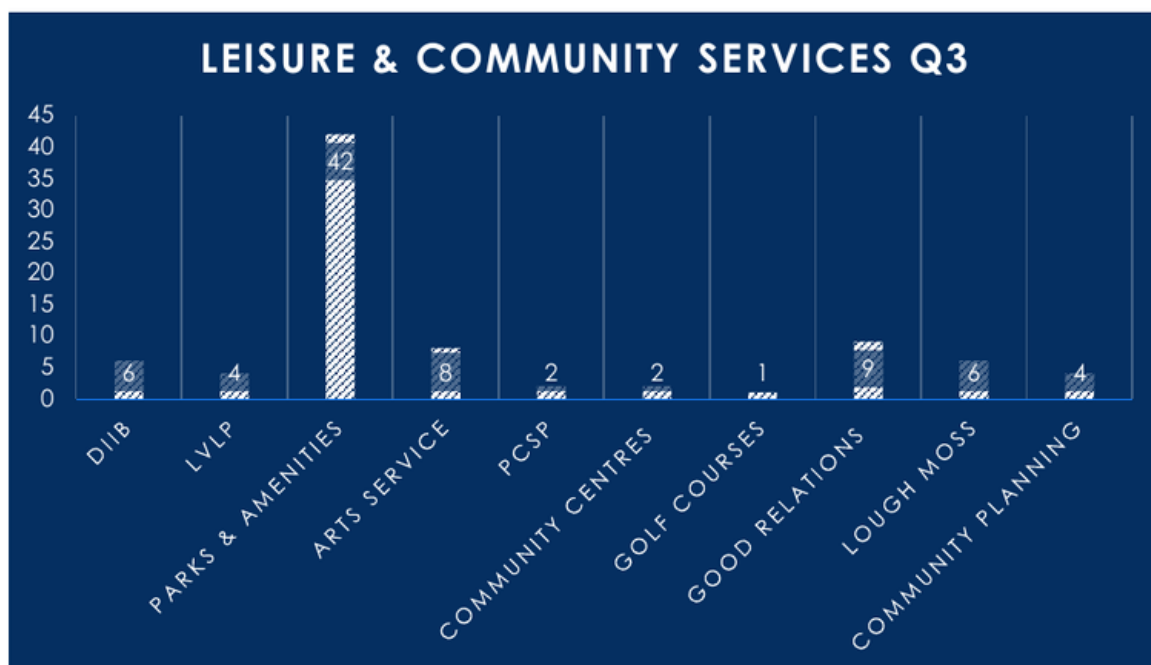
1.2 A breakdown of cases received for the Environmental Services Department is as follows:



Overall, **1291** cases were logged to Environmental Services:

- **1261** Waste Management and Operational Services - The majority were service requests for missed bins during collection, damaged bins and sweeping requests.
- **20** Environmental Health – fly tipping and dog control issues continue to be the main reason for logged Service Requests. The majority of Service Requests for EH are sent direct to EH Admin and not logged through Customer Care.
- **10** Building Control – Street nameplate repairs/replacements, Affordable Warmth Scheme and Customer Service.

1.3 A breakdown of cases received for Leisure & Community Wellbeing is as follows:

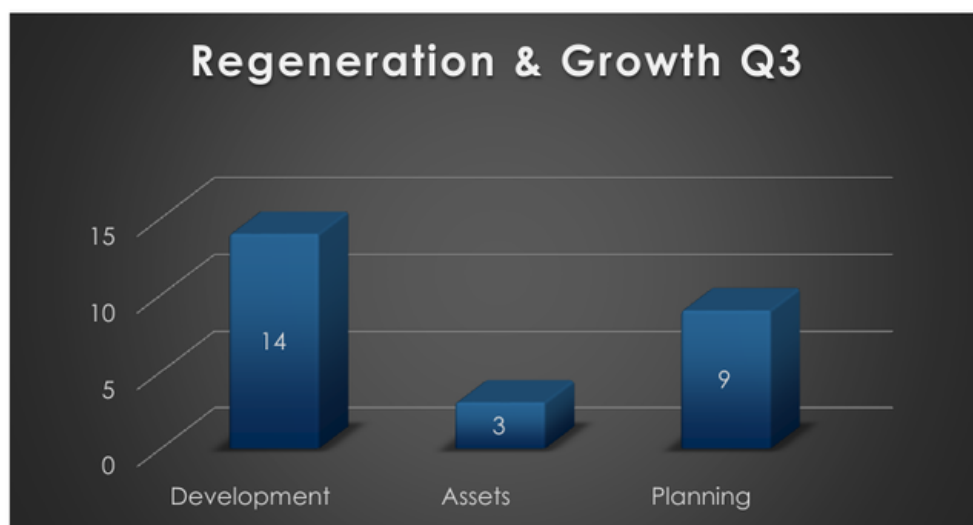


Overall, **84** cases were logged to Leisure & Community Wellbeing:

- **42** Parks & Amenities – Fencing at Nettlefield Road, litter bin provision, Wallace Park, dog incident at Moira Demesne, McIlroy Park, flooding from Moat Park, cemeteries maintenance, Moat Park and Hydebank. Ten calls were compliments.
- **6** DIIB – Customer Service, Ice Rink, bowling alley and the soft play area.
- **4** LVLP – Leisure Pool, main pool, swimming pool access and the main hall.
- **9** Good Relations – Flags
- **6** Lough Moss – External area, gym, air conditioning.
- **1** Golf Courses – Thanks for course condition.

- **8** Arts Service – Bookings, positive feedback after events, parking at events.
- **4** Community Planning – Request for information, positive feedback and thanks and a complaint regarding the provision of food at a community funding event.
- **2** Community Centres – Council vehicle, employee conduct.
- **2** PCSP – Parking and ASB.

1.4 A breakdown of cases received for Regeneration & Growth is as follows:



26 cases were logged under Regeneration & Growth:

- **14** Economic Development – City centre issues, Hillsborough traffic and positive feedback after events.
- **3** Assets – Faulty Xmas lighting.
- **9** Planning

1.5 A breakdown of cases received for Finance & Corporate Services is as follows:

Q3					
Area	Comments	Complaints	Compliments	Service Requests	Total
Registration	0	1	1	0	2
Central Support	0	1	0	0	1
Centre Management	0	3	10	0	13
TOTAL	0	5	11	0	16

5 complaints were received and were in relation to the telephone system at LVI, late payment after an event, pricing, The Island Hall and an incorrect

marriage certificate. The 11 compliments received were regarding positive feedback after events and conference bookings.

1.6 A breakdown of cases received for Organisation Development and Innovation is as follows:

One complaint was logged under Equality and was regarding the promotion of Pride Events.

2.0 Complaints Analysis

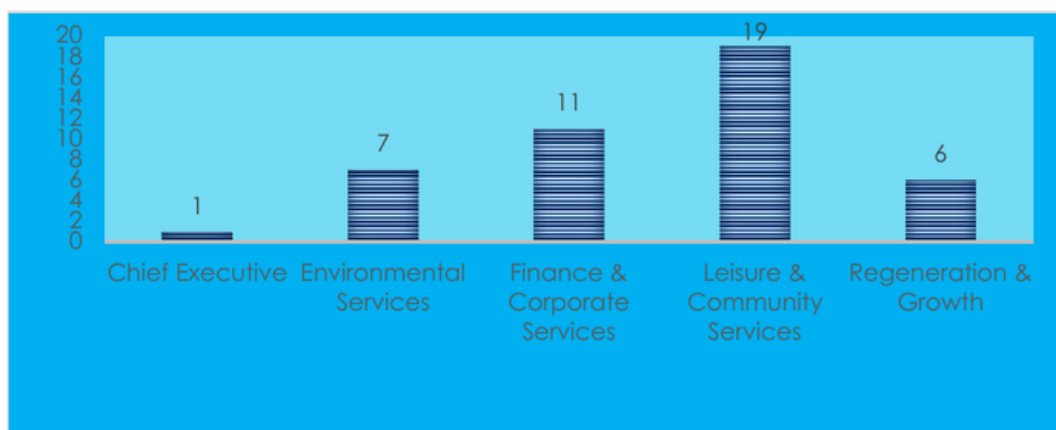
	Q3 2022/2023	Q4 2022/2023	Q1 2023/2024	Q2 2023/2024	Q3 2023/2024
Chief Executive	0	0	0	0	0
Environmental Services	104	120	162	119	76
Finance & Corporate Services	8	4	3	4	5
Leisure & Community Wellbeing	40	44	63	77	52
Regeneration & Growth	14	13	5	11	16
Organisation Development & Innovation	-	-	-	1	1
LCCC Complaints Total	166	181	233	212	150
Non Council Complaints	23	47	48	64	60
Total inclusive of Non Council	189	228	281	276	210

There was a **significant decrease (62)** on the number of complaints received during Q3. The total of 150 overall complaints is the lowest in the previous 12 months. The table below provides some examples of the comments and complaints received during this period.

	Directorate	Unit/Area	Issue
Comment	Environmental Services	Bryson Contract Street Cleansing	Recycling collection Possible damage caused by road sweeper
		E. Health	Administration
Comment	Leisure & Community Services	Parks & Amenities	Wallace Park – lighting, opening of gates, Park Run incident Moira Demesne – lost property Hydebank – bookings Funding

	Directorate	Unit/Area	Issue
		PCSP Arts Centre Community Planning DIIB	Parking outside a local Primary School Parking at events Request for information – research Soft play area Ice Rink – Customer service
Comment	Regeneration & Growth	Econ. Development Planning	City Centre issues, Royal Hillsborough Planning query
Complaints	Environmental Services	Bulky Waste Refuse Collection Amenity Sites Bryson House Street Cleaning E. Health Building Control	Items not collected Bin placement after collection, green bags not delivered, spillage from vehicle, bins not collected, parked vehicles, damaged bin not removed, property damage Access, debris, customer service Collections, boxes not delivered, spillages. caddy liners not delivered, damaged boxes Litter bins, lack of action, vehicle sweeping Employee conduct, response, lack of progress Affordable Warmth Scheme,
Complaints	Finance & Corporate Services	Centre Management Central Support Registration	Telephone system at LVI, incorrect ticket pricing, The Island Hall Late payment after a recent event Mistake on a marriage certificate
Complaints	Leisure & Community Services	Parks & Amenities Good Relations Lough Moss Arts Centre LVLP Community Centres DIIB Community Planning	Damaged fence, McIlroy Park, Hillsborough Car Park, Hillsborough Forest, Barbour playing fields, careless driving, cemetery maintenance, dog exercise area at Hydebank Wallace Park – toilets, litter, car parking Moira Demesne – incident involving a family pet, toilets, car park Moat Park – Xmas tree, car park, flooding Flags Accident involving the barrier, incident in the gym, air conditioning Tickets Leisure Pool, main hall, swimming coach, swimming pool access Council vehicle, employee conduct Customer service, bowling alley, removal of an event Provision of food at a community group
Complaints	Regeneration & Growth	Assets Econ. Development Planning	Xmas lights not working City Centre issues, Xmas events Planning queries
Complaints	Organisational Development & Innovation	Equality	Council promotion of Pride events

3.0 Compliments



There were **44** compliments received during Q3. The following table shows a breakdown of compliments by service area:

Directorate	Unit / Area	Compliment
Environmental Services	Operational Services	Thanks and appreciation for sweeping of leaves, assistance with a vulnerable adult, delivery of a replacement bin and green bags
	Building Control E. Health	Customer service Returned questionnaires
Finance & Corporate Services	Centre Management	Positive feedback after events and conference bookings
	Registration	Thanks for assistance after a bereavement. Positive feedback from wedding ceremony surveys
Leisure & Community Wellbeing	Golf courses	Appreciation for the work carried out by the greenkeepers at CHGC
	Arts Service	Positive feedback after recent events – Celtic Soul, Remembrance Day Arts Competition, Wreath making
	Parks & Amenities	Positive feedback after River Lagan Bio-Diversity Walk, Bat talk and walk at Moat Park, Ulster in Bloom
	Community Planning	Winter Warmer Event, thanks for the Monday gardening club
Regeneration & Growth	Econ. Development	Thanks after Made in NI Exporter Roadshow, positive feedback following Xmas events. Positive interactions on the Councils social media platforms
	Assets	Thanks regarding the Xmas lights at Carryduff
CE Office	General	Thanks and appreciation from Newry Mourne & Down District Council for support assistance provided by Council

A few examples of the compliments received were as follows:

ENVIRONMENTAL SERVICES

I would like to share information about actions of Jordan and two of his colleagues, Ian and Michael on Tuesday 10th October in Monaville Close, Lisburn. Jordan found my 89 year old mum wandering in the street. He found out where she lives, brought her home and rang me. My phone number was pinned up the house. I spoke to Jordan and as I live an hour away he was adamant he shouldn't leave her alone. He then stayed with my mum until a carer arrived and showed her great compassion. This was such a lovely thing to do. He could have taken her home and left but he and his two colleagues stayed to ensure her safety. They deserve great credit for what they did and it is much appreciated. Please ensure this information is passed to Jordan's supervisor, Michael Hamilton. Jordan and his colleagues are a great asset to your organisation and should receive some recognition for the compassion shown to my mum. Kind regards 13/10/23

ENVIRONMENTAL SERVICES

*Got a new bin this morning - super quick resolution, delighted!
Thanks 28/11/23*

FINANCE & CORPORATE SERVICES

Ulster in Bloom Event: On behalf of the judges I wanted to say how impressed we were with the hosting at the Island Centre last Wednesday. Everything went smoothly, super venue and was very much enjoyed. The icing on the cake and very unexpected were the 'goody bags' supplied by the host council making the event extra special. On a personal note I admit to a bias towards the council area in which I live and take pride, congratulations to everyone involved in the hosting and for the year round commitment to UIB throughout the council area. Thank you for hosting a very successful event. Kindest regards 13/10/23

FINANCE & CORPORATE SERVICES

Good evening. I was involved in the Clinical Study Day as one of the Admin team from 210 Med Regt. I just wanted to compliment your staff who worked today at this event. In particular the food (Chicken on a skewer in particular) & the coffee (love strong coffee) provided was excellent. All of the staff at this event were professional, courteous and provided a first rate service to what was an extremely busy and well attended event. Please pass on my thanks to all involved. Kind Regards 18/11/23

LEISURE & COMMUNITY WELLBEING

Hi there, Thanks so much for the bat talk and walk tonight, we thoroughly enjoyed it and hadn't realised how lovely Moat Park is (despite living up the road from it!). Please keep putting these events on as they are excellent and provide something different and interesting for local residents. Many thanks 09/10/23

LEISURE & COMMUNITY WELLBEING

Dear Mr Burns, I would like to take this opportunity, on behalf of Friends of Parkview, to thank you for the ASD Spooktacular Silent Disco that took place on 27 October 2023, which was aimed at children with sensory sensitivities. The feedback from parents, staff and children from both the school and the local community, regarding this event, were very positive and complimentary. We would therefore like to ask if this event could be a yearly initiative going forward. 20/12/23

REGENERATION & GROWTH

*Please pass on a HUGE thank you from the Department for Business and Trade (DBT) to all at Lisburn and Castlereagh City Council for your involvement in delivering our Made in Northern Ireland, Sold to the World Exporter Roadshow last Thursday. The feedback we have received from attendees has been overwhelmingly positive and we're delighted the event pulled together to be such a success. This would not have been possible without the fantastic support from the council, both in the lead up and on the day – so thank you to all involved, it is very much appreciated!
06/10/23*

REGENERATION & GROWTH

We as a family of four attend your Light Festival in the Castle Gardens Lisburn. This was a great experience and topped of by a brilliant Santa. My son has mild autism and you would never know what he would come out with. He asked Santa for a pet Goose and I have to say the Santa you have tonight Thursday 7th December was brilliant with him and made the experience so memorable. The light show was great and the live music was a good addition. Thanks for putting this on. Pity my own council NMDC don't follow suit with something similar. Keep up the good work and pass on my compliments to the Light Show team and Santa 07/12/23

CHIEF EXECUTIVE

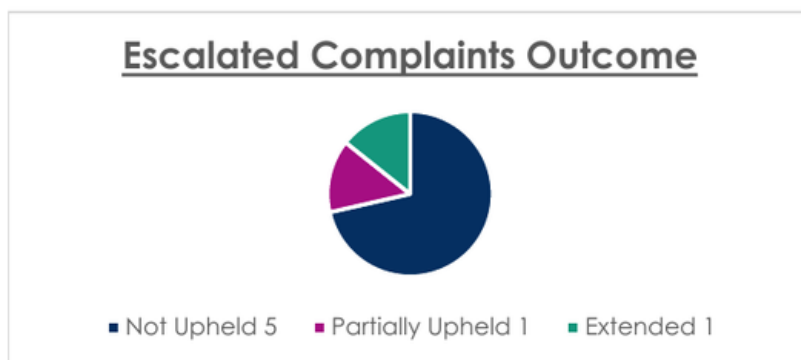
Valerie Harte, Chair of Council and myself are writing to express our gratitude and appreciation on behalf of Newry, Mourne and Down District Council for the support and assistance you and your team provided during the recent flooding emergency. The dedication and willingness of your staff to go the extra mile was truly remarkable and made a huge difference during this significant flooding event. The flood emergency was an unprecedented and required the collaborative efforts of multiple agencies and organisations. The fact that the team from your Council worked alongside our staff and other agencies provided us with much needed support in difficult and challenging conditions. This support enabled us to clean and assist those businesses/residents in the areas most greatly affected across Newry, Flurrybridge, Newcastle and Downpatrick. Your organisation's support was instrumental in providing the necessary resources and/or boosting our efforts. Please convey our sincere thanks to all the staff members across your organisation for their help during this challenging time was very much appreciated. 21/11/23

4.0 REPORTALL APP

There were **58** calls reported to Customer Care through use of the ReportAll App. The most common reasons for reported incidents on the app continue to be fly tipping and dog fouling. Other reports received were in relation to animal welfare, litter bins needing emptied, street cleansing/sweeping, litter, reports of dead animals, anti-social behaviour, graffiti, noise pollution, air pollution, facilities damaged, food safety, flags, fly posting and Non-Council issues.

5.0 ESCALATED COMPLAINTS

There were **5** complaints escalated to Stage 2 – Director Level in Q3. **Five** Stage 2 Complaints were closed, not upheld in Q3. **ONE** complaint was closed Partially Upheld. **ONE** Stage 2 complaint remains open – response date extended.



There has been 1 complaint escalated to Stage 3, NIPSO in Q3.

Reference	Date Escalated	Directorate	Complaint	Outcome
CC03	11 th December 2023	Environmental Services (EH)	Noise Concerns	Information Provided - Awaiting Decision

There have been 2 complaints closed by NIPSO in Q3.

Reference	Date Escalated	Directorate	Complaint	Outcome
CC Ref. 050007	3 rd January 2023	Regeneration & Growth *	Planning	No further action – 13 th November 2023
CC Ref. CC02	15 th August 2023	Regeneration & Growth	Planning	No further action – 2 nd November 2023

* Directorate at time of complaint was known as Service Transformation

6.0 CUSTOMER SATISFACTION SURVEY

Customer Satisfaction Surveys ask the customer to rate their communication with LCCC in relation to the handling of their complaint, it is not about the outcome of their complaint. During Q3 there were **45** surveys sent out with a return of **8**.

DEPARTMENT	EXCELLENT	GOOD	ACCEPTABLE	POOR	TOTAL
CHIEF EXECUTIVE	0	0	0	0	0
ENVIRONMENTAL SERVICES	2	0	0	0	2

LEISURE & COMMUNITY	4	0	0	0	4
REGENERATION & GROWTH	1	0	0	0	1
FINANCE & CORPORATE SERVICES	0	0	0	1	1
ODI	0	0	0	0	0
TOTAL (As a %)	7 (88%)	0 (0%)	0 (0%)	1 (12%)	8

When customers receive their Satisfaction Surveys they are asked for a one word reply. Excellent, Good, Acceptable and Poor. As the above table shows, **88%** of those who returned their survey rated their correspondence as Acceptable or above. Finance & Corporate Services were informed of the poor rating and have advised that the responder has made 2 further event bookings since this response was provided. On occasion customers will also provide a comment to accompany their rating, see below some examples:



"Thank you - the handling of my communication was excellent." 12/11/23



"Thank you for a prompt response to customer care number WE767. I rate this response as excellent. Replacement bin was delivered in 1-2 days after the request was submitted." 29/11/23



"Thanks for your email, I'm happy to supply a rating of Excellent for the manner in which my recent communication was handled by LCCC Customer Care Staff, well done!" 14/12/23



Committee:	Governance & Audit Committee
Date:	20 th March 2024
Report from:	Performance Improvement Officer

Item for:	Noting
Subject:	Service KPIs – Q3 2023/24 All Directorates

1.0 Background and Key Issues:

1.1 As part of the Council's performance management responsibilities, key performance indicators (KPIs) are reported on a quarterly basis to committee, to ensure accountability and transparency.

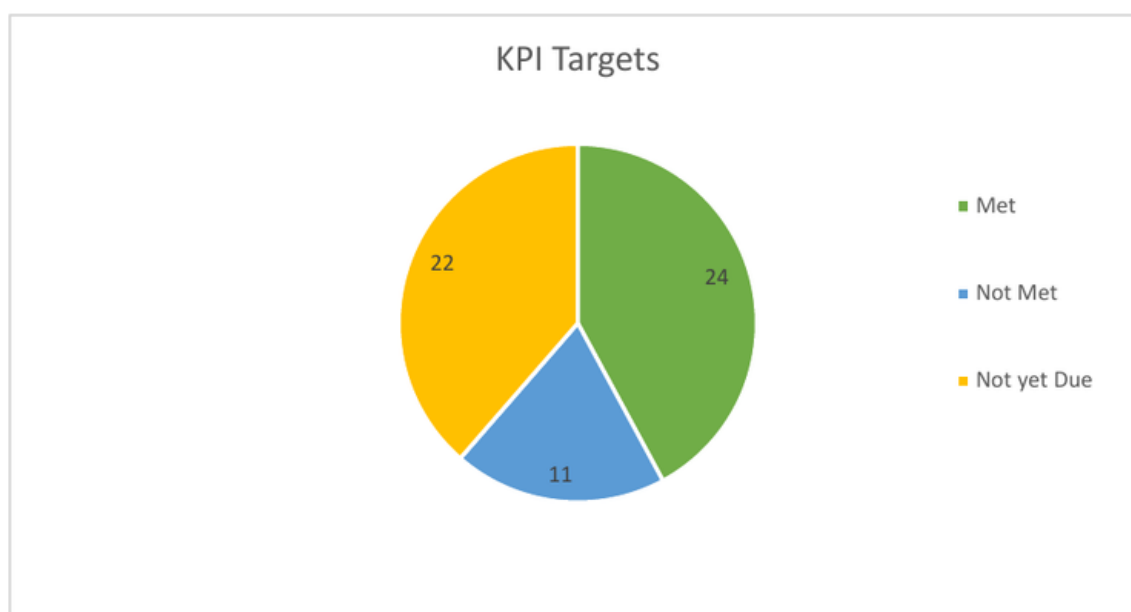
Each directorate is responsible for their service KPIs.

As part of the Council's governance responsibilities this committee will receive quarterly KPI reports for all directorates.

The purpose of this report is to present this committee with the Q3 KPIs for the period October - December 2023 inclusive.

1.2 Attached under **Appendix I – Appendix V** are reports detailing the Q3 2023/24 KPIs for each of the Council's Directorates. Of the 57 targets set:

- 24 have been met
- 11 have not been met
- 22 are not due to be measured until the end of the year



1.3 Included with each KPI is detail of the position with regard to the target set.

2.0	<p><u>Recommendation</u></p> <p>It is recommended that Members note the appended report.</p>	
3.0	<p><u>Finance and Resource Implications</u></p> <p>N/A</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
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 <u>or</u> 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 <u>or</u> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.

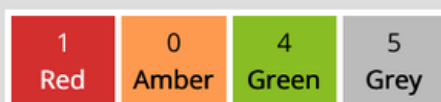
<p>Appendices:</p>	<p>Appendix I details the Q3 2023/24 KPIs for the Environmental Services Directorate. Appendix II details the Q3 2023/24 KPIs for the Finance & Corporate Services Directorate. Appendix III details the Q3 2023/24 KPIs for the Organisational Development & Innovation Directorate. Appendix IV details the Q3 2023/24 KPIs for the Leisure & Community Wellbeing Directorate. Appendix V details the Q3 2023/24 KPIs for the Service Transformation Directorate.</p>
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Performance Summary

Environmental Services

(Type = 'Service')

Thursday 7th of March 2024



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 (R)	3 Green	1 (Gy)
Operational Services	1 (G)	4 Grey	

ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING DUE 1ST JAN 24

101 : Planning Consultation % of general planning consultations responded to as a statutory consultee : % responded to within 15 working days of receipt by Environmental Health	TARGET 90%	ACTUAL 83.6%	STATUS Red
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Notes: Total number of Planning Consultations received by EHSU = 134. Total responded to within 15 working days = 112 = 83.6%. Responses could not be provided to all consultations within the required timescales due to resource pressures. Reprioritisation will occur going forward.

ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING DUE 1ST JAN 24

102 : Health & Safety Inspections review: Carry out a review of the Corporate Health & Safety function and the service it provides to the Council	TARGET No	ACTUAL No	STATUS Green
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Notes: Q3 - Review of the Corporate Health and Safety function is still ongoing.

ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING DUE 1ST JAN 24

102 : Health & Safety Inspections review: Adoption of recommendations of the review to improve the Corporate H&S function	TARGET No	ACTUAL No	STATUS Green
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Notes: Review of the Corporate Health and Safety function is still ongoing. Recommendations to be implemented as required following review of the Corporate Health and Safety function.

ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING DUE 1ST APR 2024

205 : Cemeteries - Implementation of the Cemetery Strategy: Works completed for Blaris Phase 1 cemetery extension (approximately 140 burial plots)	TARGET Yes	ACTUAL Yes	STATUS Green
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Notes: Tender process was completed in December 2022 for Phase 1a. Work on Phase 1A continued throughout Q1, Q2 and Q3 of 2023/24, and is now complete. During Q3 approximately 244 additional burial plots were made available within Lisburn New Cemetery Extension.

ENVIRONMENTAL HEALTH, RISK & EMERGENCY PLANNING DUE 1ST APR 2024

205 : Cemeteries - Implementation of the Cemetery Strategy: Planning application for Phase 1b cemetery extension to be submitted (approximately 480 burial plots)	TARGET Yes	ACTUAL	STATUS Grey
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Notes: Procurement process will be commenced for work on additional plots within Phase 1b of Lisburn New Cemetery Extension. Planning Application for 30 Blaris Road will be submitted in Q4. This KPI will not be met during 23/24 and so will be carried forward into 24/25.

OPERATIONAL SERVICES			DUE 1ST APR 24
165 : Recycling % of household waste collected by District Councils that is sent for recycling : % of household waste collected by District Councils that is sent for recycling	TARGET 50%	ACTUAL	STATUS Grey
<p>Notes: Q2 2023/24 - 54.26% (Q2 - 2022/23 - 52.6%) (the Q2 2023/24 figure is draft and has not yet been verified so is subject to amendment) NB: Quarterly recycling rates are impacted by the seasonality of waste arisings which is why 2022/23 and 2023/24 figures have been provided. (ie garden waste). Please note waste data is always a quarter in arrears due to the availability of data from waste data flow.</p>			

OPERATIONAL SERVICES			DUE 1ST APR 24
214 : Waste Collection LCCC collected municipal waste contribution to municipal waste recycling target: 55% recycling by 2025 (incremental targets set over next 3 years)	TARGET 53%	ACTUAL	STATUS Grey
<p>Notes: Q2 2023/2024 - 54.35% (Q2 2022/23 - 53.7%) (the Q2 2023/24 figure is draft and has not yet been verified so is subject to amendment). Please note waste data is always a quarter in arrears due to the availability of data from waste data flow. Recycling rates are seasonal and traditionally higher in summer months when, for example, the growing season results in higher volumes of materials collected for composting. The quarterly figure is a snapshot and should not be used to predict a 'year end' recycling rate.</p>			

OPERATIONAL SERVICES			DUE 1ST APR 24
215 : Waste Landfill Rate LCCC collected municipal waste contribution to municipal waste landfill target: Reduced to 10% or less of the total amount of municipal waste generated by 2035 (incremental targets set over next 12 years)	TARGET 36%	ACTUAL	STATUS Grey
<p>Notes: Q2 2023/24 - 35.33% (Q2 2022/23 - 36%) (the Q2 2023/24 figure is draft and has not yet been verified so is subject to amendment). Please note waste data is always a quarter in arrears due to the availability of data from waste data flow.</p>			

OPERATIONAL SERVICES			DUE 1ST APR 2024
204 : Waste Kerbside model for collection, treatment, and disposal of household waste: Finalise the Outline Business Case for the kerbside model and progress Full Business Case for final approval	TARGET Yes	ACTUAL Yes	STATUS Green
<p>Notes: Full Business Case approved by Council on 24 January 2023. Equality consultation completed and presented to Members in December 2023. However, committee decision to hold in abeyance pending DAERA guidance.</p>			

OPERATIONAL SERVICES			DUE 1ST APR 24
58 : Landfill The amount (Tonnage) of biodegradable Local Authority Collected Municipal Waste that is landfilled: Tonnage of biodegradable waste landfilled.	TARGET 16,444	ACTUAL	STATUS Grey
<p>Notes: Q2 2023/24 - 3080.7 tonnes (this figure is draft and has not yet been verified so is subject to amendment). Please note waste data is always a quarter in arrears due to the availability of data from waste data flow.</p>			

Performance Summary

Finance & Corporate Services

(Type = 'Service')

Wednesday 6th of March 2024



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

Facilities Management	1 Green
Finance	2 Red

FACILITIES MANAGEMENT

DUE 1ST JAN 24

199 : Customer Experience Rating - Customer satisfaction levels in relation to a number of LVI service offerings such as weddings/registration, and conferencing : **Customer Satisfaction**

TARGET
85%

ACTUAL
97%

STATUS
Green

Notes: This customer satisfaction rating refers to the Theatre and Conferencing and Registration services

FINANCE

DUE 1ST JAN 24

16 : Finance Prompt Payment Indicators : **Percentage supplier invoices paid within 30 Days**

TARGET
100%

ACTUAL
88.19%

STATUS
Red

Notes: This target will remain challenging until the introduction of a new finance system. The new system is in implementation stage. The average across NI Councils for quarter 3 was 91%. Performance is now kept under review at CMT.

FINANCE

DUE 1ST JAN 24

16 : Finance Prompt Payment Indicators : **Percentage supplier invoices paid within 10 days**

TARGET
90%

ACTUAL
56.62%

STATUS
Red

Notes: This target will remain challenging until the introduction of a new finance system. The new system is in implementation stage. The average across NI Councils for quarter 3 was 71%. Performance is now kept under review at CMT.

Performance Summary

Organisational Development & Innovation

(Type = 'Service')

Thursday 7th of March 2024



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

Category	Red	Amber	Green	Grey
Organisational Development & Innovation	2	0	0	0
HR&OD	1 (R)	0	5	0
IT & Commercialisation	1 (R)	0	2	1 (Gy)

HR&OD			DUE 1ST JAN 24
14 : Employee Training Number of hours of off the job training per employee: Number of Hours	TARGET 9	ACTUAL 12.22	STATUS Green
<p>Notes: There has been an increase in the number of training hours per employee, largely owing to the delivery of Microsoft 365 training for all staff that took place over October/November 2023, and a large proportion of health and safety training that was due for renewal.</p>			

HR&OD			DUE 1ST JAN 24
15 : Elected Member Training Total number of hours of training per elected member: Number of Hours	TARGET 6	ACTUAL 8.35	STATUS Green
<p>Notes: The Council has delivered a comprehensive induction programme for Members following on from May 2022 Elections. This is included training for new and existing members across a range of subject areas. The Elected Member Development Steering Group will focus on a new strategy going forward which will incorporate further developmental and recommended training modules.</p>			

HR&OD			DUE 1ST JAN 24
221 : Apprentices Number of apprentices : Number of apprentices recruited and in post	TARGET 18	ACTUAL 19	STATUS Green
<p>Notes: The Council currently has 19 Apprentices which includes existing and new intake from 2023. In consideration of Apprentices completing their programme and course of study the Council will liaise with Heads of Service in January 2024 to determine Apprentice needs for 2024/2025.</p>			

HR&OD			DUE 1ST JAN 24
222 : HR System Implementation of HR system: Implementation of ESS System	TARGET Yes	ACTUAL Yes	STATUS Green
<p>Notes: A phased roll out was implemented to all employees and the final units were issued instructions on 27 November 23. Numbers accessing ESS will be monitored and reminders sent to encourage all to become familiar the login procedure prior to roll out of holidays and flexi.</p>			

HR&OD			DUE 1ST JAN 24
222 : HR System Implementation of HR system: Full Implementation of HR System	TARGET Yes	ACTUAL No	STATUS Red
<p>Notes: HR core and Payroll modules are now complete and in daily operation. ESS was required before holidays/flexi can be operational, so this is the next priority area following the ESS roll out noted above. A detailed plan has been prepared with a view to going live with holidays/flexi from 1 April 2024.</p>			

HR&OD			DUE 1ST APR 2024
209 : Health & Wellbeing Health & Wellbeing Initiatives : The number and type of Health & Wellbeing Initiatives delivered during 2023/24	TARGET 12	ACTUAL 12	STATUS Green
<p>Notes: In the third quarter (October 2023 – December 2023) we had 12 Health & Wellbeing initiatives. • October wellbeing focus was on Breast Cancer Stoptober – 28 days stop smoking Challenge. World Arthritis Day 2023 Managing Anxiety in Menopause zoom session. World Menopause Day – 18/10/2023 Winter Hanging Basket Workshop Flu Vacations • November wellbeing focus was on Men's Health World Diabetes Day – 14 November 2023. • December wellbeing focus was on Financial health Christmas Wellbeing Tips Christmas Wreath Workshops</p>			

IT & COMMERCIALISATION			DUE 1ST APR 2024
180 : SMARTsheet Delivery of Business Solutions: Number of new Business Solutions developed using Smartsheets to develop a new system or replace legacy systems	TARGET 2	ACTUAL 3	STATUS Green
<p>Notes: 3 x Smartsheet business solutions created during Q3: M365 Training tests and tracker, Compliments and Complaints Dashboard, Utilities Form. (The target of 3 in the first 6 months of the year was also exceeded with 4 Smartsheet business solutions created during Q1&Q2)</p>			

IT & COMMERCIALISATION			DUE 1ST APR 2024
182 : Digital & Innovation Strategy Delivery of Phase 2 of the Digital & Innovation Strategy : Number of projects delivered during Phase 2 of the Digital & Innovation Strategy	TARGET 5	ACTUAL	STATUS Grey
<p>Notes: During Q3 2 projects were delivered namely; Assets Inventory System, Citizenship Ceremony Applications Case Management System. The target for this KPI is biannual and was set as discrete rather than cumulative. The total target for the year is 10 projects. During Q1 & Q2 8 projects were delivered, therefore at end of Q3 10 projects have been delivered thus we have met the annual target. 2 more projects are in progress during Q4.</p>			

IT & COMMERCIALISATION			DUE 1ST APR 2024
183 : Full Fibre NI Council Sites connected to FFTP via FFNI : Number of Council Sites connected to FFTP via FFNI	TARGET 18	ACTUAL 4	STATUS Red
<p>Notes: 4 sites were connected to FFTP via FFNI during Q3. The biannual target of 18 sites every 6 months was set as discrete rather than cumulative. A total of 27 Council sites have been connected to FFTP by the end of Q3. The annual target of 36 is not going to be met by the end of Q4 due to Openreach not having the infrastructure in place to allow LCCC to connect the sites.</p>			

IT & COMMERCIALISATION			DUE 1ST JAN 24
195 : Telephony Telephony Performance: Telephony availability (%)	TARGET 99%	ACTUAL 100%	STATUS Green
<p>Notes:</p>			

ORGANISATIONAL DEVELOPMENT & INNOVATION DUE 1ST JAN 24

211 : Organisational Absence LCCC Organisation - The average number of working days lost due to absences reduced: Actual absence	TARGET 3.5	ACTUAL 4.94	STATUS Red
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Notes: The main reasons for absence are: Stress/Depression/Mental Health, Other Musculo-Skeletal Problems, Stomach/Liver/Kidney/Digestive, Chest and Respiratory and Other. A detailed report has been issued to the Corporate Services Committee and we have an officer dedicated to reducing absence. All directorates, apart from 1 achieved and work is ongoing to address issues in that directorate.

ORGANISATIONAL DEVELOPMENT & INNOVATION DUE 1ST JAN 24

211 : Organisational Absence LCCC Organisation - The average number of working days lost due to absences reduced: Rolling Year Absence	TARGET 13	ACTUAL 15.90	STATUS Red
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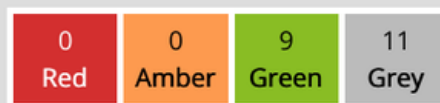
Notes: The main reasons for absence are: Stress/Depression/Mental Health, Other Musculo-Skeletal Problems, Stomach/Liver/Kidney/Digestive, Chest and Respiratory and Other. A detailed report has been issued to the Corporate Services Committee and we have an officer dedicated to reducing absence. All directorates, apart from 1 achieved and work ongoing to address issues in that directorate.

Performance Summary

Community Health & Wellbeing

(Type = 'Service')

Thursday 7th of March 2024



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

Service Area	Green	Grey
Parks & Amenities	1 (G)	10 Grey
Sports Services	4 Green	1 (Gy)
Arts, Culture and Community Services	4 Green	0

PARKS & AMENITIES			DUE 1ST APR 24
120 : Community Projects Number of new community benefit projects delivered per annum: Number of new community benefit projects delivered per annum	TARGET 3	ACTUAL 4	STATUS Green
<p>Notes: 1. Moira Community group received plants and bulbs. 2. Seymourhill Men's Shed received horticultural materials as well as assistance and plant material to rebuild planters at entrance to Seymourhill. 3. Drumbo Men's Shed received assistance to install picnic bench and base. 4. Annahilt Community group received horticultural materials.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Wallace Park	TARGET 325,000	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 189,525. Footfall during Q1&Q2 was 515,172. By the end of Q3 the total footfall was 704,697 this has exceeded the annual target of 650,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Moira Demesne	TARGET 240,000	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 96,573. Footfall during Q1&Q2 was 290,298. By the end of Q3 the total footfall was 386,871 we are on target to achieve the annual target of 480,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Moat Park	TARGET 175,000	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 60,726. Footfall during Q1&Q2 was 164,674. By the end of Q3 the total footfall was 225,400. Due to the impact of Ulster Hospital staff no longer using the Moat Park car park to walk to work and now having their own designated car park, the annual target of 350,000 may not be met by end of March 2024.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Castle Gardens	TARGET 60,000	ACTUAL	STATUS Grey
<p>Notes: October - December 2023 81,843 Footfall in Q3 (October - December 2023) was 81,843. Footfall during Q1&Q2 was 71,686 By the end of Q3 the total footfall was 153,529 we have exceeded the annual target of 120,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Comber Greenway	TARGET 62,500	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 31,185. Footfall during Q1&Q2 was 89,423. By the end of Q3 the total footfall was 120,608 we are on target to achieve the annual target of 125,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : McIlroy Park	TARGET 87,500	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 37,459. Footfall during Q1&Q2 was 94,270. By the end of Q3 the total footfall was 131,729 we are on target to achieve the annual target of 175,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Lagan Towpath	TARGET 82,500	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 31,348. Footfall during Q1&Q2 was 88,662. By the end of Q3 the total footfall was 120,010 we are on target to achieve the annual target of 165,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Billy Neill	TARGET 175,000	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 110,804. Footfall during Q1&Q2 was 214,281. By the end of Q3 the total footfall was 325,085 we are on target to achieve the annual target of 350,000.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Glenmore Parkland Trail	TARGET 22,500	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 October - December 2023 Phase One & Phase Two 9,271 (calibrated x 60%) Footfall during Q1&Q2 was 14,560. By the end of Q3 the total footfall was 23,831.</p>			

PARKS & AMENITIES			DUE 1ST APR 2024
201 : Park users Number of park users in key sites across the Council area. Measured by Access Counters. : Hillsborough Forest Park	TARGET 245,000	ACTUAL	STATUS Grey
<p>Notes: Footfall in Q3 (October - December 2023) was 109,604. Footfall during Q1&Q2 was 283,220. By the end of Q3 the total footfall was 392,824 we are on target to achieve the annual target of 490,000.</p>			

SPORTS SERVICES			DUE 1ST APR 24
151 : Vitality membership Annual target of Vitality members per year: Maintain the annual target of 12,500 members of our leisure facilities	TARGET 12,500	ACTUAL 15,887	STATUS Green
<p>Notes: Memberships sit at 15,887 at end of Q3</p>			

SPORTS SERVICES			DUE 1ST APR 2024
	TARGET	ACTUAL	STATUS
152 : Footfall of all Leisure facilities Number of people attending our leisure facilities: Maintain the footfall within our leisure facilities above the benchmark of 950,000 per annum	425,000		Grey
<p>Notes: Q3 Oct-Dec 2023 - footfall was 254,559. The footfall in Q1&Q2 was 477,982. The total footfall year to date is 732,541, we are on target to achieve our annual target of 950,000.</p>			

SPORTS SERVICES			DUE 1ST JAN 24
	TARGET	ACTUAL	STATUS
176 : Vitality Programme Number of classes : Number of classes available as part of the Vitality Programme	1650	2154	Green
<p>Notes: LVLV 1094, LM 529, DIIB 17, Activity Centres 514</p>			

SPORTS SERVICES			DUE 1ST APR 24
	TARGET	ACTUAL	STATUS
200 : Sports Development Number and type of engagements : Number of Sports Development engagements	4	4	Green
<p>Notes: So far there has been the following Sports Development engagements in Q1 &2: June Lisburn Half Marathon, 10k and family fun run Mens Health over 50 event July & August Sports Summer Camps Sept/Oct - Introduction to woman's Health</p>			

SPORTS SERVICES			DUE 1ST JAN 24
	TARGET	ACTUAL	STATUS
217 : Vitality Household Membership Impact of Vitality Household Membership: Maintain membership retention levels above 90%	90%	92%	Green
<p>Notes: 8% of membership was lost during Q3 (ave 493/month) / increase in new membership alongside this means total figure is 98.8% of Q2s figure</p>			

ARTS, CULTURE AND COMMUNITY SERVICES			DUE 1ST JAN 24
	TARGET	ACTUAL	STATUS
171 : Engagements Number of physical engagements by unit. (Footfall in facilities): Footfall in Community Centres	23,000	33,845	Green
<p>Notes: Bridge 3,878; Ballyoran 7,583; Enler 10,088; Moneyreagh 12,296</p>			

ARTS, CULTURE AND COMMUNITY SERVICES			DUE 1ST JAN 24
	TARGET	ACTUAL	STATUS
171 : Engagements Number of physical engagements by unit. (Footfall in facilities): Footfall in the Island Arts Centre	2,000	15,916	Green
<p>Notes: Community Arts, 11,413; Arts Education, 703; Hires, 1,486; IAC Workshops / Studio, 2,314.</p>			

ARTS, CULTURE AND COMMUNITY SERVICES			DUE 1ST JAN 24
171 : Engagements Number of physical engagements by unit. (Footfall in facilities): Footfall in the Irish Linen Centre Lisburn Museum	TARGET 27,000	ACTUAL 41,504	STATUS Green
Notes: Oct 14,056; Nov 14,206; Dec 13,242.			

ARTS, CULTURE AND COMMUNITY SERVICES			DUE 1ST JAN 24
202 : Youth Council Youth Council engagements and collaborative projects delivered: Number of Youth Council engagements and type of collaborative projects delivered	TARGET 3	ACTUAL 3	STATUS Green
Notes: 2 consultation/engagement sessions were held in Q3, in addition to this the Youth Council has been engaged in developing its citizen and leadership skills, this is a further collaborative project.			

Performance Summary

Regeneration & Growth

(Type = 'Service')

Thursday 7th of March 2024



Red = Target missed or Measure overdue
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 Green = Target met or exceeded
 Grey = Measure not yet due

Planning & Capital Development	3 Red	1 (G)	
Assets and Technical Services	1 Grey		
Economic Development	1 (R)	2 (G)	4 Grey

PLANNING & CAPITAL DEVELOPMENT

DUE 1ST JAN 24

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

TARGET
60%

ACTUAL
23.66%

STATUS
Red

Notes: The anticipated 23/24 spend, per estimates is £29,929,762. Total spend in Q3 is £7,082,530, this is 23.66%. Delays in investment decision and contract award of DIIB has impacted on expenditure profile.

PLANNING & CAPITAL DEVELOPMENT

DUE 1ST JAN 24

27 : Major Applications Average processing time for major planning applications. (Processed from date valid to decision issued or withdrawn within an average of 30 weeks): **Major planning applications processed within an average of 30 weeks.**

TARGET
30

ACTUAL
63.2

STATUS
Red

Notes: The Q3 figure reflects the number of applications being presented with S76 agreements. This is adding approximately 8 - 12 weeks to the processing time. Performance is being reported to Planning committee, new structure implemented and improvement plan in development.

PLANNING & CAPITAL DEVELOPMENT

DUE 1ST JAN 24

28 : Local Applications Average processing time for local planning applications. (Processed from date valid to decision issued or withdrawn within an average of 15 weeks): **Local planning applications processed within an average of 15 weeks.**

TARGET
15

ACTUAL
44

STATUS
Red

Notes: Our continued focus on reducing the number of older applications from 2019, 2020 and 2021 means it is unlikely that the Council will return to good performance for local applications in the short term but the implementation of a structural review and improvement plan should see an overall improvement against this target by the end of the financial year. It is important to note that legal challenges, changes in our reporting requirements, the introduction of a new IT system, and other resource constraints have cumulatively impacted on our ability to improve performance in relation to local applications. Linked to KPI 148.

PLANNING & CAPITAL DEVELOPMENT

DUE 1ST JAN 24

29 : Enforcement Cases Enforcement cases processed to a target conclusion within 39 weeks of receipt of complaint: **Enforcement cases processed within 39 weeks**

TARGET
70%

ACTUAL
88.56%

STATUS
Green

Notes: A caution should be included that these are unvalidated statistics that have been calculated internally using experimental data and are subject to change depending on publication of official stats.

ASSETS AND TECHNICAL SERVICES

DUE 1ST APR 2024

212 : Assets Rental from the Council's leased assets: **% Lettable floor space within the Council's leased assets**

TARGET
90%

ACTUAL

STATUS
Grey

Notes: Terms have been agreed for the renewal of the NILGA lease however have renewed their lease for a further 2 years. Our agent is in discussion with several interested parties for the remainder of the space. This measurement concerns Bradford Court only, the KPI will be amended for the new financial year 24/25 to measure the wider Estate which the new HoS has created a database for.

ECONOMIC DEVELOPMENT			DUE 1ST APR 24
115 : Tourism - Integrated Marketing Campaign Deliver an Integrated Marketing Campaign: Deliver Integrated Marketing Campaign during 23/24	TARGET Yes	ACTUAL Yes	STATUS Green
<p>Notes: Continues to be successfully delivered during 23/24 with the next campaign being Spring 24.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 24
178 : Regeneration - Covid-19 Small Settlements Programme Delivery of the Covid-19 Small Settlements Programme: Delivery of the Covid-19 Small Settlements Programme by end of March 2024	TARGET Yes	ACTUAL No	STATUS Red
<p>Notes: 80% Delivery of the Covid-19 Small Settlements Programme by end of March 2024 - Not on Target. Challenging delivery timeframe recognised by funders - Letter of Offer therefore extended until December 2024, to facilitate projects requiring statutory approvals. 7 projects now complete, 12 projects ongoing. 76 businesses issued with a letter of offer for Small Settlements - Rural Investment Fund, Heritage Shopfront Scheme and Rural Shopfront Schemes. The Council has received all of the grant, DFC have given agreement to extending target completion.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 2024
184 : Belfast Regional City Deal (BRCD) Workstreams: Number of workstreams being progressed under BRCD	TARGET 2	ACTUAL	STATUS Grey
<p>Notes: The annual target is 4 workstreams and as at end of Q3, three workstreams currently ongoing under BRCD - Destination Royal Hillsborough, Digital Transformation Flexible Fund, and Employability and Skills Programme. In Q4 the Innovation Challenge Fund will be progressed thus meeting the target of 4 for the year. Further update will be provided later at the end of the financial year.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 24
38 : New Jobs Number of new jobs per annum: Number of new jobs linked to business start activity and new investment	TARGET 116	ACTUAL	STATUS Grey
<p>Notes: Running Total of 55 jobs created to 2nd Qtr. LCCC handed over the DfE reporting of jobs targets to BCC at end of Sept. 23. No statistics, reporting new jobs numbers have been made available whilst the new service beds in.</p>			

ECONOMIC DEVELOPMENT			DUE 1ST APR 2024
39 : Business Solutions - New Business Conversion of local businesses attending Council led business development events through to direct business support interventions : Introduction and successful roll out of new entrepreneurship support service	TARGET Yes	ACTUAL Yes	STATUS Green
<p>Notes: NI-ESS formally launched in Nov 2023. Economic Development successfully implemented local launch in Dec 2023. Business support in the form of advice, mentoring, workshops and organising of associated local council events is now underway. As per above, LCCC is awaiting reporting on targets/progress to date from BCC.</p>			

ECONOMIC DEVELOPMENT		DUE 1ST APR 24		
44 : Rural Development Planned Programmes Rural Investment: Planned TRPSI rural business programme investment	TARGET TBC	ACTUAL	STATUS Grey	
Notes: No Change at end of 1st Qtr & 2nd or 3rd Qtrs as the Business Case is still being completed by DAERA				

ECONOMIC DEVELOPMENT		DUE 1ST APR 24		
44 : Rural Development Planned Programmes Rural Investment: Number of businesses and public sector organisation supported	TARGET TBC	ACTUAL	STATUS Grey	
Notes: No Change at end of 1st Qtr & 2nd or 3rd Qtrs as the Business Case is still being completed by DAERA				



Committee:	Governance & Audit Committee
Date:	20th March 2024
Report from:	Performance Improvement Officer

Item for:	Noting
Subject:	Performance Improvement Objectives, Case Studies & Associated KPIs – 3 rd Quarter Review

1.0	<p><u>Background and Key Issues:</u></p> <p>1.1 Council must produce an annual Performance Improvement Plan (PIP) to meet the requirements of the Local Government Act (NI) 2014.</p> <p>1.2 This PIP details the Council’s Performance Improvement Objectives for the year and how Council will deliver upon these objectives, being accountable and transparent in our activities.</p> <p>1.3 As part of Council’s performance management responsibilities, monitoring reports on all the projects that will demonstrate improvement against the Performance Improvement Objectives are reported on a quarterly basis to committee.</p> <p>1.4 Attached under Appendix I, is a quarterly monitoring document on all the projects that will demonstrate improvement against the 2023/24 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 3. This report covers the period October - December 2023 inclusive.</p> <p>1.5 Attached under Appendix II is a report from the ‘Performance Management System’ which details the Performance Improvement Key Performance Indicators (KPIs) results for the period October - December 2023 inclusive.</p> <p>1.6 There are 16 Performance Indicators for the 2023/24 financial year. Eleven KPIs were achieved at the end of Q3, one KPI was off target and the remaining four KPIs are on track to be achieved by the end of the financial year.</p> <p>1.7 The one KPI that was off target at the end of Q3 measures the Woodland and Horticulture programme participants. The numbers are lower than expected by the end of Q3 but with more programmes planned in this area for the remainder of the financial year, the acting Head of Service has provided assurance that the KPI will increase greatly in Q4.</p> <p>1.8 There are four KPIs that cannot be measured until the end of the year because the project that they are associated with is not due to take place until Q4 or they are only measured biannually.</p>
2.0	<p><u>Recommendation</u></p> <p>It is recommended that Members note the appended reports.</p>
3.0	<p><u>Finance and Resource Implications</u></p> <p>None.</p>

4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 <u>or</u> 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 <u>or</u> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.

Appendices:	Appendix I - a quarterly monitoring document including case studies of improvement for the period October - December 2023 inclusive. Appendix II details the KPI results for the period October - December 2023 inclusive.
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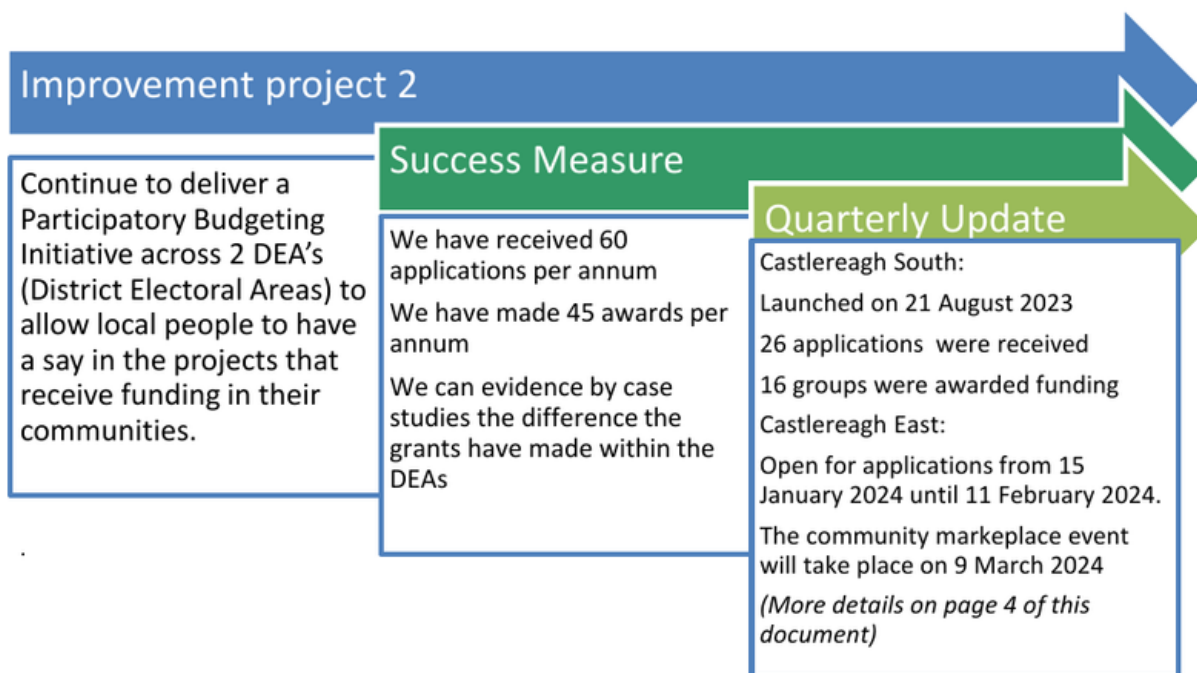
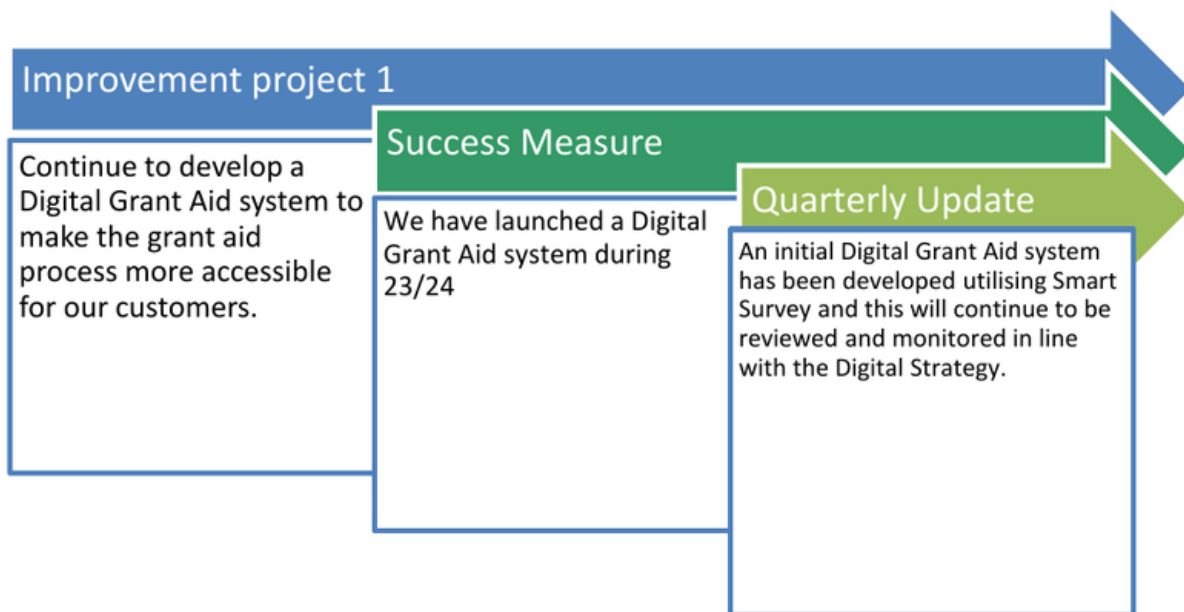
Performance Improvement Objectives 2023/24

Quarter 3, 2023/24



Performance Improvement Objective (1)

We will continue to improve our citizen engagement methods and ensure accessible processes for contacting the Council.



Improvement project 3

Continue to enable our citizens to influence decision making through community conversations in Drumbo, Killultagh and Castlereagh East

Success Measure

A village plan has been developed for Drumbo by the end of September 23 and for Killultagh and Castlereagh East by the end of March 24.
We can evidence by case studies the difference the community conversations have made.

Quarterly Update

Community engagements have been held in Drumbo and a Village Plan has been presented to the community for final consultation. Work has begun on redrafting the Castlereagh East draft Locality Plan and the Killultagh Plan, for consultation so that they can be developed by end of March 24. *(More details on page 4 of this document)*

Improvement project 4

Further develop the customer's experience when engaging with Council Services.

Success Measure

We have launched the new Customer Care system
We have launched the new Freedom of Information system

Quarterly Update

The new Customer Care system was launched in Q1.

The launch of the new Freedom of Information (FOI) system took place during Q2.

Objective 1 2023/24


We will continue to improve our citizen engagement methods and ensure accessible processes for contacting the council

Outcomes contributing to our Community Plan/Corporate Plan

- Public services are enhanced through co design and co-production
- Community ownership and management of local assets and facilities
- We feel a sense of belonging in our local neighbourhoods
- There is participation and volunteering in public and community life, arts, culture and sports by people of all backgrounds

What difference did we make?

Performance Improvement Project 1 Q3 outcomes	Feedback and Testimonials
Progress of the Digital Grant Aid system during 23/24	An initial Digital Grant Aid system has been developed utilising Smart Survey and this will continue to be reviewed and monitored in line with the digital strategy. All applications for grant aid are submitted to Council using this facility although the option remains for those who do not have access to a digital platform to submit a hard copy version.

Performance Improvement Project 2 Q3 outcomes	Feedback and Testimonials
Dates have been confirmed for the Participatory Budgeting Initiatives in each of the following 2 DEA's: Castlereagh South and Castlereagh East	<p>The participatory budgeting initiative Grand Choice was launched in the Castlereagh South DEA during Q2 on 21 August 2023. Twenty-six applications were received. The community marketplace event took place in Q3 on Saturday 21 October 2023 in St Joseph's Parish Centre, Knockbracken Drive, Carryduff. Funding of £15,000 in total was awarded to the 16 projects chosen by the public.</p> <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;">  </div> <div style="flex: 1; padding-left: 10px;"> <p><u>Case Study of Lough Moss Junior Park Run:</u> The Lough Moss Junior Park run celebrated a special milestone on Christmas Eve, marking its 200th park run at Lough Moss. 94 children participated in the event, with 11 kids achieving personal bests. The Lough Moss Junior Park run is a valuable community event which promotes physical activity, social connection, learning, giving, and taking notice of the positive impact it has on the local community. The group is grateful for the support from the Lisburn Policing and Community Safety Partnership. They used their funding to purchase a gazebo, a sound system, and refreshments to help enhance their events. The benefits of this project are summarised under the Take 5 headings:</p> <p><u>Be Active:</u> The Lough Moss Junior Parkrun is a fantastic way for children and their parents to stay active and healthy. Participating</p> </div> </div>

in the weekly 2k run provides numerous physical and mental health benefits and is a fun and engaging way to exercise. Parents can also benefit from the opportunity to stay active in a fun and supportive environment, especially if they struggle to find time for regular exercise.

Connect: The Lough Moss Junior Parkrun is more than just a run – it is a community event that brings people together. Participation allows both children and adults to connect with one another and build relationships within the diverse community of Carryduff. The cross-community benefits of the Parkrun are evident in the friendships and connections that are formed through regular participation.

Keep Learning: The Lough Moss Junior Parkrun provides an opportunity for children and parents to learn and grow. Children can develop their physical abilities and learn about the importance of regular exercise, while parents can learn about the benefits of staying active and supporting their children’s development.

Give: The Lough Moss Junior Parkrun relies on the support of volunteers to make their events successful. They are indebted to their core team of volunteers. Many young adults approach them to us seek volunteering opportunities to give back to their community by helping co-ordinate these events.

Take Notice: The positive impact of the Lough Moss Junior Parkrun on the Carryduff community has been demonstrated by the appreciation expressed by participants. They have commented on how well organised, engaging and enjoyable the runs are. The Parkrun has brought people together and fostered a sense of community, and the support from the Policing and Community Safety Partnership has allowed them to enhance the experience for all their participants.



The Castlereagh East tranche will open for applications on 15 January 2024 and the community marketplace event will be held on 9 March 2024 in St Mary’s Church of Ireland Parish Hall, Ballybeen.

Performance Improvement Project 3 Q3 outcomes **Feedback and Testimonials**

The Village Plan for Drumbo

Following the Community engagements in Drumbo the Village Plan was developed.



Performance Improvement Project 3 Q3 outcomes	Feedback and Testimonials
<p>Castlereagh East community conversation will commence in Q4. The Community Conversation for Killultagh is currently being organised to take place in Q4.</p>	<p>Priority actions were identified, several of which have been actioned e.g., environmental improvement works throughout the village with DfI and NIHE.</p>   <p>More actions will be implemented in Q4.</p>  <p><i>Case studies of the impact of this will be captured and reported upon later in the year.</i></p>

Performance Improvement Project 4 Q3 outcomes	Feedback and Testimonials
<p>Progress of launch of Customer care system and FOI system</p>	<p>The successful launch and implementation of the Customer Care System has enhanced the Council's ability to streamline service case management. Through automated email communications, customers now receive updates on their case resolution process, ensuring they remain informed and engaged throughout. Moreover, the system incorporates automated reminders for staff members assigned to specific cases, optimising task allocation and prompting timely actions. With the new system being accessibility-friendly and automated communication processes have led to improved service delivery and faster response times, ultimately boosting overall customer experience. This project serves as a clear demonstration of the council's dedication to delivering efficient and responsive services to its residents.</p> <p>The launch of the new Freedom of Information (FOI) system took place in Q2. The transition to an online submission format has streamlined the entire process, significantly reducing the</p>

Performance Improvement Project 4 Q3 outcomes	Feedback and Testimonials
	administrative burden previously associated with monitoring incoming FOI requests via email, which enables more efficient handling and timely responses to information requests.

Performance Improvement Objective (2)

We will continue to deliver Council led activities that seek to maintain and improve physical and mental wellbeing of our citizens

Improvement project 1

Improve the physical, mental and emotional wellbeing of our citizens through a number of programmes which include; developing skills in horticulture, physical wellbeing programmes and understanding the benefits of these.

Success Measure

We have provided 55 CSAW programmes with 1250 participants by the end of March 24.

We have provided 20 Woodland programmes and 20 Horticulture programmes with 1500 participants by the end of March 24.

We have provided 33 Biodiversity projects with 1420 participants by the end of March 24.

Quarterly Update

Summary C-Saw Project October-December 2023

Total C-SAW programmes	13
Total participants	373

Summary Woodland & Horticulture Programmes October- December 2023

Woodland Programmes	5
Horticulture Programmes	9
Total participants	349

Summary Biodiversity Projects October-December 2023

Total Biodiversity projects	19
Total participants	390

Improvement project 2

Respond to local labour market needs by working with our partners to provide funding to deliver a range of employability programmes. We aim to support residents within our Council area to achieve relevant qualifications that will enable them to gain employment.

Success Measure

Have supported 80 people within our Council area to achieve relevant qualifications that will enable them to gain employment.

Quarterly Update

10 Employability Initiatives have been fully recruited with a total of 141 participants enrolled on the various programmes. At the end of Q3 **94 participants** within our council area have completed their training / accreditation , giving them the opportunity to pursue new employment outcomes.

Objective 2 2023/24

We will continue to deliver Council led activities that seek to maintain and improve physical and mental wellbeing of our citizens

Outcomes contributing to our Community Plan / Corporate Plan

- We live healthy, fulfilling and long lives
- Good health will no longer be dependent on where we live or what income we have
- Older people age actively and more independently to stay well connected
- People of all ages are more physically active more often
- We enjoy good mental health

What difference did we make? Case Studies

Performance Improvement Project 1 Q3 outcomes	Feedback and Testimonials
<p>We have provided 13 CSAW programmes with 373 participants</p> <p>Total Under 18 years 122 Total 18-59 years 150 Total Over 60s 101</p>	<p><u>Downtown Centre Boccia Programme</u> - Over 6 different dates in September and October the CSAW Outreach Worker attended the Downtown Centre to deliver a Boccia programme. The programme was a great success and enjoyed by all who attended. The group enjoyed competing against each other in team games. The feedback we received was fantastic, the group coordinator said <i>"We are overjoyed with the group's participation! They had an absolute blast and they normally refuse to engage with facilitators so well done!"</i></p>  <p>We also received lovely feedback from those who participated in the Boccia programme <i>"The programme has helped me mix in with others. There isn't anything I would have changed" "Really enjoyed doing it. Jamie was very helpful and I learned about Boccia" "It give me a chance to meet new people and have fun".</i></p> 

Performance Improvement Project 1 Q3 outcomes

Feedback and Testimonials

Orchardville Dance Programme

- A 6 week Dance programme was provided for Orchardville over September and October. The group said this is an activity they have been looking forward to doing for a while but couldn't find someone that offered it, they were delighted when CSAW got in touch to say we could do it. The programme took place in Lagan Valley Leisureplex and Amber Gordon was the dance instructor. Over the 6-week programme the group learned a dance routine that they are going to use in their end of year show. We received lovely feedback from the group "I really enjoyed dancing, so much fun with my friends" "Helped with balancing and coordination" "It's made me more



happy after doing the dancing".

happy after doing the dancing".

Lisburn YMCA Horticulture Programme

- Lisburn YMCA joined CSAW at Bells Lane Allotments for an 8-week Horticulture programme during September and October. The group have participated in various activities with CSAW over the years and have really enjoyed them. They carried out various horticulture activities over the 8 weeks, including how to plant and position flowers on the garden wall at Bells Lane, making window boxes, planting seedlings in seed trays and making raspberry jam.



Skyway Club Horticulture Programme

- The Skyway Club participated in an 8-week horticulture programme at the new allotments at Lough Moss. This was the group's first programme with us, and it was great to be able to reach out and get new groups involved with our project. It was also great to be able to use our new allotment at Lough Moss, having an allotment at Lough Moss makes it much more feasible for groups in the area to have a programme with us without having to worry about transport arrangements. The group carried out various activities over the 8 weeks including

Performance Improvement Project 1 Q3 outcomes

Feedback and Testimonials

planting and harvesting various fruit and vegetables, making bug hotels, making nest boxes and learning about soil quality and the affect it has on growing.

Pumpkin Carving Workshop - It was great to be able to provide these workshops again this year after being so successful last year. There is always a huge demand for these workshops, there were over 250 emails in the first 24 hours looking to book a place. Unfortunately, the workshop couldn't be provided to all those who wanted to attend but CSAW were able to put on 4 workshops (30.10.23 x2 &

31.10.23 x2) with a total of 155 participants. Last year all the workshops were provided at Bells Lane, this year CSAW were able to use the new allotments at Lough Moss as well. CSAW try to make this workshop as fun as possible for the children, they hide the pumpkins around the allotments and allow the children to go on a pumpkin hunt before starting the carving which they all really enjoy. The children loved being competitive with their siblings and other children and loved the



competition to create the best pumpkin. CSAW received nice feedback that included "Was here with the grandchildren really enjoyed it" "Therapeutic, family time" "Times are tough and it was so lovely to go to a free family Halloween activity and not have to worry about the cost."

"Everyone was so friendly, warm and welcoming. The kids thoroughly enjoyed carving their pumpkins and we all made some lovely memories together." "Leaving the stress of mid-term behind and just being with my kids. A wonderful way to create memories".

Performance Improvement Project 1 Q3 outcomes

Feedback and Testimonials

Christmas Wreath Workshop - This was another very successful workshop from last year and enjoyed the same success again this year. CSAW ran 3 Workshops in total (x1 at Lough Moss Allotments & x2 Bells Lane). Lough Moss had a Workshop on 6th December and Bells Lane had Workshops on the 8th and 13th December. The new allotments at Lough Moss proved to be a fantastic addition this year and it was great to be able to offer these workshops to this area of the council. CSAW linked in with the Carryduff regeneration forum regarding this programme and the Pumpkin carving workshop and they were delighted that these workshops were brought to the allotments at Lough Moss



and had members attend both. This workshop

was very well received, and the following comments prove this: *“Very relaxing. Mind completely focused on wreath making for an hour and a half. Fabulous!*

Thank you.” “Calming environment and sense of pride with creation. Met expectations and more.” “I really enjoyed the workshop. It was great to do something fun amid all the busyness of Christmas”.

We have provided 5 Woodland programmes and 9 Horticulture programme with 349 participants

Other Programmes run without photos – Ten Pin Bowling, Allotment Club, Walking Group and Pilates.

Woodland programmes

Three sessions of tree and bulb planting with local schools took place during Tree week, two at Moria Demesne (37 pupils) and Friends Prep Lisburn (18 pupils) with sites in each of these schools being used. This was completed in partnership with Natural World Products who



are a local supplier of peat free compost. All trees and tools were supplied by the Council while Natural World Products made the arrangements. All the school are within our Council area and were extremely keen to get involved and all the children enjoyed the day and learnt something along


the way.

A standard tree planting session was organised for a group called ‘Forget Me Not’ from parents who are bereaved. This was a Trust event facilitated by our P&A team with 16 trees being planted with families in attendance for all 16 trees (54 people attended). The Trust

Performance Improvement Project 1 Q3 outcomes	Feedback and Testimonials
	<p>paid for the trees and our team planted these and supplied spades for the family to participate in this while also supplying some woodland bulbs that were planted around the trees.</p> <p>This event, similar to last year, was a reflective event for parents and families who have suffered bereavement of a child and within this there was a warm feeling amongst the families that there was an opportunity to symbolically remember these family members.</p> <p>Three tree giveaways were organised throughout the Council by social media with 92 people responding and a collection point was organised at Castle Gardens for before Christmas, Friday 22nd December, when approx. 95 trees were given to good homes within the Council area. The pack given was a cardboard box with a leaflet, some woodland bulbs and a tree of their choice. All those in attendance were very grateful and more giveaways were planned for the new year.</p> <p>Horticultural programmes</p> <p>Three sessions of hanging basket making were delivered in partnership with our Health Assured Well-Being team, for our staff in November. Two were held at the Arts centre where the option was given for in-person or zoom and one at Bells Lane Allotments which was in-person and a total of approx. 48 staff attended. These were a great success with the decision made to have all workshop sessions in-person going forward due to the fun and inclusive atmosphere experienced by those attending in-person. Below is a staff members comment from the day. <i>‘Just wanted to say thank you for organising this workshop, it was lovely to attend, all the Parks staff were wonderful, it was my first time at the allotments – it’s a fantastic resource for the community’</i></p> <p>A hanging basket session for our age friendly forum was delivered on the request of our age friendly team. This session was delivered on Friday 8th December and was again a great success. A cap of 15 was put on the attendance and 13 attended (2 were unable to attend on the day). 100% found the festive basket workshop very enjoyable and 92% noted that the instructor was very knowledgeable with the remaining stating it was good. The group was asked for suggestions for improvements and their answers are shown here:</p> <p>Four Christmas wreath workshops were delivered by our team in partnership with the Health Assured Well-Being team for our staff on Wednesday 6th & Thursday 7th December and, as stated above, the commitment was made to</p>



- It was perfect. Well done to all concerned.
- No need for improvement. Thank you.
- Have more please !!!
- Can't think of any ... I thought it was a great wee morning, thank you.
- None, this was a very enjoyable event and I hope to take part in future events.
- More of the same
- Quite please with plenty to do. Learn something new
- Perhaps give the location address or picture on a map.
- No improvement needed, and lovely to have everything supplied.

Performance Improvement Project 1 Q3 outcomes	Feedback and Testimonials
<p>We have provided 19 Biodiversity projects with 390 participants</p>	<p>have these all in-person. This turned out to be a fantastic success with approx. 72 in attendance over the four sessions with the Lagan Valley Island sessions filling up very quickly even with a capacity of 25 per session. These were very enjoyable sessions, although very noisy, which allowed teams and staff to mix in a friendly and learning environment. This is a comment that was received: <i>'Thanks so much for another lovely Christmas Wreath workshop. I really enjoyed it.'</i></p> <p>Finally, our team attended Lisburn police station to deliver a workshop for our local police officers. This was to be a 2hr open door workshop, as many officers were on response duty, and the workshop quickly filled up with approx. 25 police staff in attendance. This was a fun and enjoyable experience had by all, including our staff, with a good friendly bit of competition among the officers. <i>(unfortunately the officers were prohibited to be in the photos)</i>. Please see the comments from the organiser. <i>'I just wanted to drop a few lines to express my thanks to you and your colleagues for your input with us last week. As "something new" I wasn't sure how it would go down, but am pleasantly surprised by how much our people enjoyed your time with them and for what they got out of it. This is in no small measure to yourself and the two "Mark's" for your approachable and generous manner which enabled people to relax in an enjoyable atmosphere.'</i> T/Chief Inspector at Lisburn Police station.</p>  <p>Please refer to pages 16-20 of this document to review</p>

Performance Improvement Project 2 Q3 outcomes **Feedback and Testimonials**

Have supported 94 people within our Council area to achieve relevant qualifications that will enable them to gain employment.

10 Employability Initiatives have been fully recruited with a total of 141 participants enrolled on the various programmes. Currently **94 participants** within our council area have completed their training/accreditation to date, giving them the opportunity to pursue new employment outcomes.

Case Study from the Self-Employment Support Programme




Abdelrahman left University without a job and knew that he wanted to establish his own business from a young age. He took part in the Lisburn and Castlereagh Labour Market Partnership programme in 2023 to help him achieve his



goals of self-employment. He took the opportunity to avail of the training and one to one mentoring and worked with his mentor to set out a vision for his new business called Physio Express (www.physioexpress.co.uk).



Using the funding on offer under the Self-Employment Support Programme, he bought vital equipment to help him with the setup of Physio Express, such as a treatment table. Physio Express is a unique business that offers a new way of accessing qualified professional physio support at the site of the customer for their convenience. Since establishing dedicated Physio Express Abdelrahman has become a physiotherapist for Antrim Women's Football Club and Glentoran FC and continues to grow his business.

Abdelrahman said "The programme has been very beneficial in helping me understand my idea and build upon it. With the mentoring support, I have been able to get my business into the market."

Biodiversity Events	Date	Venue	Visitor Numbers	Brief Description
8 Projects Dundonald Gardening club	3rd, 10th , 17th Oct 7th, 14th, 21st, 28th,Nov and 5th Dec	Moat Park	Approx 10 children each week = 80 in total	As part of the continued partnership working between the Biodiversity Officer and Dundonald Primary school maintaining the wildlife garden and planting schemes to enhance biodiversity within Moat Park, 8 projects have been completed last term.
Litter pick with SERC Students	19th October 2023	Council Offices walking along the Tow Path	19th October 2023	Council Offices walking along the Tow Path
Walk and talk on Biodiversity and Water Quality	17th November 2023	Council Offices walking along the Tow Path	Approx 20 people	<p>The Biodiversity Officer organised a nature walk and talk along the River Lagan as part of a Water Quality funded project. The aim was to highlight water quality issues, promote biodiversity and the Councils efforts to reduce pesticide use within council sites, to improve water quality along the River Lagan.</p> 
Bat Talk Old Warren Primary School	21st November 2023	School	P6 +P7 Approx 35 Children	<p>The Biodiversity Officer delivered bat talks with DEA funding, to Nursery school children. The Councils appointed Bat ecologist Dr Kerry Crawford delivered an educational talk on the importance of bats and their protection whilst showing the children an up-close look at her preserved bats.</p> <p>Feedback:</p>

				<p>Kerry was great we learnt a lot. I liked finding out that the bats had a eco location My favorite bat was the long eared bat. I couldn't believe we had 8 different types of bats in Northern Ireland and they live until they are 15.</p>	
Biodiversity Talk and Walk	21st November 2023	School	P5	<p>The Biodiversity Officer organised a biodiversity talk and walk within the school grounds with DEA funding, to Old Warren Primary School children. The Councils appointed ecologist DR Kerry Kennedy delivered an educational talk on the importance of biodiversity and identification of tree species and various insects and birdlife present within the school grounds.</p>	
Bulb Planting Old Warren Primary School	22nd November	School	Approx 30 children	<p>The Biodiversity Officer was invited to plant bulbs within the school grounds of Old Warren PS. Feedback: Thanks for today the P3s loved the planting here are some photos and this is what they said. I liked patting the soil. I loved planting the bulbs. I liked digging. I liked being outside it was fun. I found a big worm.</p>	

<p>Bat talk with Pond Park Primary School</p>	<p>23rd November 2023</p>	<p>School</p>	<p>23rd November 2023</p>	<p>The Biodiversity Officer delivered bat talks with DEA funding, to Nursery school children. The Councils appointed Bat ecologist DR Kerry Kennedy delivered an educational talk on the importance of bats and their protection whilst showing the children an up close look at her preserved bats.</p> <p>Feedback: <i>This was a great activity for the children. Perfectly pitched with just the right amount of information. It was responsive to the children's needs and they really enjoyed it. We are already looking forward to next year! Many Thanks M Fleck</i></p> 
<p>Bat talk with Pond Park Primary School</p>	<p>23rd November 2023</p>	<p>School</p>	<p>Approx 30 children</p>	<p>The Biodiversity Officer organised a biodiversity talk and walk within the school grounds with DEA funding, to Nursery school children. The Councils appointed ecologist DR Kerry Kennedy delivered an educational talk on the importance of biodiversity and identification of tree species and various insects and birdlife present within the school grounds.</p> 
<p>Cancelled: Walk and talk on Biodiversity and Water Quality with</p>	<p>17th November 2023</p>	<p>Council Offices walking along the Tow Path</p>	<p>Approx 30 people</p>	<p>Event was cancelled due to inclement weather.</p>

<p>SERC key skills students</p>				
<p>Walk and talk on Biodiversity and Water Quality with SERC Biology students</p>	<p>28th November 2023</p>	<p>Council Offices walking along the Tow Path</p>	<p>Approx 5</p>	<p>The Biodiversity Officer organised a nature walk and talk along the River Lagan with SERC Biology students as part of a Water Quality funded project. The aim was to highlight water quality issues, promote biodiversity and the Councils efforts to reduce pesticide use within council sites, to improve water quality along the River Lagan.</p> 
<p>Mini Beasts talk with Barbour Nursery</p>	<p>1st Dec 2023</p>	<p>School</p>	<p>Approx 50 children</p>	<p>The Biodiversity Officer organised a minibeast talk with Allan from Wee Critters with DEA funding, to Nursery school children.</p>  <p>Feedback <i>Teacher comments: "We are always delighted to have Allan visit with his "Wee Critters". This is now an integral part of our Eco-Schools Programme. He is very organised and sets the room up to immediately attract the children's attention. He has a wide range of props that he uses to emphasise the different aspects he wishes to teach the children. Allan has an engaging manner with the children, and staff, and uses humour to create a fun learning environment. Allan is always conscious of the health and safety aspects of looking at and handling his animals and explains the importance of hygiene to the children. Allan brings a variety of animals, both natural to our environment and more exotic animals, and is a wealth of information. He ia good at gauging the children's attention</i></p>

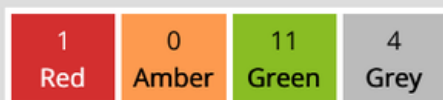
				<p><i>and listening skills and responses and will tailor his content to match. It is lovely the way that he emphasises the importance of all his animals especially the smaller ones and explains how the children can help them”.</i></p> <p>Children’s Comments: <i>“My favourite was the hedgehog because he was so spiky.” “Spider’s make webs.” “Spiders are friendly.” “I was holding the spider. He crawled on the log. I liked him the best” “I liked the hedgehog. It was so spiky. It rolled up into a ball.” “I don’t like spiders, I liked the hedgehog.” “Snails are my favourite. They were big ones.”</i></p>
Mini Beasts talk with St Itas Primary School	4th December	school	Approx 30 children	<p>The Biodiversity Officer organised a minibeast talk with Allan from Wee Critters with DEA funding, to St Itas Primary School children.</p> <p>Feedback: <i>Hi Tracey, Just a little message to say thank you for organising 'Little critters' for one of our P5 classes. I am just off the phone with Bronagh and she said the kids had a fabulous time! Many thanks, Kathleen</i></p>
<p>October – December 2023 Total of projects - 19 Total Biodiversity participants - 390</p>				

Performance Summary

All

(Type = 'Performance Improvement')

Wednesday 6th of March 2024



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

Economic Development	1 Green
Parks & Amenities	1 (R) 6 Green
Arts, Culture and Community Services	2 Green 4 Grey
IT & Commercialisation	2 Green

IT & COMMERCIALISATION			DUE 1ST APR 24
225 : Digital systems New systems provided to develop customer experience: Launch of the new Customer Care System	TARGET Yes	ACTUAL Yes	STATUS Green
Notes: The new Customer Care system was launched in Q1 of 2023/24			

IT & COMMERCIALISATION			DUE 1ST APR 24
225 : Digital systems New systems provided to develop customer experience: Launch of the new FOI system	TARGET Yes	ACTUAL Yes	STATUS Green
Notes: The new FOI system was launched in Q2 of 2023/24			

ECONOMIC DEVELOPMENT			DUE 1ST APR 2024
226 : Labour Market Partnership programme Participants: Number of participants in the Labour Market Partnership programme	TARGET 40	ACTUAL 94	STATUS Green
Notes: 94 participants have successfully completed the programme by the end of Qtr 3. This means the annual target of 80 participants has already been exceeded.			

PARKS & AMENITIES			DUE 1ST JAN 24
187 : Biodiversity Projects Number of biodiversity projects delivered during 2023/24: Number of biodiversity projects delivered during 2023/24	TARGET 5	ACTUAL 19	STATUS Green
Notes: 19 programmes delivered during Q3, this KPI will increase in Q4.			

PARKS & AMENITIES			DUE 1ST JAN 24
187 : Biodiversity Projects Number of biodiversity projects delivered during 2023/24: Number of participants in the biodiversity projects	TARGET 250	ACTUAL 390	STATUS Green
Notes: 390 participants during Q3, with more programmes planned for the remainder of the financial year the number of participants will increase in Q4.			

PARKS & AMENITIES			DUE 1ST JAN 24
189 : CSAW programmes CSAW programme KPIs: Number of CSAW programmes delivered during 2023/24	TARGET 15	ACTUAL 18	STATUS Green
Notes: 18 programmes in Q3, with more programmes planned for the remainder of the financial year, this KPI will increase in Q4.			

PARKS & AMENITIES			DUE 1ST JAN 24
189 : CSAW programmes CSAW programme KPIs: Number of CSAW programme participants during 2023/24	TARGET 320	ACTUAL 373	STATUS Green
<p>Notes: 373 participants in Q3, with more programmes planned for the remainder of the financial year, the number of participants will increase in Q4.</p>			

PARKS & AMENITIES			DUE 1ST JAN 24
213 : Sustainability Projects Woodland & Horticulture programmes: Number of woodland programmes	TARGET 5	ACTUAL 5	STATUS Green
<p>Notes:</p>			

PARKS & AMENITIES			DUE 1ST JAN 24
213 : Sustainability Projects Woodland & Horticulture programmes: Number of horticulture programmes	TARGET 5	ACTUAL 9	STATUS Green
<p>Notes:</p>			

PARKS & AMENITIES			DUE 1ST JAN 24
213 : Sustainability Projects Woodland & Horticulture programmes: Number of participants	TARGET 500	ACTUAL 349	STATUS Red
<p>Notes: 349 participants during Q3. The year to date figure at the end of Q3 is 686 participants, with more programmes planned for the remainder of the financial year the number of participants will increase in Q4.</p>			

ARTS, CULTURE AND COMMUNITY SERVICES			DUE 1ST APR 24
190 : Participatory Budgeting Participatory Budgeting initiative across 2 DEAs during 2023/24: Number of applications received	TARGET 60	ACTUAL	STATUS Grey
<p>Notes: Castlereagh South: Launched on 21 August 2023 26 applications were received 16 groups were awarded funding. Castlereagh East: Open for applications from 15 January 2024 until 11 February 2024. The community marketplace event will take place on 9 March 2024. (Updates on the total number of applications received and the number of awards made will be provided at the end of the financial year.)</p>			

ARTS, CULTURE AND COMMUNITY SERVICES			DUE 1ST APR 24
190 : Participatory Budgeting Participatory Budgeting initiative across 2 DEAs during 2023/24: Number of awards made	TARGET 45	ACTUAL	STATUS Grey
<p>Notes: Castlereagh South: Launched on 21 August 2023 26 applications were received 16 groups were awarded funding. Castlereagh East: Open for applications from 15 January 2024 until 11 February 2024. The community marketplace event will take place on 9 March 2024 (Updates on the total number of applications received and the number of awards made will be provided at the end of the financial year.)</p>			

ARTS, CULTURE AND COMMUNITY SERVICES

DUE 1ST APR 24

218 : Grant Aid Digital Grant Aid System: **A digital grant aid system has been developed**

TARGET
Yes

ACTUAL
Yes

STATUS
Green

Notes: An initial Digital Grant Aid system has been developed utilising Smartsheet and this will continue to be reviewed and monitored in line with the Digital Strategy.

ARTS, CULTURE AND COMMUNITY SERVICES

DUE 1ST APR 24

219 : Community Conversations In Drumbo, Killultagh & Castlereagh East: **Village plan developed for Drumbo by end of September 23**

TARGET
Yes

ACTUAL
Yes

STATUS
Green

Notes: Village Plan has been developed and presented to the community for final consultation.

ARTS, CULTURE AND COMMUNITY SERVICES

DUE 1ST APR 24

219 : Community Conversations In Drumbo, Killultagh & Castlereagh East: **Village plan developed for Killultagh**

TARGET
Yes

ACTUAL

STATUS
Grey

Notes: Work has begun on developing the Killultagh Village Plan, for consultation so that they can be developed by end of March 24.

ARTS, CULTURE AND COMMUNITY SERVICES

DUE 1ST APR 24

219 : Community Conversations In Drumbo, Killultagh & Castlereagh East: **Village plan developed for Castlereagh East**

TARGET
Yes

ACTUAL

STATUS
Grey

Notes: Work has begun on redrafting the Castlereagh East Village Plan, for consultation so that the Plan can be developed by end of March 24.



Committee:	Governance & Audit Committee
Date:	20th March 2024
Report from:	Performance Improvement Officer

Item for:	Decision
Subject:	Draft Performance Improvement Objectives & Projects 24/25

1.0	<u>Background and Key Issues:</u>	
1.1	Council must identify Improvement Objectives each year to form part of an annual Performance Improvement Plan to meet the requirements of the Local Government Act (NI) 2014.	
1.2	Attached under Appendix I is a copy of the DRAFT Performance Improvement Objectives and Projects for 2024/25.	
1.3	Consideration has been given to an observation by NIAO around the continuation of Performance Improvement Objectives and Projects from previous years. This stated that LCCC should improve comparison with previous year's performance. If objectives and projects are continued trend analysis will be improved.	
1.4	These objectives and projects have been developed and it is planned to carry out a public consultation on these during April and May 2024.	
1.5	Any comments and suggested amendments from consultees will be incorporated where appropriate in producing the final Performance Improvement Plan which will be brought to this Committee in June.	
1.6	Once the plan has been approved by Council it must be published by 30th June 2024, to meet the requirements of the legislation.	
1.7	These reports are presented for consideration and scrutiny as appropriate.	
2.0	<u>Recommendation</u>	
	It is recommended that Members agree to the Performance Improvement Objectives and Projects for 2024/25.	
3.0	<u>Finance and Resource Implications</u>	
	N/A	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 or 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 <u>or</u> rationale why the screening was not carried out.	No – not applicable as the purpose of this report is to provide performance data.

Appendices:	Appendix I – DRAFT Performance Improvement Objectives & Projects 2024/25
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Performance Improvement Objectives 2024/25 – Proposed Approach

1.0 PURPOSE OF REPORT

The purpose of this report is for the Governance & Audit Committee to consider the Performance Improvement Objectives for 2024/25 which will focus on the Council's priorities and the measures of success from the Corporate Plan 24-28.

2.0 CONTEXT AND APPROACH

The Council had 2 Performance Improvement Objectives in 2023/24 and they were:

1. We will continue to improve our citizen engagement methods and ensure accessible processes for contacting the Council.
2. We will continue to increase participation in Council led activities that seek to maintain and improve physical and mental health and wellbeing for our citizens.

The NI Audit Office recommended in their 2022 Performance Audit that Council should consider retaining improvement objectives and projects to demonstrate a track record of improvement. Council has had these 2 objectives for the past three years with different improvement projects each year.

The **proposed** Performance Improvement Objectives & Projects for **2024/25** are:

- 1. We will continue to improve our citizen engagement methods and ensure accessible processes for contacting the Council.**
 - a. We will improve the customer's experience when engaging with Council Services by providing outreach support to residents who are not digitally enabled, ensuring no one is left behind. This means residents who are not able to connect to our services digitally (via the website) will be offered alternatives. Digital devices will be provided in

specific council facilities to enable residents to carry out online council service requests.

- b. We will improve the processing times of planning applications and enforcement cases by developing and implementing a Planning Service Improvement Programme by the end of the financial year 24/25.
- c. We will enable our citizens to influence decision making through community conversations in specific Council locations.
- d. We will develop a community development toolkit to assist groups to establish and effectively manage sustainable community and / or voluntary organisation.

2. We will continue to deliver Council led activities that seek to maintain and improve the physical and mental wellbeing of our citizens.

- a. We will continue to improve the physical, mental and emotional wellbeing of our citizens through a number of programmes which include;
 - i. developing skills in horticulture and biodiversity,
 - ii. physical activity programmes,
 - iii. health programmes (GP Referral / Cardio Referral)
- b. We will continue to respond to local labour market needs by delivering a range of employability programmes. We aim to support residents within our Council area to achieve relevant qualifications that will enable them to gain employment.
- c. We will further develop our activities for all by providing more dedicated and inclusive opportunities across the Council.
- d. We will progress a pilot community ownership / lease initiative of a Council owned football pitch.

3.0 CONSIDERATIONS / OPTIONS

- Continue with the 2 Performance Improvement Objectives from 2023/24
 - With some improvement projects continuing and proposed new projects for each Improvement Objective.

- Number 1 remains a priority for the Council as the customer journey is changing all the time and this is an objective within the Civic Leadership theme of the Corporate Plan 24-28.
- Number 2 also remains a priority for the Council to continue focussing on mental and physical wellbeing and this is also an objective within the People theme of the Corporate Plan 24-28.

4.0 RECOMMENDATION

It is recommended that the Governance & Audit Committee considers and, subject to any amends, approves the proposed Performance Improvement Objectives and projects for 2024/25.

Committee:	Governance & Audit Committee
Date:	20th March 2024
Report from:	Performance Improvement Officer

Item for:	For Noting
Subject:	NIPSO Model Complaints Handling Procedure

1.0	<u>Background and Key Issues:</u>	
1.1	A review of the LCCC Customer Care Procedure was undertaken earlier this year to ensure that it was compliant with the new Model Complaints Handling Procedure (MCHP) launched by NIPSO (NI Public Services Ombudsman) on 1st July 2023.	
1.2	The MCHP recommends a standardised two staged complaints procedure throughout the public sector with stipulated timescales at each stage.	
1.3	LCCC has been operating a two staged complaints procedure with stipulated timescales at each stage since October 2021.	
1.4	NIPSO carried out a pre compliance check of all councils' complaints procedures in January and have suggested that all councils use the templates provided by NIPSO to create their Complaint Handling Procedure (CHP).	
1.5	LCCC had one document detailing the Customer Care Procedure. NIPSO has suggested that it is good practice to separate the procedure into two documents pitched at two separate audiences.	
1.6	Appendix I provides a copy of the CHP Customer Guidance Document. This document is the suggested public document explaining the Council's CHP to our customers.	
2.0	<u>Recommendation</u>	
	It is recommended that Members approve the appended reports.	
3.0	<u>Finance and Resource Implications</u>	
	N/A	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 or rationale why the screening was not carried out	TBC
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 or rationale why the screening was not carried out.	Nature of procedure would not impact those in rural areas more than urban areas.

Appendices:	Appendix I – DRAFT LCCC CHP Customer Guidance Appendix II – Equality Screening document
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Lisburn & Castlereagh City Council Complaints Handling Procedure (LCCC CHP)

Customer Guidance for Complaints Procedure

Complaints Procedure - An Overview

If you are dissatisfied with our services, please tell us. We want to make things right and learnings from these matters helps us improve our services. This Customer Guidance describes our complaints procedure and how to make a complaint. It also tells you about how we will handle your complaint and what you can expect from us.

A quick guide to the Complaints Procedure

Complaints procedure

You can make your complaint in person, by phone, by email, on our website or in writing. We have a **2 stage complaints procedure**. We will always try to deal with your complaint promptly but if it is clear that the matter will need in-depth investigation, we will talk to you about this, agree a way forward and keep you updated on our progress.

Stage 1: Frontline response

We will always try to respond to your complaint within **5 working days** if we can. If you are dissatisfied with our response, you can ask us to consider your complaint at Stage 2.

Stage 2: Investigation

We will look at your complaint at this stage if you are dissatisfied with our response at Stage 1. We also look at some complaints at this stage, if following discussion and agreement with you, it is clear that an in-depth investigation is needed.

We will acknowledge your complaint within **3 working days**. We will confirm the issues of complaint to be investigated and what you want to achieve. We will investigate the complaint and give you our decision as soon as possible. This will be after no more than **20 working days** unless there is clearly a good reason for needing more time. Should that be the case, we will advise you at the earliest opportunity.

Northern Ireland Public Services Ombudsman

If, after receiving our final decision on your complaint, you remain dissatisfied with our decision or the way we have handled your complaint, you can ask NIPSO to consider it. NIPSO will assess whether there is evidence of service failure or maladministration not identified by us which requires further investigation. NIPSO will signpost you to alternative independent reviewers and provide contact details (where relevant).

Contents:

- What is a complaint? page 4
- What can I complain about? page 4
- What can't I complain about? page 4-5
- Who can complain? page 5
- How long do people have to make a complaint? page 5
- What happens when I make a complaint? page 6
- How we will handle a complaint page 6
- Stage 1 Frontline Response page 6-7
- Stage 2 Investigation page 7-8
- What if I am still dissatisfied? page 8
- Getting help to make a complaint page 9-10
- Contact details page 10

What is a complaint?

We regard a complaint as *“any expression of dissatisfaction however made, which alleges failure on the part of the Council to perform a function or provide a service, for which it has a responsibility and that is in line with stated Council policies and procedures.”*

What can I complain about?

You can complain about things like:

- failure or refusal to provide a service
- inadequate quality or standard of service, or an unreasonable delay in providing a service
- dissatisfaction with one of our policies or its impact on the individual
- failure to properly apply law, procedure or guidance when delivering services
- failure to follow the appropriate administrative process
- conduct, treatment by or attitude of a member of staff or contractor (except where there are arrangements in place for the contractor to handle the complaint themselves)
- a concern about the actions or service of an organisation who is delivering services on our behalf
- disagreement with a decision, (except where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector
- dissatisfaction with how an element of a planning decision was administrated

Your complaint may involve more than one of the council services or be about someone working on our behalf.

What can't I complain about?

There are some things we can't deal with through our complaints handling procedure. These include:

- a routine first-time request for a service
- a first-time report of a fault
- a request for compensation only
- issues that are in court or have already been heard by a court or a tribunal (if you decide to take legal action, you should let us know as the complaint cannot then be considered under this process)
- disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process followed throughout the sector – such as planning
- a request for information under the Data Protection or Freedom of Information a request under the Environmental Information Regulations 2004
- a grievance by a staff member or a grievance relating to employment or staff recruitment

- a concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern)
- a concern about a child or an adult's safety
- an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision.
- abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our Customer Service Guidelines
- a concern about the actions or service of a different organisation, where we are not involved in the issue (except where the other organisation is delivering services on our behalf); or
- challenges to decisions made via formal decision-making channels i.e., a customer is dissatisfied with a planning decision but not with any element of the process that led to the decision.

If other procedures or rights of appeal can help you resolve your concerns, we will give information and advice to help you.

Who can complain?

Anyone who receives, requests or is directly affected by our services, or a service contracted or commissioned by us, can make a complaint to us. This includes the representative of someone who is dissatisfied with our service (for example, a relative, friend, advocate, or adviser). If you are making a complaint on someone else's behalf, you will normally need their written consent. Please also read the section on 'Getting help to make your complaint' below.

It is easier for us to address complaints if you make them quickly and directly to the service concerned. So please talk to a member of our staff at the service you are complaining about. Then they can try to resolve the issue.

When complaining, please tell us:

- your full name and contact details;
- as much as you can about the complaint;
- what has gone wrong; and
- what outcome you are seeking.

How long do I have to make a complaint?

Normally, you must make your complaint within six months of:

- the event you want to complain about; or
- finding out that you have a reason to complain.

CUSTOMER GUIDANCE

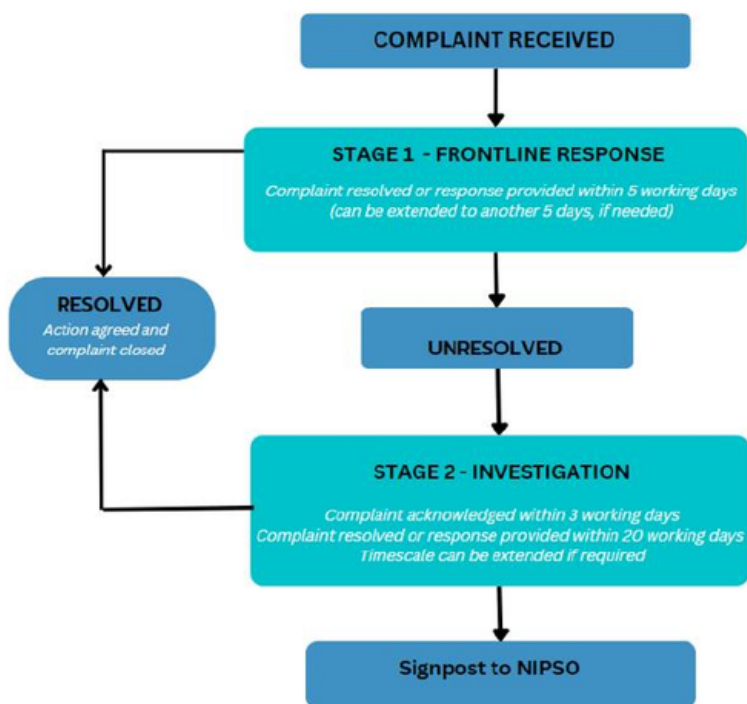
In exceptional circumstances, we may be able to accept a complaint after the time limit. If you feel that the time limit should not apply to your complaint, please tell us why.

What happens when I have complained?

Confidentiality is important in complaints handling. Personal data is held and stored by the Council in a safe and secure manner on our Customer Care system, this is in compliance with Data Protection. Personal data will not be shared or disclosed to anyone else without the subject's consent, unless required as part of a legal (including criminal) investigation.

We will always tell you who is dealing with your complaint and provide contact details. Our complaints procedure has two stages.

HOW WE WILL HANDLE A COMPLAINT



Stage 1: Frontline response

We aim to respond to complaints quickly (where possible when you first tell us about the issue). This could mean an on-the-spot apology and explanation if something has clearly gone wrong, or immediate action to resolve the problem.

We will give you our decision at stage 1 in 5 working days or less unless there are exceptional circumstances.

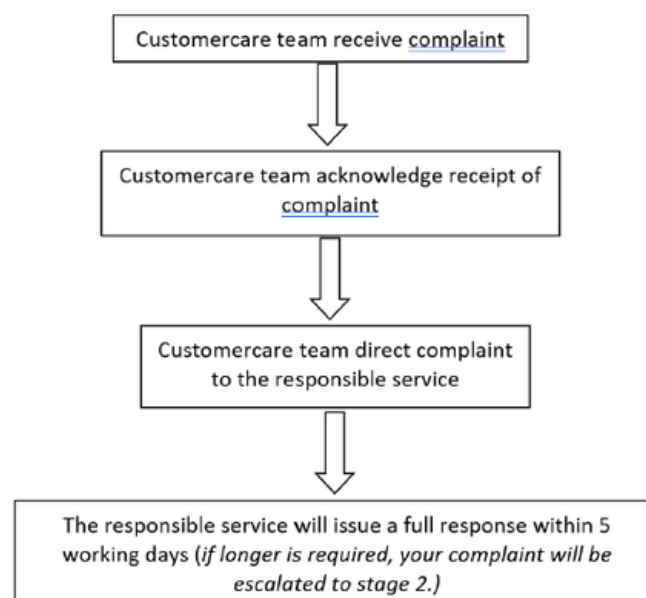
CUSTOMER GUIDANCE

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If you are not satisfied with the response, we give at stage 1, we will tell you what you can do next. If you choose to, you can take your complaint to stage 2. You must normally ask us to consider your complaint at stage 2 either:

- within six months of the event, you want to complain about or finding out that you have a reason to complain; or
- within two months of receiving your stage 1 response from us (if this is later).

In exceptional circumstances, we may be able to accept a stage 2 complaint after the time limit. If you feel that the time limit should not apply to your complaint, please tell us why.

STAGE 1**Stage 2: Investigation**

Stage 2 deals with two types of complaint: those that have not been resolved at stage 1 and those that clearly require in-depth investigation, and so are handled at this stage following discussion and agreement with you. If you do not wish your complaint to be handled at stage 1, you can ask us to handle it at stage 2 instead.

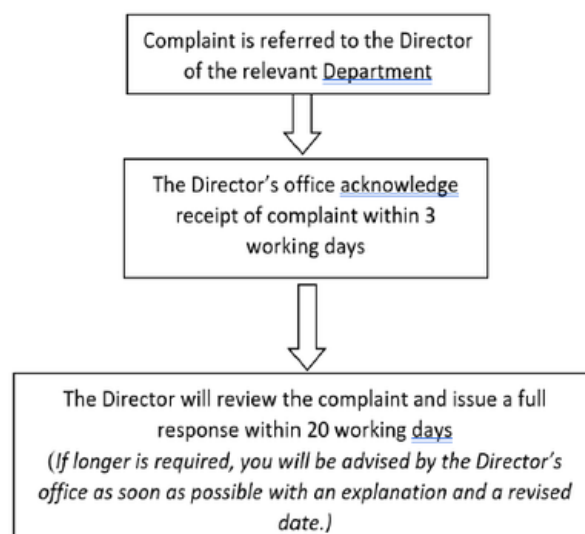
When using stage 2:

- we will acknowledge receipt of your complaint within 3 working days;
- we will confirm our understanding of the complaint we will investigate and what outcome you are looking for;
- we will try to resolve your complaint where we can (in some cases we may suggest using an alternative complaint resolution approach, such as mediation); and
- where we cannot resolve your complaint, we will give you a full response as soon as possible, normally within 20 working days.

CUSTOMER GUIDANCE

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- If our investigation will take longer than 20 working days, we will tell you. We will tell you our revised time limits and keep you updated on progress.

STAGE 2**What if I'm still dissatisfied?**

After we have given you our final decision, if you are still dissatisfied with our decision or the way we dealt with your complaint, you can ask the Northern Ireland Public Services Ombudsman (NIPSO) to look at it.

NIPSO is the final stage for complaints about the majority of public services in Northern Ireland. This includes complaints about us. NIPSO is an independent organisation that investigates complaints. The service provided by NIPSO is free. It is not an advocacy or support service (but there are other organisations who can help you with advocacy or support, please see page 9 for further details).

If you remain dissatisfied when you have a final response from us, you can ask NIPSO to look at your complaint. NIPSO generally expect complaints to be brought to it:

- within 6 months since you received correspondence from us informing you that the complaints handling procedure is complete and of your right to refer your complaint to NIPSO.

NIPSO will generally ask you to provide details of your complaint and a copy of our final response to your complaint. You can do this online at www.NIPSO.org.uk or call them on Freephone 0800 34 34 24.

You may wish to get independent support or advocacy to help you progress your complaint. See the section on 'Getting help to make my complaint' below.

NIPSO's contact details are:

The Northern Ireland Public Services Ombudsman,

33 Wellington Place, Belfast, BT1 6HN

Tel Freephone: 0800 34 34 24 /

Email: nipso@nipso.org.uk /

Web: [The office of the Northern Ireland Ombudsman \(nipso.org.uk\)](http://The office of the Northern Ireland Ombudsman (nipso.org.uk))

(If you would like to visit in person, you must make an appointment first)

The freepost address is FREEPOST NIPSO

If NIPSO cannot investigate your complaint and your complaint requires an alternative route for independent review, NIPSO will tell you and provide you with the relevant contact details.

Getting help to make my complaint

We understand that you may be unable or reluctant to make a complaint yourself. We accept complaints from the representative of a person who is dissatisfied with our service. We can take complaints from a friend, relative, or an advocate, if you have given them your written consent to complain on your behalf.

Elected members that serve Lisburn & Castlereagh City Council when acting on behalf of a complainant must adhere to the Northern Ireland Local Government Code of Conduct for Councillors (the Code). The code sets out principles and rules that a councillor must observe.

Should you have evidence that the councillor may have breached the Code of Conduct you can complain to the local government commissioner for standards the commissioner is independent of government and council and investigations are conducted with no cost to the customer.

A copy of the code and complaint form can be found here: [Northern Ireland Local Government Code Of Conduct For Councillors \(communities-ni.gov.uk\)](http://Northern Ireland Local Government Code Of Conduct For Councillors (communities-ni.gov.uk))

You can find out about advocates in your area by contacting:

Community Advice Lisburn & Castlereagh

Website: Community Advice Lisburn & Castlereagh | Advice NI

E: calc@calcni.com

CUSTOMER GUIDANCE

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50 Railway Street

Lisburn

BT28 1XP

United Kingdom

Phone: 028 92662251

Advice NI and NICVA

You can find out about advisers in your area through Advice NI and NICVA through their websites:

- [Welcome to Advice NI | Advice NI](#)
- www.nicva.org

We are committed to making our service easy to use for all members of the community. In line with our statutory equality duties, we will always ensure that reasonable adjustments are made to help you access and use our services. If you have trouble putting your complaint in writing, or want this information in another language or format, such as large font, or Braille, please tell us in person, contact us on 028-92447300, email us at Equality <Equality@lisburncastlereagh.gov.uk>

We are a JAM Card Friendly organisation, allowing people with learning difficulties, autism and communication difficulties to ask for Just a Minute of patience when they need it.

Contact details

You can complain:

- Online via web link [Complaint, comment or compliment - Lisburn & Castlereagh \(lisburncastlereagh.gov.uk\)](#)
- By email to Customer Care Mailbox: Customer.Care@lisburncastlereagh.gov.uk
- Telephone 028-92447559
- Face to Face in any of the council buildings.
- By letter to:

Customer Care

Lagan Valley Island

Lisburn

BT27 4RL

Lisburn & Castlereagh City Council

Section 75 Equality and Good Relations Screening template (Oct 2022)

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

Name of the activity/policy/project

Customer Care - Complaints Handling Procedure

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

A revised policy / procedure.

A review of the LCCC Customer Care Policy has been undertaken to ensure we are compliant as a Council with the NIPSO Model Complaints Handling Procedure.

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

- 1 The purpose of this policy is to provide a clear statement of intent with regards to the assessment, handling and investigation of customer complaints.
- 2 The aim of this policy is to ensure that all customer complaints, either written or verbal, are handled in a consistent and regulated manner and that further complaint incidents are mitigated and where possible, prevented.
- 3 This review of the policy is to ensure we are compliant as a Council with the NIPSO MCHP.

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.

This policy is not targeted at any specific Section 75 group. It is intended to benefit all ratepayers and service users.

Who initiated or developed the activity/policy/project?

The policy was drafted by the Council's Performance Improvement Officer and was approved by the Corporate Management Team as well as the G&A Committee and was adopted by full Council in September 2023. This further review was prompted by the fact that NIPSO did a pre compliance check against

their Model Complaints Handling Procedure and made some recommendations to ensure that LCCC's CHP will be complaint. This reviewed procedure will be presented to the Governance & Audit Committee for approval on 20th March 2024 and eventually adopted by full Council by the end of March 2024.

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

The policy is a corporate document and details the processes necessary for the assessment, handling and investigation of customer complaints. Complaints assessment and handling will be administered by the Customer Care Team who will then inform the relevant Department or Service. All Directors and Heads of Service are responsible for investigating complaints in relation to their service areas. Progress is 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.

While commitments are included in the policy, it can be a challenge to ensure that they are implemented as intended. The successful implementation of the policy is dependent on awareness of the policy and delivery of training and support as necessary 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 - applies to all staff

Service users – applies to all service users

Voluntary/community/trade unions- community groups as users; trade unions as staff representatives and consultees

Other Elected Members

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

Name of document/activity/policy	Who owns or implements
1. The Council's DRAFT INTERIM Corporate Plan 2021 – 2024 – Response and Recovery to the COVID-19 Pandemic. https://www.lisburncastlereagh.gov.uk/uploads/general/ICP_2021_Final.pdf	Chief Executive's Office/all services
2. Annual Performance Improvement Plans and Reports https://www.lisburncastlereagh.gov.uk/council/performance-improvement	All services
3. Communications activity	Corporate Communications
4. Equality Scheme and associated equality policies and plans	Equality Officer
5. NIPSO standardised two staged complaints procedure throughout the public sector (due at end of 2021) https://nipso.org.uk/	NIPSO

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 Customer Care Policy; analysis of previous complaints, evaluations of complaints handling, other Council Complaints policies, etc. As well as the NIPSO MCHP [Final-published-LG-MCHP.pdf \(nipso.org.uk\)](https://nipso.org.uk/)

Sec 75 Category	Details of evidence/information
Religious Belief	NI Census 2021 data for the Lisburn and Castlereagh area: 49% Protestant (or other Christian) 24% Catholic 1.5 Other religion 24% No religion 1.4% Not stated

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 22% Other</p> <p>Political party representation on LCCC from local government elections 2019 (40 Members): DUP – 15 UUP – 11 Alliance – 9 Sinn Fein – 2 SDLP – 2 Green Party NI – 1 (later moved to SDLP) Total – at least 64% unionist</p>
Racial Group	<p>Census 2021 suggests 87% of the LCCC population were born in N Ireland. The same data indicates almost 4% were from an ethnic minority (up from 96% were white (including Irish Traveller)).</p> <p>The LCCC area has small populations of various nationalities, including Syrian refugees, and a minority of residents will speak languages other than English as their first language.</p>
Age	<p>Census 2021:</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 - 33% Married or in civil partnership - 52% Separated – 3% Divorced or formerly in civil partnership - 6% Widowed or surviving partner from civil partnership – 6%</p>
Sexual Orientation	<p>Census 2021:</p> <p>Straight/heterosexual – 91% Gay, lesbian or other sexual orientation – 2% Prefer not to say or not stated – 7%</p>

<p>Men & Women Generally</p>	<p>The estimated population of LCCC local government district in 2021 census was 149,100, of which 73,059 (49%) were male and 76,041 (51%) were female.</p> <p>There is no official statistic on the number of people in N Ireland who identify as Transgender or non-binary but data from the 2021 Census for England and Wales suggests that 0.5% do not identify with the sex they were attributed at birth.</p>
<p>Disability</p>	<p>Census 2021 found that 21.7% of LCCC residents reported they had a long-term health problem or disability that limited their day-to-day activities a little or a lot (12.4% and 9.3% respectively). This is a 3.4% increase on the Census 2011 figures.</p>
<p>People with and without Dependants</p>	<p>People with dependants includes parents of young children, parents of older dependant or disabled people, carers of elderly family members and others.</p> <p>Census 2021 found that 31% of households in LCCC had one or more dependent children.</p> <p>Census 2021 also found that 12.8% of residents aged over 5 years reported that they carried out unpaid care for family members or others.</p>

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

<p>Sec 75 Category</p>	<p>Details of needs/experiences/priorities</p>
<p>Religious Belief Political Opinion Racial Group Age Marital Status Sexual Orientation</p>	<p>No evidence of different experience or needs of people according to religion or political opinion in relation to this policy, as this is available to all residents and visitors to the LCCC council area, detailed analysis of demographic and other data by equality category is not considered relevant to this screening.</p>

<p>Men & Women Generally</p> <p>Disability</p> <p>Dependants</p>	<p>People who are from a minority ethnic background may face difficulties understanding their rights and how Council’s Complaints Policy is relevant to them. Information may need to be targeted to race support groups. Information or responses to complaints may need to be translated for someone who does not have English as a first language.</p> <p>Some older people may need additional help to understand the policy or to go through the process.</p> <p>Some disabled people may need to have information about the policy or responses to complaints provided in accessible formats as a reasonable adjustment.</p>
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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*)
<p>Religious Belief</p> <p>Political Opinion</p> <p>Racial Group</p> <p>Age</p> <p>Marital Status</p> <p>Sexual Orientation</p> <p>Men & Women Generally</p> <p>Disability</p> <p>Dependants</p>	<p>The measures in the Complaints policy will potentially benefit everyone, regardless of the section 75 category that they belong to.</p> <p>It is not anticipated that there would be any negative impacts associated with implementation of this policy.</p>	<p>None</p>

*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 Political Opinion Racial Group Age Marital Status Sexual Orientation Men & Women Generally Disability People with and without Dependants		Opportunities to better promote equality and/or good relations will be considered in relation to the implementation of this policy

2 (b) 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(c) DDA Disability Duties (see Disability Action Plan 2021-2025) [new]

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?

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	This policy will not specifically impact on the promotion of good relations for any group.	None
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 in relation to this policy.
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 identify 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 this policy.

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>Screen out – no equality impact assessment and no mitigation required [go to Monitoring section]</p>	
<p>Option 2</p> <p>Screen out with mitigation – 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>Equality screening of the Customer Care Policy has concluded that a full Equality Impact Assessment is not necessary. This is because no significant impacts have been identified for any equality group. However, we are proposing a few mitigation measures to address potential issues.</p>
<p>Option 3</p> <p>Screen in 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) N/A**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.

As people who do not have English as a first language may have difficulty understanding the complaints policy and process, translation will be provided if required. Responses to complaints will also be translated if needed.

We will make reasonable adjustments for people with certain disabilities as required. For example, the policy and information about the process or responses to complaints can be provided in accessible formats as requested/required.

If an older person has difficulty understanding the policy or process, 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:

The policy will be reviewed annually. Complaints will be reported upon a quarterly basis through CMT & Governance & Audit Committee.

Part 5 - Approval and authorisation

	Position/Job Title	Date
Screened by: Kerrie-Anne McKibbin	Performance Improvement Officer	04/03/24
Annie Wilson	Equality Officer	
Approved by: Greg Bowkett	Head of Human Resources & Organisation Development	

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.



Committee:	Governance & Audit
Date:	20 March 2024
Report from:	Samantha Rice, Environmental Health Manager (Acting)

Item for:	Decision
Subject:	Corporate Risk Register

1.0	<p><u>Background and Key Issues</u></p> <p>The Council's risks continue to be monitored and managed (Appendix I), with 2 high risks remaining:</p> <ul style="list-style-type: none"> • CRR 6 Cyber Security – cyber security threat actors. • CRR 12 DIIB – due to the percentage represented on the overall programme. <p>Fluctuations since last quarter include:</p> <ul style="list-style-type: none"> • CRR 11 Burial Grounds - Reduced from high to medium risk due to completion of Phase 1a releasing 240 plots, progression of Phase 1b releasing 280 plots, and agreement to progress purchase of adjacent site releasing 219 plots (subject to planning). <p>As per the Council's Risk Management Strategy, 2 corporate risks per annum are to be considered in detail at subsequent in-year committee meetings. To date the following Corporate Risks have been scrutinised:</p> <ul style="list-style-type: none"> • CRR 5 - IT/Cyber Security (December 2020); • CRR 3 - Economic Activity (March 2021); • CRR 2 - Emergency Planning/Business Continuity (June 2021); • CRR 9 - Procurement (Sept 2021); • CRR 4 - Capital Programme (June 2022); • CRR 7 - Financial Sustainability (Dec 2022); • CRR 1 - Serious Injury (June 2023). <p>It is proposed that the next 2 risks to undergo a deep dive in the new financial year 2024/2025 are CRR 6 Cyber Security and CRR 12 DIIB owing to both risks remaining residually high.</p>
2.0	<p><u>Recommendation</u></p> <p>It is recommended that Members:</p> <ol style="list-style-type: none"> 1. Note the Corporate Risk Register (Appendix I). 2. Consider and agree CRR 6 Cyber Security and CRR 12 DIIB for a deep dive review in the new financial year 2024/2025.
3.0	<p><u>Finance and Resource Implications</u></p> <p>Not Applicable.</p>
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>

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 or 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 or rationale why the screening was not carried out. Not required – Internal documentation for Noting only.	

Appendices:	Appendix I - Corporate Risk Register Dashboard
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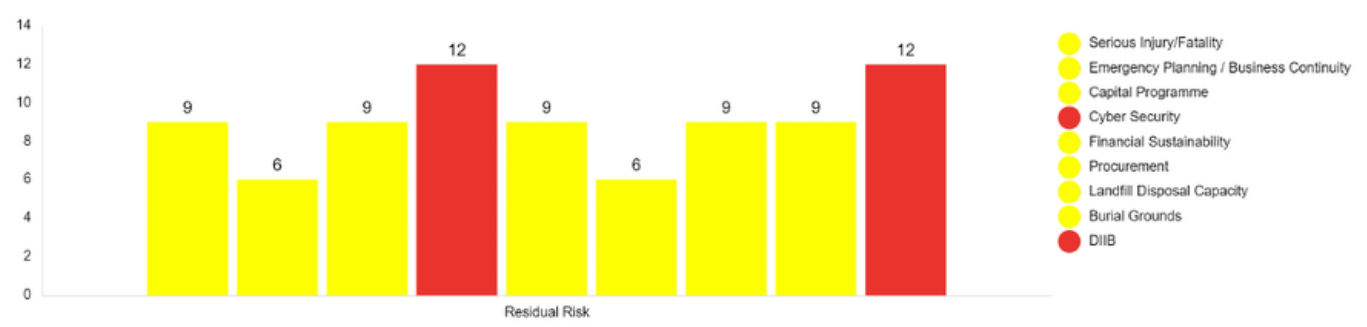


LCCC CORPORATE RISK LIVE DASHBOARD

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	Inherent Risk	Risk Description	Risk Owner	Current Controls / Additional Actions	Residual Risk	Fluctuation since last review	Rationale
🚩	CRR 001	Serious Injury/Fatality	12	Breach in internal H&S arrangements resulting in injuries / loss of life / illness.	HOS Environmental Health, Risk & Emergency Planning	CRR 1 Serious Injury / Fatality	9	↔	
🚩	CRR 002	Emergency Planning / Business Continuity	12	Inability to respond to Command, Control & Coordination arrangements or concurrent emergencies due to increased strain on current resources resulting in impact on resilience.	HOS Environmental Health, Risk & Emergency Planning	CRR 2 Emergency Planning / Business Continuity	6	↔	
🚩	CRR 004	Capital Programme	12	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	CRR 4 Capital Programme	9	↔	
🚩	CRR 006	Cyber Security	16	Cyber attack resulting in significant outage or data loss.	Director Organisation Development & Innovation	CRR 6 Cyber Security	12	↔	
🚩	CRR 007	Financial Sustainability	16	Failure to deliver balanced budget 2023/24 and longer term financial resilience and sustainability.	HOS Finance	CRR 7 Financial Sustainability	9	↔	
🚩	CRR 009	Procurement	9	Non compliance with procurement and contract regulations, policies and processes resulting in reputation/financial loss and risk of litigation.	HOS Assets	CRR 9 Procurement	6	↔	
🚩	CRR 010	Landfill Disposal Capacity	16	Uncertainty going forward in relation to the arc21 municipal waste disposal contract. Interim residual waste treatment contract to be established. Potential associated increase in costs.	HOS Operations	CRR 10 Landfill Disposal	9	↔	
🚩	CRR 011	Burial Grounds	12	Risk of insufficient LCCC burial ground capacity within the Council area.	HOS Environmental Health, Risk & Emergency Planning	CRR 011 Burial Grounds	9	↓	Reduced from high to medium risk due to completion of phase 1a releasing 240 plots, progression of phase 1b releasing 280 plots, and agreement to progress purchase of adjacent site releasing 219 plots (subject to planning).
🚩	CRR 012	DIIB	12	Potential failure to deliver the DIIB project as a result of affordability or changes in third party funding arrangements.	Director of Leisure & Comm Wellbeing	CRR 012 DIIB	12	↔	Escalated from Departmental Risk Register due to the percentage it represents on the overall programme. Resource requirement to deliver this project will challenge the organisational capacity and require continued monitoring.

Committee:	Governance and Audit Committee
Date:	20 th March 2024
Report from:	Internal Audit Manager

Item for:	Noting
Subject:	G&A Committee – Self Evaluation Report

1.0	<u>Background and Key Issues</u>	
	<p>The purpose of this report is to summarise the findings from the completed Committee members' self-evaluation returns.</p> <p>Results are based on the number of responses (9) and the number of questions. The number of responses represent only 52.9% of the membership of the Committee.</p> <p>Among the responses received from members were several partially and no responses to the questions. These areas can be addressed through training. Governance and Audit Training was scheduled for 21st November 2023 in person in LVI but was cancelled on the night as none of the members attended. This can be rescheduled through HR.</p>	
2.0	<u>Recommendation</u>	
	Members should note the contents of the report.	
3.0	<u>Finance and Resource Implications</u>	
	None	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 <u>or</u> rationale why the screening was not carried out	N/A
	<i>Internal Audit is an independent assurance function and is non-operational therefore no assessment required.</i>	
	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.	N/A
	<i>Internal Audit is an independent assurance function and is non-operational therefore no assessment required.</i>	

Appendices:	G&A Self-Assessment Report
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**Lisburn &
Castlereagh
City Council**

***Governance and Audit Committee
Self-Assessment
2023-24***

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1. Introduction

The purpose of this report is to inform G&A Members of the collated results of the self-assessment exercise and to draft a proposed Action Plan.

CIPFA guidance on best practice for Audit Committees, as laid down in the “Audit Committees – Practical Guidance for Local Authorities” suggests that an Audit Committee should review its effectiveness on an annual basis. The guidance suggests that a self-assessment questionnaire approach may be utilised. In February 2024 all Members were requested to complete the self-assessment questionnaire and return to Internal Audit who compiled responses. Please see following sections for detail of the result of this exercise.

2. Self-Assessment Questionnaire

The Committee consists of 16 elected members and 1 independent member. Completed questionnaires were received from 9 Members which represents 52.9% of the Committee. Therefore, it should be noted that the results do not show a full and complete representation of the Committee. The table in Appendix 1 shows the results of this self-assessment exercise. The Column at the right-hand side of Appendix 1 displays the Internal Audits opinion of the assessment questions.

The assessment was divided into four sections consisting of:

1. Audit Committee Purpose and Governance, questions 1-6
2. Functions of the Committee, questions 7-11
3. Membership and Support, questions 12-18
4. Effectiveness of the Committee, questions 19-25

Each question had three options for responses:

- Yes
- Partly
- No

Section 1: Audit Committee Purpose and Governance

The first section of the questionnaire deals with the purpose and governance of the committee, with questions about the terms of reference, reporting lines, communication of its role and its accountability, and consisted of six questions.

The responses to questions in section 1 were as follows:

- 91% Yes
- 9% Partly

Please see Appendix 1 for more information.

Section 2: Functions of the Committee

This area consisted of five questions and examined the functions of the committee, measured against the CIPFA Position Statement on Audit Committees in Local Authorities and Police. It considered whether the core areas of the Position Statement have been addressed, whether the wider areas have been considered appropriate to be undertaken, and whether there is any evaluation of the fulfilment of the terms of reference.

The responses to questions in section 2 were as follows:

- 79% Yes
- 19% Partly
- 2% No

Please see Appendix 1 for more information.

Section 3: Membership and Support

This section consisted of seven questions and considered the membership and support to the committee, looking at the structure and composition, the effectiveness of the chair, working relationships with internal and external audit, support for training, and administrative support.

The responses to questions in section 3 were as follows:

- 83% Yes
- 16% Partly
- 1% No

Please see Appendix 1 for more information.

Section 4: Effectiveness of the Committee

The seven questions in this section focused on the effectiveness of the committee, asking whether feedback on its performance has been obtained, if it considers how, it adds value to the organisation, and whether there is an action plan to improve any areas of weakness.

The responses to questions in section 4 were as follows:

- 68% Yes
- 29% Partly
- 3% No

Please see Appendix 1 for more information.

3. Training for Elected Members

Fraud Training

Training was provided to Members of the Governance and Audit Committee in November 2023 covering areas such as: -

- Anti-Fraud
- Bribery/Corruption

Summary guidance was sent to all members with links to the various guidance documents that are available such as -

[Internal Fraud Risk Guide | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](https://niauditoffice.gov.uk)

[Planning Fraud Risks | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](https://niauditoffice.gov.uk)

[Procurement Fraud Risk Guide | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](https://niauditoffice.gov.uk)

[Grant Fraud Risks | Northern Ireland Audit Office \(niauditoffice.gov.uk\)](https://niauditoffice.gov.uk)

[Code of Practice on Managing the Risk of Fraud and Corruption | CIPFA](https://cipfa.org.uk)

The fraud training at that time was well received by members.

Governance and Audit Committee Training

Training was scheduled for 21st November 2023 in LVI. None of the members attended therefore was cancelled on the night.

4. Conclusions and Action

Conclusion

As highlighted above and detailed in Appendix 1, the scores were generally positive in all categories. However, there were several responses being partly or no (or no response given). This would suggest that there is a lack of knowledge in some areas of the G&A Committee responsibilities.

Action

Members of the G&A Committee should attend the next scheduled Governance & Audit Committee training session to be arranged through HR.

Appendix 1 Summary of Questionnaire Responses

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
Audit committee purpose and governance					
1. Does the authority have a dedicated audit committee?	9 (100%)				Yes, the Governance & Audit Committee with a Terms of Reference.
2. Does the audit committee report directly to full council?	8 (89%)	1 (11%)		The minutes of each meeting are open to Council scrutiny before their ratification. Minutes of the committee are sent to full Council to ratify.	Yes, Audit Committee minutes are agreed quarterly at Council Meetings.
3. Do the terms of reference clearly set out the purpose of the Committee in accordance with CIPFA's Position Statement?	8 (89%)	1 (11%)			Yes, TOR in line with CIPFA best practice (item 4.2.6 on G&A Agenda).
4. Is the role and purpose of the audit committee understood and accepted across the authority?	7 (78%)	2 (22%)		I believe the role of the committee is known by the committee and the elected members as a whole.	Yes
5. Does the audit committee provide support to the authority in meeting the requirements of good governance?	8 (89%)	1 (11%)		The G&A Committee has a specific focus on good governance through reviews of Stewardship Statements, scrutiny of the Risk Registers and consideration of NIAO Reports to those Charged with Governance. One comment of I don't know.	The LCCC Code of Governance was approved and will be reviewed annually going forward.
6. Are the arrangements to hold the committee to account for its performance operating satisfactorily?	9 (100%)			Members meet with the NIAO and IA in the absence of officials annually.	Yes, this self-assessment provides a mechanism for Members to reflect on performance.

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
				G&A Comment reports to the full Council which has an opportunity to scrutinise Minutes. The appointed independent member helps ensure this.	
Functions of the Committee					
7. Do the committee's terms of reference explicitly address all the core areas identified in CIPFA's Position Statement?	7 (78%)	2 (22%)		I don't know.	Regularly reviewed
▪ good governance	8 (89%)	1 (11%)			Yes
▪ assurance framework, including partnerships and collaboration arrangements	7 (78%)	2 (22%)		This is perhaps not so prominent in the work of the Committee. Very comprehensive framework. Not sure about the partnerships and collaboration.	Yes
▪ internal audit	9 (100%)			A review of the IA function is overdue, but plans are in hand for a peer led review.	Yes
▪ external audit	9 (100%)				Yes
▪ financial reporting	8 (89%)	1 (11%)			Yes
▪ risk management	9 (100%)			Regular review of the Risk Register is supplemented by "deep dives" on selected risks over the course of the year.	Yes

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
<ul style="list-style-type: none"> ▪ value for money or best value 	6 (67%)	3 (33%)		Improvements have been made to ensure value for money is forefront in relation to procurement practices.	Yes
<ul style="list-style-type: none"> ▪ counter fraud and corruption 	8 (89%)	1 (11%)			Yes
<ul style="list-style-type: none"> ▪ supporting the ethical framework 	6 (67%)	3 (33%)		G&AC takes a particular interest in ensuring all Members comply with guidance, including Conflicts of Interest. Implied but not explicitly outlined.	TOR now amended to comply with best practice (March 2021) – The ethical values then link back to the LCCC Code of Governance Schedule approved by G&A in June 2020.
8. Is an annual evaluation undertaken to assess whether the Committee is fulfilling its terms of reference, and that adequate consideration has been given to all core areas?	8 (89%)	1 (11%)		Unsure – haven't been on G&A committee for a year yet.	This self-evaluation alongside the G&A Annual Report fulfil this requirement. The G&A Terms of Reference is also reviewed and agreed annually.
9. Has the audit committee considered the wider areas identified in CIPFA's Position Statement and whether it would be appropriate for the committee to undertake them?	2 (22%)	6 (67%)	1 (11%)	New Member – Unsure. Not aware of this. Not sure. Unsure.	Issues raised here can be addressed through Governance and Audit training.

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
				<p>The position statement doesn't appear to look at wider areas for a local authority. We do cover what it expects of us.</p> <p>I don't know.</p> <p>Where appropriate.</p>	
10. Where coverage of core areas has been found to be limited, are plans in place to address this?	5 (56%)	3 (33%)	1 (11%)	<p>New Member – unsure but would be keen to discuss with Director.</p> <p>I don't know.</p>	Issues raised here can be addressed through Governance and Audit training.
11. Has the committee maintained its advisory role by not taking on any decision-making powers that are not in line with its core purpose?	8 (89%)	1 (11%)		<p>I don't know.</p> <p>The committee effectively stays within its remit and processes are robust.</p>	Yes – Committee adheres to the G&A TOR.
Membership and Support					
<p>12. Has an effective audit committee structure and composition of the committee been selected?</p> <p>This should include:</p> <ul style="list-style-type: none"> ▪ separation from the executive ▪ an appropriate mix of knowledge and skills among the membership ▪ a size of committee that is not unwieldy. ▪ consideration has been given to the inclusion of at least one independent 	9 (100%)			<p>I believe this has been achieved.</p> <p>With every election there is always a loss of some experienced members, however, the Council takes steps to ensure its members are trained and experience still remains amongst returning members.</p>	<p>The Chairmen and Vice-Chairmen of the Standing Committees are elected each year at the Annual Meeting of Council.</p> <p>LCCC G&A Committee also has an Independent Member.</p>

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
member (where it is not already a mandatory requirement)					
13. Have independent members appointed to the committee been recruited in an open and transparent way and approved by the full council or the PCC and chief constable as appropriate for the organisation?	9 (100%)			I believe one Independent Member sits on the committee.	Yes, one independent Member included within G&A.
14. Does the chair of the committee have appropriate knowledge and skills?	8 (89%)	1 (11%)		<p>The Chair is an elected Member and as such does not necessarily bring in depth knowledge and skills of the Audit function although appropriate training is provided.</p> <p>New chair each year, but all seem to handle the needs of the post.</p> <p>I believe so.</p> <p>As the current chair. I feel well equipped to carry out the role. Others will have a fully independent comment on this.</p>	<p>All G&A Members last received Governance and Audit training in November 2019.</p> <p>Anti-fraud, Bribery & Corruption training was provided on the 14th and 27th November 2023 via Zoom. All members were provided with relevant guidance afterwards.</p> <p>The Governance and Audit Committee training was scheduled for 21st November 2023 but no elected member turned up.</p>
15. Are arrangements in place to support the committee with briefings and training?	7 (78%)	2 (22%)		<p>Training and workshops are in place and very comprehensive.</p> <p>Further training would be welcomed.</p>	Training has been provided to G&A Members in November 2019 –

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
				Some training sessions have occurred, but these poorly communicated, and members were not able to attend. Think this could be rearranged.	Issues raised here can be addressed through Governance and Audit training.
16. Has the membership of the committee been assessed against the core knowledge and skills framework and found to be satisfactory?	2 (22%)	6 (67%)	1 (11%)	<p>Unsure would need more information.</p> <p>Unsure.</p> <p>Members are chosen by group leaders. I can't speak for other groups, but our strengths are taken into account when choosing.</p> <p>I don't know. The majority of members are elected, and membership of the committee allocated in line with D'Hondt. I do not know if this is applicable.</p>	Internal Audit will follow this up with the Chair and Vice Chair to ascertain the processes involved and where appropriate will liaise with HR to address training needs.
17. Does the committee have good working relations with key people and organisations, including external audit, internal audit and the CFO?	8 (89%)	1 (11%)		<p>I believe so.</p> <p>Yes, the relationships are healthy but not to the extent where honesty and independent thoughts are affected.</p>	<p>Yes, Annually the G&A Members have a closed session with both IA and EA only. CEO, CFO, IA and EX Audit attends all G&A meetings.</p> <p>The Chair and Vice Chair has unfettered access to</p>

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
					the Internal Audit Manager.
18. Is adequate secretariat and administrative support to the committee provided?	9 (100%)			Excellent support. I believe so. Minute taking is accurate.	Yes, Members Services attend and service each G&A Meeting.
Effectiveness of the committee					
19. Has the committee obtained feedback on its performance from those interacting with the committee or relying on its work?	5 (56%)	3 (33%)	1 (11%)	Not to my knowledge. IA takes feedback on client satisfaction which is fed into G&AC. Some feedback form NIAO. The chair would get regular feedback in briefings; the rest of the committee – less so. This is the first time I'm aware of feedback being sought. However, there are internal and external audits in place and to good standard.	A report from this committee is provided to full Council. Further, the appointment of an independent member provides an opportunity for further feedback.
20. Are meetings effective with a good level of discussion and engagement from all members?	7 (78%)	2 (22%)		Sometimes. Sometimes involvement is limited to a small number of individuals, though I do not feel this is	Internal Audit Manager attends all committee meetings and can confirm that there is discussion

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
				necessarily to the detriment of the committee's effectiveness.	and engagement from members.
21. Does the committee engage with a wide range of leaders and managers, including discussion of audit findings, risks and action plans with responsible officers?	7 (78%)	2 (22%)		<p>Relevant Directors attend G&AC and respond to Members' queries.</p> <p>We do bring officers in to respond to our requests.</p> <p>Yes, very much so, recent changes to each of the committee's terms of reference mean that all directorships are now represented and can be called upon.</p>	<p>Yes - several Officers attend to provide advice around their Risks / Audit Reports.</p> <p>Officers can be requested to attend to give detail on any audit recommendations.</p>
22. Does the committee make recommendations for the improvement of governance, risk and control and are these acted on?	8 (89%)	1 (11%)		<p>Changes always reported, then updates are provided on implementation and progress of any improvements.</p> <p>We do make suggestions whenever we see something improvable, and we do generally see the changes swiftly made.</p> <p>A gap of three months between meetings can however make it more challenging to ensure recommendations are followed up in a timely manner.</p>	All requests from Members are considered and acted upon by Officers.

Good practice questions	Yes	Partly	No	Summary of comments provided by Members	Internal Audit Commentary where applicable
23. Has the committee evaluated whether and how it is adding value to the organisation?	3 (33%)	5 (56%)	1 (11%)	Unsure. Unsure. I don't know.	The responses provided as part of the self-evaluation process will feed into G&A Annual Report for Members discussion and to agree on an action plan to address any issues that have been identified.
24. Does the committee have an action plan to improve any areas of weakness?	5 (56%)	4 (44%)		Unsure. Unsure. Any negative outcomes of the Annual Evaluation are acted upon. Where members make suggestions, for example for improvements in presentation, these are acted upon. Right now, I don't know if one's in place. I believe so from the internal and external audit.	The Governance and Audit Committee training can be provided to members by arrangement with HR.
25. Does the committee publish an annual report to account for its performance and explain its work?	8 (89%)	1 (11%)		Can't recall. That's probably a fault of my memory rather than our system. I don't know.	

Committee:	Governance and Audit Committee
Date:	20 th March 2024
Report from:	Internal Audit Manager

CONFIDENTIAL REPORT

Reason why the report is confidential:	Information relating to the financial or business affairs of any particular person (including the Council holding that information).
When will the report become available:	
When will a redacted report become available:	31 st March 2024
The report will never become available:	

Item for:	Approval
Subject:	Draft Internal Audit Strategy 2024-2029 and Draft Internal Audit Operational Plan 2024-2025

1.0	<u>Background and Key Issues</u>	
	This report provides a refresh of the Internal Audit Strategy for 2024-29. It also provides the draft Internal Audit operational plan 2024/25. The operational plan makes provision for a deep dive as instructed by the G&A. Quarterly timings are subject to change to ensure operational requirements are taken into consideration.	
2.0	<u>Recommendation</u>	
	Note the change from a 3-year strategy to 5-year. This allows the audit universe to be covered proportionately with the audit resources available.	
	It is recommended that Members approve this report.	
3.0	<u>Finance and Resource Implications</u>	
	None	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 or rationale why the screening was not carried out	N/A
	<i>Internal Audit is an independent assurance function and is non-operational therefore no assessment required.</i>	

4.3	Has a Rural Needs Impact Assessment (RNIA) been completed?	No
4.4	<p>Brief summary of the key issues identified and proposed mitigating actions <u>or</u> rationale why the screening was not carried out.</p> <p><i>Internal Audit is an independent assurance function and is non-operational therefore no assessment required.</i></p>	N/A

Appendices:	Draft Internal Audit Strategy 2024-2027 and Draft Internal Audit Operational Plan 2024-2025
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Lisburn & Castlereagh City Council

Internal Audit Strategy 2024-2029 and Internal Audit Operational Plan 2024-2025

Approved (20-03-24 by G&A Committee)



Contents	Pages
<i>Introduction and approach</i>	2-4
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<i>Appendix 2 Detailed Methodology</i>	25-29

1. Introduction and Approach

Introduction

The Internal Audit Charter was reviewed, updated and approved at the Governance and Audit Committee in September 2023.

This document sets out the Council's five-year Internal Audit Strategy 2024-2029 (including the Audit Needs Assessment) together with the Internal Audit Plan for 2024/25.

This document has been prepared in compliance with the current Public Sector Internal Audit Standards (referred to as PSIAS hereafter) requirements.

The role of Internal Audit is defined as “*Internal auditing is an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes*”. (PSIAS)

Internal Audit remit extends to the whole of the Council's governance, risk and control environment and includes:

- relevance of established policies, plans and procedures, the extent of compliance with these and their financial effect.
- adequacy of guidance.
- appropriateness of organisational, personnel and supervisory arrangements.
- extent to which assets and interests are accounted for and safeguarded from loss of all kinds arising from waste, extravagance, inefficient administration, poor value for money, fraud, theft or other cause.
- appropriateness, reliability and integrity of financial and other management information and the means to identify, measure, classify, report and act upon this information.
- integrity of IT systems; and
- follow up action taken to address recommendations and weaknesses previously identified.

Context

This Strategy is written at a time when the Council is still undergoing significant change including but not limited to:

- Changes within organisational structure.
- Significant transformation and change agenda including Belfast City Regional Deal, digitisation, and replacement of critical systems.
- Renewed focus on governance including but not limited to Data Protection/GDPR and increased Cyber Security threats.
- Rising costs associated with the provision of Council Services.

Therefore, the Strategy takes account of these changes in terms of provision of assurance inputs to both assess and support the underpinning internal control, risk and governance framework within the Council. Provision of advisory audits will be provided subject to audit resources and reported through Corporate Management Team and to G&A Committee through progress reports.

Consultation

In developing this document, Internal Audit undertook consultation with several key stakeholders including:

- Chief Executive
- Directors
- Heads of Service
- IT Manager
- Emergency Planning, Corporate H&S, Risk & Business Continuity Manager

Approach to Developing the Audit Strategy, Audit Needs Assessment and Annual Operational Plans

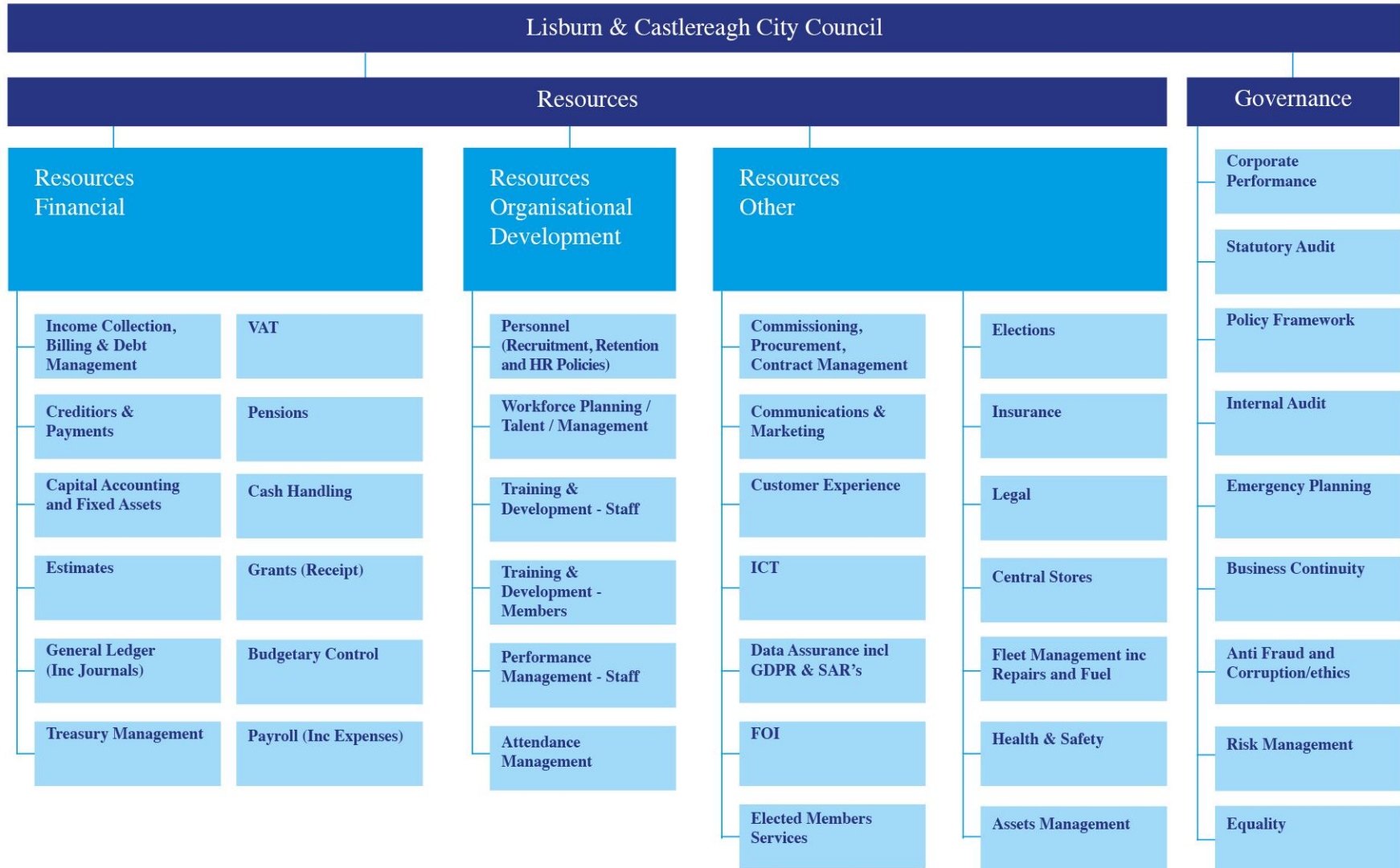
A summary of the approach adopted to developing the Annual Internal Audit Strategy, Audit Need Assessment and Operational Plans is set out below. Further detail on the approach is included at Appendix 2.

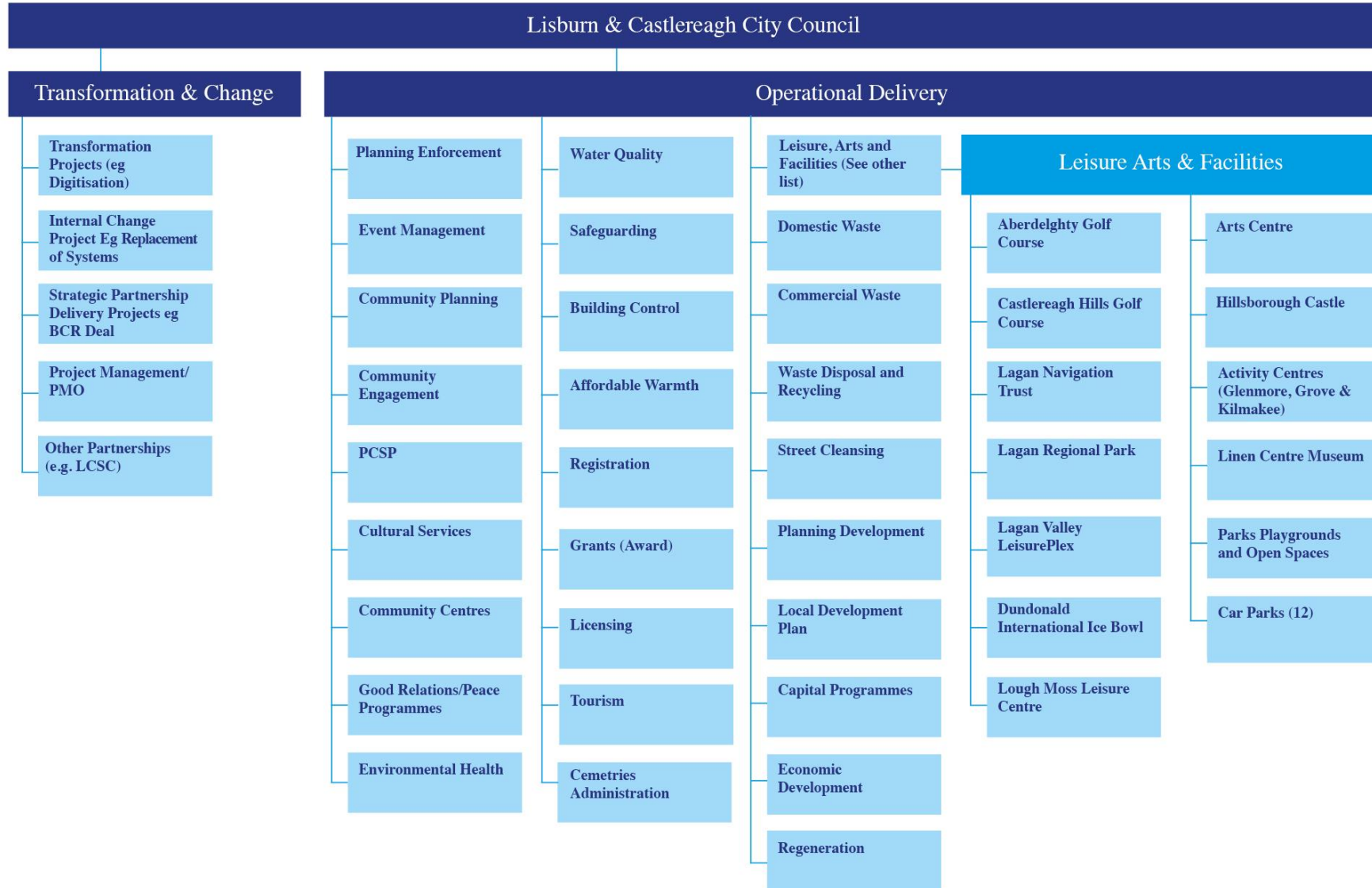
<p><i>Step 1: Understand the Corporate Objectives, values and risks</i></p>	<ul style="list-style-type: none"> • Review Corporate and Directorate Risk Registers. Liaison with members of the Corporate Management Team (CMT), Heads of Service, IT Manager and Risk and Business Continuity Officer utilising their expertise to understand the corporate level objectives and risks.
<p><i>Step 2: Define the Audit Universe</i></p>	<ul style="list-style-type: none"> • Identify all the auditable units within the Council. Auditable Units have been determined as key activities and processes within the Council.
<p><i>Step 3: Assess inherent risk</i></p>	<ul style="list-style-type: none"> • Assess the inherent risk of each auditable unit – based on a combination of impact and probability and considering any changes to key systems, organisational structures, or loss of key personnel.
<p><i>Step 4: Assess the strength of the Control Environment</i></p>	<ul style="list-style-type: none"> • Assess the strengths of the control environment within each auditable unit to establish if there is a dependency on the controls therein.
<p><i>Step 5: Calculate the overall audit risk rating</i></p>	<ul style="list-style-type: none"> • Calculate the audit risk rating taking into the Inherent risk from Step 3 whilst assessing the strength of the Control Environment in Step 4.
<p><i>Step 6: Determine the audit plan</i></p>	<ul style="list-style-type: none"> • Estimate the Audits Needs Assessment based on risk rating from Step 5. Determine the timing and scope of audit work based on the Council’s risk appetite whilst taking account of agreed internal audit resource and budget.
<p><i>Step 7: Other considerations that impact Internal Audit resource</i></p>	<ul style="list-style-type: none"> • Take account of additional audit requirements placed upon internal audit service such as National Fraud Initiative.

2. Audit Universe

The following diagrams represent the level of auditable units within the audit universe of the Council. These units form the basis of the Internal Audit Plan. The Audit Universe reflects key activities and processes within the Council and therefore does not intend to convey the organisational structure or reporting lines.
























3. Audit Strategy and Audit Needs Assessment





Risk Assessment and frequency over next five years: Each auditable unit has been assessed for inherent risk and the strength of the control environment, in accordance with the methodology set out in Appendix 2. Changed to a five-year strategy to ensure that all key systems are covered at least once within the five-year cycle.






Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Resources														
A1	Resources - Financial													
A1.1	Income Collection, Billing & Debt Management	CRR 3,5,6,7	4	3	4	4	2		Every 2/3 years		✓		✓	
A1.2	Creditors & Payments	CRR 3,5,6,7	4	3	4	4	2		Every 4/5 years			✓		
A1.3	Capital Accounting and Fixed Assets	CRR 4,7,9	4	3	4	4	2		Every 4/5 years				✓	






Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency	24/25	25/26	26/27	27/28	28/29
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6							
Resources														
A1	Resources - Financial													
A1.4	General Ledger (inc journals)	CRR 5,6,7	5	3	4	3	3		Every 4/5 years			✓		
A1.5	Treasury Management	CRR 7	5	3	4	4	2		Every 4/5 years		✓			
A1.6	Grants (all)	CRR 3,5,7,8	5	4	5	2	4		Every 1 / 2 years	✓	✓	✓	✓	✓
A1.7	Budgetary Control	CRR 2,3,4,7,8,9	5	3	4	4	2		Every 4/5 years		✓			✓
A1.8	Payroll (to include various aspects to inc expenses, timesheets, acting up allowances, starters and leavers)	CRR 5,6,7	5	4	5	3	4		Every 1 / 2 years	✓	✓		✓	








Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Resources														
A2	Resources - Organisational Development													
A2.1	Personnel (Recruitment, Retention and HR policies) to include Workforce Planning & Talent Management. Equality aligned with A2.1 Personnel & HR Policies	CRR 2,5,6,7,8,9	5	3	4	4	2		Every 4/5 years			✓		
A2.2	Training & Development	CRR All	5	3	4	3	3		Every 3/4 yrs.			✓		
A2.3	Attendance Management	CRR 2	5	3	4	4	2		Every 4/5 years	✓				
A3 Resources - Other														
A3.1	Commissioning, Procurement & Contract Management	CRR 2,6,9	5	5	5	3	4		Every 1 / 2 years	✓	✓	✓	✓	✓








Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Resources														
A3	Resources - Other													
A3.2	Communications & Marketing	CRR 3	4	2	3	3	2		Every 4/5 years		✓			✓
A3.3	Customer Experience	CRR 3,4	4	2	3	3	2		Every 4/5 years			✓		
A3.4	ICT/Data Assurance incl GDPR & SAR. Freedom of Information (FOI) management and record management	CRR 2,5,6	5	5	5	3	4		Every 1 / 2 years	✓	✓	✓	✓	✓
A3.5	Elections	CRR 2,3,	6	2	4	4	2		Every 4/5 years			✓		
A3.6	Insurance	CRR 1,2,6,7,8,9	5	2	4	4	2		Every 4/5 years			✓		

Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Resources														
A3	Resources - Other													
A3.7	Health & Safety	CRR 1,2,	5	2	4	3	2		Every 4/5 years		✓			
A3.8	Asset Management	CRR 4,6,9	5	2	4	3	2		Every 3/4 yrs.		✓			✓
Governance														
B.1	Corporate Performance	CRR 3,4,7	5	3	4	3	3		Every 3/4 yrs.	✓	✓	✓	✓	✓
B.2	Corporate Policies	CRR 1,2,4,5,6,7,8,9	4	4	4	2	3		Every 3/4 yrs.	✓	✓	✓	✓	✓





Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Governance														
B.3	Internal Audit	CRR 2,4,5,6,7,8,9,10	4	3	4	4	2		Under PSIAS Self Assessment every yr.	✓				
B.4	Emergency Planning	CRR 1,2,5,6,7,8,9	4	3	4	4	2		Every 4/5 years	✓				✓
B.5	Business Continuity	CRR 1,2,5,6,7,8,9	5	4	4	3	3		Every 3 / 4 years			✓		
B.6	Anti Fraud and Corruption / Ethics	CRR 2,4,5,6,7	4	4	4	3	3			✓		✓		✓
B.7	Risk Management	CRR All	5	4	5	4	3		Every 3 / 4 years		✓			✓

Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Transformation & Change														
C.1	Transformation Projects (eg Digitisation)	CRR 3,4,9	5	4	5	3	4		Every 1 / 2 years	✓	✓	✓	✓	✓
C.2	Internal Change Projects eg Replacement of Systems	CRR 3,4,9	5	4	5	3	4		Every 1 / 2 years	✓	✓	✓	✓	✓
C.3	Strategic Partnership Delivery Projects eg Belfast City Deal	CRR 3,4,9	5	3	4	3	3		Every 3 / 4 years	✓			✓	
C.4	Capital Project Management/ PMO	CRR 3,4,9	5	4	5	3	4		Every 1 / 2 years	✓	✓	✓	✓	✓
C.5	Other Partnerships (eg LCSC)	CRR 2,3	5	3	4	3	3		Every 3 / 4 years		✓		✓	

Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency					
		Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6			24/25	25/26	26/27	27/28	28/29
Operational Delivery														
D.1	Leisure, Arts and Facilities (see other list) including Community Centres (Bridge, Ballyoran, Enler and Moneyreagh)	CRR 2,5,6	5	4	5	3	4		Every 1 / 2 years		✓		✓	
D.2	Events Management	CRR 1,2	4	2	3	3	2		Every 4/5 years				✓	
D.3	Community Planning, Community Engagement, PCSP (Mandatory Annual Requirement) & Cultural Services. Good Relations & PEACE programmes	CRR 2,3,4	5	4	5	3	4		Every 1 / 2 years	✓	✓	✓	✓	✓
D.4	Environmental Health, Water Quality & Licensing	CRR 1,2,3,	5	4	5	4	3		Every 3 / 4 years			✓		
D.5	Cemeteries Administration	CRR 5,6	4	2	3	3	2		Every 4/5 years				✓	
D.6	Safeguarding	CRR 1,2	5	3	4	2	3		Every 3/4 years	✓		✓		✓
D.7	Building Control & Affordable Warmth	CRR 2,3,4	4	2	3	3	2		Every 4/5 years				✓	

Reference	Auditable Unit	Principal Risks	Inherent Impact	Inherent Likelihood	Inherent Overall	Control Environment	Audit Req't	Colour Code	Ideal Frequency						
										Link to Corporate Risk	1-6	1-6	1-6	1-6	1-6
Operational Delivery															
D.8	Domestic Waste & Commercial Waste	CRR 2,10	5	3	4	2	3		Every 3/4 years		✓		✓		
D.9	Waste Disposal and Recycling	CRR 2,10	5	3	4	2	3		Every 3/4 years		✓				
D.10	Street Cleansing	CRR 2	5	3	4	3	3		Every 3/4 years				✓		
D.11	Planning Development Management. Planning Enforcement.	CRR 2,3,4,	5	4	5	3	4		Every 1/2 years	✓		✓		✓	
D.12	Local Development Plan	CRR 2,3,4	5	4	5	2	4		As required						
D.12	Economic Development, Regeneration and Tourism	CRR 2,3,4,9	5	3	4	3	3		Every 4/5 years				✓		
D.13	Registration	CRR 2,5,6	4	2	3	3	2		Every 4/5 years				✓		

Key to frequency of audit work – consideration will be given to management requests to audit out with these timescales as and when required and to take into consideration any emerging risks.

Audit Requirement Rating	Colour Code	Timescale	Description
6, 5 and 4		Every 1 / 2 years	A review of processing and monitoring, control design and operating effectiveness.
3		Every 2 / 3 Years	A review of the design and operating effectiveness of monitoring controls
2		Every 3 / 4 Years	A review of the adequacy of breadth of monitoring controls and analytical review of the output of monitoring controls
1		Low Risk	As and when required when risks identified.

3. Indicative Annual Internal Audit Plan 2024/2025

Internal Audit is responsible for the provision of an independent and objective opinion to the Chief Executive, CMT and the Governance and Audit Committee on the overall adequacy and effectiveness of the Council's framework of governance, risk management and control.

The opinion provided by Internal Audit is based on the satisfactory completion of audit work set out in the annual Internal Audit Plan. This opinion is also used to inform the Council's Annual Governance Statement. The five-year Strategic Internal Audit Plan 2024-2029 and available audit resources has informed the development of the 2024/25 Internal Audit Plan. The proposed Internal Audit Plan includes provision for:

- Work from previous years not completed by 31 March 2024.
- Follow up audits for any 2023/24 limited audits where required.
- Planned assurance work as scheduled in the five-year strategic plan.
- Annual mandatory audit requirements such as PCSP.
- Information gathered from Internal Control Questionnaires and NIAO checklists.
- Service requests identified through the consultation process with the Corporate Management Team.
- Corporate provision and contingency for reactive advice and consultancy work and new emerging risks.
- Completion of various NIAO annual year end questionnaires.
- Co-ordination of the council's annual governance statement.
- Attendance at various working groups on an advisory basis and Internal Auditor Practitioner Group.
- Provision for planning, section management, quality assurance, CMT and G&A reporting.
- Identifying training needs within the Internal Audit team.

It is particularly important in the current environment that the annual Internal Audit Plan is flexible and allows for the service to be pro-active in supporting management in the consideration of control issues relating to new or emerging risks. This will ensure we remain focused on the key areas and are reflective of the level of services being delivered, auditing the right areas at the right time.

Therefore, in line with good practice, the internal audit plan will be reviewed on a regular basis throughout the year and may be adjusted in response to changes in the Council's business, risks, systems, and controls. Any such required changes to the plan will be submitted to and approved by the Chief Executive. Changes will be drawn to the Committee's attention as part of the quarterly progress report.

The following table sets out the internal audit work planned. Quarterly timings may be subject to change for operational reasons as per advice by the service and to allow in-year risks identified to be prioritised.

Internal Audit Plan for 2024/25					
ANA Ref.	Audit Ref	Auditable Unit	Type of Review	Sponsor	Budget Total
Previous Year audits b/fwd.					
A1.8	23-24-03	Payroll including expenses	Assurance	DODI	30
A3	23-24-04	Personnel (Recruitment, Retention and HR Policies)	Advisory	DODI	10
		23/24 audits still in progress as at 31/03/24			30
Sub-total of Previous Years audits b/fwd. (A)					70
Resources - Financial					
A1.6	24-25-01	Grants (others)	Assurance	DF&CS	30
Resources					
A3.1	24-25-02	Commissioning, Procurement & Contract Management	Assurance	DRG	20
A3.4	24-25-03	Data Governance and Security	Assurance	DODI	20
A3.8	24-25-04	Asset Management - Estates Strategy	Advisory	DRG	10

Internal Audit Plan for 2024/25					
ANA Ref.	Audit Ref	Auditable Unit	Type of Review	Sponsor	Budget Total
Governance					
B.1	24-25-05	Corporate Performance	<u>Advisory</u>	DODI	15
B.2	24-25-06	Policy Framework	<u>Advisory</u>	DF&CS	10
B.3	24-25-07	Internal Audit Peer Review	<u>Assurance</u>	CEO	10
B.4	24-25-08	Emergency Planning	<u>Advisory</u>	DES	10
B.5	24-25-09	BCP & Risk Management (Deep Dive)	<u>Assurance</u>	CEO	30
B.5	24-25-10	NIAO Annual Report 2023	<u>Advisory</u>	CEO	10
Transformation & Change					
C.2	24-25-11	Internal Change Projects	<u>Assurance</u>	DF&CS	30
C.4	24-25-12	Capital Project Man./ PMO	<u>Assurance</u>	DRG	20

Internal Audit Plan for 2024/25					
ANA Ref.	Audit Ref	Auditable Unit	Type of Review	Sponsor	Budget Total
Operational Delivery					
D.3	24-25-13	PCSP	<u>Assurance</u>	DL&W	10
D.3	24-25-14	PEACE programme	<u>Assurance</u>	DL&W	10
D.6	24-25-15	Safeguarding	<u>Assurance</u>	DES	20
D.11	24-25-16	Planning Development Management. Planning Enforcement.	<u>Assurance</u>	DST	20
In year contingency					
E.1		Contingency available for investigations and in year service requests where risks are identified.	<u>Assurance/ Advisory</u>	TBC	35
Sub-Total in year assignments(B) - Direct					310

Draft Audit Plan for 2024/25							
ANA Ref.	Audit Ref	Auditable Unit	Type of Review	Sponsor	Budget Total	Actual Total	Variance
Other Audit Team tasks: - Indirect							
		G&A & CMT Reporting			30	-	30
		Annual Governance Statement - Co-ordination			5	-	5
		Follow-up on recommendations work			20	-	20
		Follow up on ICQ's and self assessment checklists			5	-	5
		Annual Internal Audit Report and Opinion			10	-	10
		IA Team Skills Training			10	-	10
		G&A Comm - guidance/training			2	-	2
		Internal Audit Administration/Team meetings/working groups			10	-	10
		IAPG Meetings, networking and learning best practices			5	-	5
		NIAO Proper Arrangements Question co-ordinating(Annual)			3	-	3
		NIAO External Audit queries on IA Reports/Plan etc			2	-	2
		NIAO Fraud Assessment Questionnaire (Annual)			1	-	1
		NIAO Audit Strategy/Audit Letter/Annual Report(all Councils)			1	-	1
Sub-Total Other Tasks (C)					104	-	104
Total (A+B+C)					484	-	484

Appendix 1: Corporate Risks

Corporate Risk Register as of March 2024

- Risk of serious injury or loss of one or more lives due to Council negligence resulting in legal, financial, and reputational damage.
- Uncertainty going forward in relation to arc21 municipal waste disposal contract. Interim residual waste treatment contract to be established. Potential associated increase in costs.
- Inability to respond to Command, Control & Co-ordination arrangements, or concurrent emergencies due to increased strain on current resources resulting in impact on current resilience. Emergency Plan Activated.
- 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 national and regional economic position.
- Potential to deliver the agreed outcomes of the capital programme because of affordability or changes in third party funding arrangements.
- Poor or inadequate data governance including data sharing agreements resulting in unintended data breach.
- Breach in IT or Cyber-attack resulting in significant outage or data loss.
- Failure to deliver balanced budget and longer-term resilience and sustainability.
- Non-compliance with procurement and contract regulations policies and processes resulting in reputational/financial loss and risk of litigation.

Appendix 2: Detailed methodology

We have adopted a staged approach to developing the Audit Strategy, Audit Needs Assessment and the Operational Plans as outlined below.

Step 1 – Understand corporate objectives and risks

In developing our understanding of your corporate objectives and risks, we have considered the following:

- Corporate and supporting risk registers.
- Discussion with Directors and Heads of Service with key concerns and risks raised through our consultation process.
- Previous Internal Audit work and results of follow up; and
- Other assurance provision where appropriate.

Step 2 – Define the Audit Universe

In order that our internal audit plan reflects your management and operating structure we have identified the audit universe for Lisburn and Castlereagh City Council made up of several auditable units. Auditable units include functions, processes, systems, products, or locations. Any processes or systems which cover multiple locations are separated into their own distinct cross cutting auditable unit.

Step 3 – Assess the inherent risk

Our internal audit plan should focus on the riskiest areas of the Council. As a result, each auditable unit is allocated an inherent risk rating i.e. how risky the auditable unit is to the overall organisation and how likely the risks are to arise. The inherent risk assessment is determined by:

- mapping the corporate risks to the auditable units
- our knowledge of the Council
- discussion with management regarding the inherent risk for each auditable unit

Likelihood Rating

Impact Rating	6	5	4	3	2	1
6	6	6	5	5	4	4
5	6	5	5	4	4	3
4	5	5	4	4	3	3
3	5	4	4	3	3	2
2	4	4	3	3	2	2
1	4	3	3	2	2	1

Determination of Inherent Risk

We determine inherent risk as a function of the estimated **impact** and **likelihood** for each auditable unit within the audit universe as set out in the tables below.

Impact rating	Assessment rationale
6	Critical impact on operational performance; or Critical monetary or financial statement impact; or Critical breach in laws and regulations that could result in material fines or consequences; or Critical impact on the reputation or brand of the organisation which could threaten its future viability.
5	Significant impact on operational performance; or Significant monetary or financial statement impact; or Significant breach in laws and regulations resulting in large fines and consequences; or Significant impact on the reputation or brand of the organisation.
4	Major impact on operational performance; or Major monetary or financial statement impact; or Major breach in laws and regulations resulting in significant fines and consequences; or Major impact on the reputation or brand of the organisation.
3	Moderate impact on the organisation's operational performance; or Moderate monetary or financial statement impact; or Moderate breach in laws and regulations with moderate consequences; or Moderate impact on the reputation of the organisation.
2	Minor impact on the organisation's operational performance; or Minor monetary or financial statement impact; or Minor breach in laws and regulations with limited consequences; or

	Minor impact on the reputation of the organisation.
1	Insignificant impact on the organisation’s operational performance; or Insignificant monetary or financial statement impact; or Insignificant breach in laws and regulations with little consequence; or Insignificant impact on the reputation of the organisation.

Likelihood rating	Assessment rationale
6	Has occurred or probable in the near future
5	Possible in the next 12 months
4	Possible in the next 1-2 years
3	Possible in the medium term (2-5 years)

Step 4 – Assess the strength of the control environment

To effectively allocate internal audit resources, we also need to understand the strength of the control environment within each auditable unit. This is assessed based on:

- Knowledge of the Council’s governance, risk management and performance monitoring arrangements.
- information obtained from other assurance providers such as our external auditors; and

- the outcomes of previous internal audit reviews.

Step 5 – Calculate the audit requirement rating

The inherent risk and the control environment indicator are used to calculate the audit requirement rating. The formula ensures that our audit work is focused on areas of with high reliance on controls or a high residual risk.

Control design indicator

Inherent Risk Rating	1	2	3	4	5	6
6	6	5	5	4	4	3
5	5	4	4	3	3	n/a
4	4	3	3	2	n/a	n/a
3	3	2	2	n/a	n/a	n/a
2	2	1	n/a	n/a	n/a	n/a
1	1	n/a	n/a	n/a	n/a	n/a

Step 6 – Determine the audit plan.

The risk appetite determines the frequency and scope of internal audit work at each level of audit requirement. Auditable units may be reviewed annually, or between two to five years within the audit five-year cycle.

Step 7 – Other considerations that impact Internal Audit resource.

Take account of additional audit requirements placed upon internal audit service such as the mandatory National Fraud Initiative, fraud investigations and attendance on working groups for advisory purposes.

Committee:	Governance and Audit Committee
Date:	20 th March 2024
Report from:	Internal Audit Manager

CONFIDENTIAL REPORT

Reason why the report is confidential:	Information relating to the financial or business affairs of any particular person (including the Council holding that information).
When will the report become available:	
When will a redacted report become available:	31 st March 2024
The report will never become available:	

Item for:	Noting
Subject:	Internal Audit – Progress Report

1.0	<p><u>Background and Key Issues</u></p> <p><i>The purpose of this report is to summarise Internal Audit work and progress against the Operational Plan since the last G&A Committee meeting on the 13th December 2023. A copy of any Internal Audit Report(s) referred to in the progress report are also provided in full in the Resources Section of Decision Time under Committees/Governance & Audit/Confidential – Internal Audit Reports 2023.</i></p> <p><u>No Key Issues</u></p> <p><i>The focus since the last G&A meeting has been to complete as much of the fieldwork in the outstanding audit reviews as possible. I am satisfied that the team are on track for satisfactory completion of the 2023/2024 Audit Plan to allow the internal audit opinion to be reported at the June G&A Committee meeting.</i></p>	
2.0	<p><u>Recommendation</u></p> <p>Members should note the content of the Progress Report</p>	
3.0	<p><u>Finance and Resource Implications</u></p> <p>None</p>	
4.0	<p><u>Equality/Good Relations and Rural Needs Impact Assessments</u></p>	
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 <u>or</u> rationale why the screening was not carried out	N/A

	<i>Internal Audit is an independent assurance function and is non-operational therefore no assessment required.</i>	
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 or rationale why the screening was not carried out. <i>Internal Audit is an independent assurance function and is non-operational therefore no assessment required.</i>	N/A

Appendices:	Internal Audit Progress Report
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Internal Audit Progress Report
20th March 2024

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1. Introduction & Status Summary

1.1 Overview of Review










The purpose of this report is to summarise Internal Audit progress since the last G&A update report on the 13th of December 2023.

1.2 Resources

The Internal Audit Team is comprised of 0.5 Internal Audit Manager and 2 full time Auditor posts.

1.3 Progress against 23/24 Operational Plan

Progress against the current 23/24 plan is outlined in the table whilst further detail is included as at Appendix 1.

Stage	Status	As of Nov 2023	As at 29th February 2023
	Not due to start per plan	7	0
	Planning underway	3	1
	Draft Terms of Reference (Awaiting sign-off HOS)	0	0
	Terms of Reference Agreed	1	3
	Fieldwork	6	6
	Draft Report	1	0
	Final Report	3	5
	Cancelled	1	5
	No Report Required	0	2
Total		22	22

1.4 Changes to 23/24 Internal Audit Plan

2223 – 20 – Waste Disposal and Recycling - 20 days

Postponed as per request of the Director.

The Chief Executive approved this change on 5th February 2024.

2324 – 03 – Payroll including expenses - 20 days

Postponed at the request of the Head of Service to allow the new system to bed in.

The Chief Executive approved this change on 5th February 2024.

2324 – 04 – Personnel (Recruitment, Retention and HR Policies) - 25 days

Postponed as the policies are due to be updated and the implementation of the new system took priority. This will also be changed from assurance to advisory to enable internal audit to act in an advisory capacity during the policy review process.

The Chief Executive approved this change on 5th February 2024.

2324 – 16 – PEACE Programme - 12 days

Postponed until new year audit plan as the letter of offer not expected until August 2024.

The Chief Executive approved this change on 5th February 2024.

2. Summary of Reports

2.1 Overview

The following report has been finalised during the period.

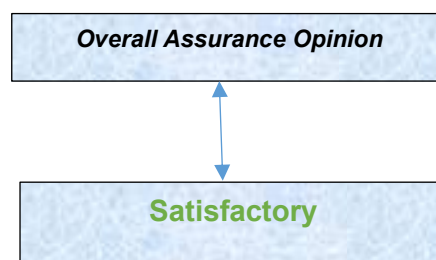
Ref	Name	Type	Outcome	P1	P2	P3	Insights
2021 - 05	Training & Development (Health & Safety Mandatory Training)	Assurance	<i>satisfactory</i>		1	2	
Total				-	1	2	-

2.2 Brief Overview of Review

The Internal Audit Operational Plan as approved by the Governance & Audit Committee on the 13th of March 2023 included a provision for a review of Training and Development of Staff. The overarching objective for this review is to focus on Health & Safety training and record keeping. This review was Assurance in nature

Summary of Findings and Overall Assurance

Findings	P1	P2	P3	Insights
Adequacy of controls	-	-	-	-
Effectiveness of controls	-	1	2	-
Total	-	1	2	-



Overall, this review has concluded with a *satisfactory* assurance rating with one Priority 2 and two Priority 3 recommendations as follows:

One Priority 2 recommendation was raised relating to:

- Mandatory and Statutory Training requirements are not being adhered to.

Two Priority 3 recommendations were raised relating to:

- Training and Development Policy and CHaSP
- iTrent Records

Mandatory and Statutory Training requirements are not being adhered to

(Priority 2)

Focus of Finding - Effectiveness of Controls

Finding

All employees are required to undertake the mandatory health and safety and manual handling training every three years as part of core skills training. Figures in the table below highlight that compliance figures of the two modules should be higher and all staff should be completing this training.

The current figures in terms of compliance training will increase with the implementation of the new LMS system which is due to come online this month (Feb 2024), further communications to staff and subsequent reminders will ensure that the workforce can access the training they require and on completion of specific modules, this will again increase numbers in relation to compliance/mandatory training overall. The Council will also have a programme of training going forward.

Training	Total	Trained	Untrained	% Trained
Health and Safety	878	268	610	31%
Manual Handling	878	222	656	25%

Training Compliance Figures @ 30th October 2023

A review of the statutory training list revealed a small number of staff have passed their due date for retraining in other areas, such as operational inspection training, legionella awareness training and traffic management.

With the development of the iTrent system all staff will have access to their training records. This should ensure greater clarity and training needs and improve the ability for management to monitor compliance.

The Learning Management System (LMS) will hold separate records of employees training and line managers will be able to see who is compliant. The system will automatically email employees when they are due refreshers and will also regularly send reminder emails if they haven't completed their training.

Implications

There are risks to staff/contractors' safety, risks to breaches of legislation and risks of financial and reputational damage due to LCCC not being compliant with statutory and mandatory training requirements.

Recommendation

The Council needs to be able to demonstrate that all staff have the requisite mandatory and statutory training to discharge their responsibilities safely. Health and Safety should remind management of their responsibilities to ensure that all staff have been communicated of any new or changed statutory and mandatory health and safety training updates.

Action	Responsible Officer	Target Date
There is an action for training needs analysis (TNA) to be conducted by all line managers – HR to support H&S in the development of a TNA and facilitate the arranging of required training.	Head of Environmental Health, Risk and Emergency Planning.	30 th Sep 2024

2.3 Other Internal Audit Work

NFI Data Matching Exercise

The Internal Audit Operational Plan as approved by the Governance & Audit Committee in March 2023 includes provision for our mandatory participation in the National Fraud Initiative (NFI) data matching exercise. Although advisory/investigation in nature the results are reported to the G&A Committee.

The Northern Ireland Audit Office (NIAO) co-ordinates the NFI process and provides the Council with a list of potential data matches between two separate sources of information (e.g. payroll and supplier datasets). The NFI matches electronic data within and between public and private sector bodies, local probation boards, fire and rescue authorities, local councils, and several private sector bodies, with the aim of detecting and preventing error and fraud.

The NIAO classifies data matches using a risk scoring mechanism, the higher the score the higher the potential risk of fraud. NIAO expects all matches which have been classified with a risk score of over 75% to be investigated with matches classified below that to be assessed at the discretion of the individual organisation. There is no obligation on us to investigate every match. LCCC agreed that matches with a risk score threshold of 50% and above, as well as additional samples, would be tested.

The latest data matching exercise was undertaken by the NIAO in January 2023 with a target date for all matches to be investigated and the database updated with results of investigation by 31st January 2024.

Summary of Findings

The overall results from the data matching tests carried out were as follows:

Match Type	Matches	Tested	Issues
Payroll Matches	79	44	No issues
Creditors Matches	495	91	No issues
Procurement to Payroll to Companies Registry Matches	10	5	No issues
Total	584	140	

The level of testing of Payroll matches over Creditors matches is higher due to the risk scores attributed by the NFI database. The purpose of data matching is to identify instances of potential error or fraud.

Fraud Training

The Internal Audit Manager provided online training to elected members on anti-fraud, corruption, and bribery in November 2023. Training materials were e-mailed out to all elected members with links to the relevant guidance.

Corporate Assurance Framework

Internal Audit has developed a Corporate Assurance Framework. Understanding where assurance comes from will help provide a clearer picture of where the Council receives assurance and whether it has too much, is duplicated within services across the Council, or has none, and whether the coverage of assurances is set at the right level to provide confidence to the Corporate Management Team and Elected Members. Consideration, of the independence of any assurance provided in terms of how much reliance or comfort you can take from it, is required.

The Corporate Assurance Framework has been developed in Smartsheet and Internal Audit is currently working along with services to populate it. Internal Audit will review it throughout the year and liaise with services where issues arise and report to CMT.

Corporate Fraud Risk Register

Internal Audit is currently in the process of developing a corporate fraud risk register along with the relevant services. Northern Ireland Audit Office have produced comprehensive guidance on areas where there are fraud risks. This guidance is being used to assist in the development of the risk register to ensure that we have risk assessed these areas and take assurance that sufficient mitigations are in place. Internal Audit will liaise with the Emergency Planning, Corporate H&S, Risk & Business Continuity Manager to ensure there is no duplication across risk registers.

Internal Audit Attendance at Working Group/Seminars

Date	Council Working Group	Audit Team member
23/01/24	Internal Audit Peer Review Working Group	Audit Manager
30/01/24	Internal Audit Peer Review Working Group	Audit Manager
30/01/24	Information Governance Working Group	Audit Manager
31/01/24	Data Protection/GDBR Training in LVI	Audit Manager
02/02/24	Internal Audit Practitioners Group	Auditor

NIAO – Annual Report 2023

Internal Audit provided a summary advisory report on the findings in the Northern Ireland Audit Office Annual Report to the Chief Executive identifying (by para number) any issues which were relevant to directorates within LCCC. Internal Audit will liaise with service Directors to consider any risks/learning from the report with a view to preparing an action plan on priorities. Internal Audit will monitor the progress of the action plan. Provision for this is included in the 24/25 Draft Audit Plan being reported here separately.

3. Follow up Work

Context

Per the Public Sector Internal Audit Standards (section 2500: Monitoring Progress), Internal Audit must establish a follow-up process to monitor and ensure that management actions have been effectively implemented or that senior management has accepted the risk of not taking action. As such, Internal Audit undertake follow up work / seek evidence that where management has deemed a recommendation discharged, there is sufficient evidence to support this.

3.1 Status of Internal Audit Recommendations

3.2.1 Status of Internal Audit Recommendations as of 11th March 2024

There are currently no actions past the agreed implementation date.

3.2 Recommendations Deemed Discharged by Management



3.3.1 Recommendations Deemed Discharged by Management as of 11th March 2024





The Table below highlights that since 1st April 2023 there have been 35 recommendations deemed discharged by management.


Internal Audit undertook follow up work / sought evidence to support this and can confirm that to date, that all 35 of these recommendations have been fully implemented.

	Priority 1	Priority 2	Priority 3	Insights	Total
Fully Implemented since April 2023 to December 2023 CMT. Reported previously.	-	8	20	-	28
Internal Audit confirmation of discharged recommendations since last CMT Report, please see below.	1	3	3	-	7
Total	1	11	23	-	35





3.3 Internal Confirmation of Discharged Recommendations

Audit	Rec No	Original Recommendation	Management Action Plan	Priority	Implementation Date (s)	Results of Follow Up Work
2223-16 PCSP	4	This is a recurring recommendation in the yearly PCSP internal audit. All PCSP members/staff are required to complete the form including nil returns. The PCSP team should continue emailing and consideration should be given by PCSP officers who attend meetings to clearly specify the importance of completing the Declaration of Interest Forms.	In line with NIAO - Request for Conflict-of-Interest Forms for 2023/24 from all PCSP Members.	2	Original Date: 31 st Dec 2023 Revised Date: N/A	
2018 – KPMG - Payroll	428	We recommended that steps are taken to correct all incorrect payments processed by the Council. In addition, we recommend that the Council considers synergising the process for recording and calculation of overtime across all departments and reviews the controls in place to ensure that all timesheets are processed correctly. Evidence of any secondary review that takes place should be retained.	Incorrect payments are to be processed without delay. Going forward work will be undertaken to consider the effectiveness of using timesheets for pay and the potential for an integrated HR, Payroll and Time and Attendance System (the HR&OD Unit currently uses four discrete HR Information Systems which is recognised as not the most effective way of working).	2	Original Date: 31 st Dec 2019 Revised Date: 31 st Jan 2024	

Audit	Rec No	Original Recommendation	Management Action Plan	Priority	Implementation Date (s)	Results of Follow Up Work
			Detailed checks are completed within the payroll section on all amendments to each monthly pay. This was acknowledged by audit however the issue related to the retaining of evidence of this additional check (i.e. sign-off by those checking).			
<i>Asset Management</i>	620	Asset Management Workstreams: Updates on Asset Management work streams should be provided at least annually to all Council Members.	To progress the provision of regular updates to Committee's and Council Members on work streams that had been an objective in the original Draft Estate Strategy.	2	Original date 31 st December 2023 Revised Date 31 st March 2024	
<i>Asset Management</i>	621	Finalise Council Policies: Council Policies and Procedures Asset Management Policies and procedures to be finalised.	To progress the finalisation of Asset Management Policies at the earliest opportunity.	1	Original Date 30 th September 2023 Revised Date 31 st December 2023	
<i>Asset Management</i>	625	Land & Property Risks: Visibility Identify, assess, and include Estate and Asset Management Risks and Actions in LCCC Corporate, Departmental & Service Risk Regs.	To enhance Departmental and Service Risk Registers with Estate and Asset Management Risks.	3	Original Date 30 th September 2023 Revised Date 31 st December 2023	
<i>Fleet Management</i>	594	Draft Fleet Strategy: Given the scale and pace of change	That Internal Audit are invited to review the	3	Original Date 31 st December 2023	

Audit	Rec No	Original Recommendation	Management Action Plan	Priority	Implementation Date (s)	Results of Follow Up Work
		required in Fleet Management services over the next 5 years from an advisory perspective there may be merit in inviting Internal Audit to review such a key strategic document at an early stage in its development.	Draft Fleet Strategy on an advisory basis at an early stage in its development.		Revised Date 31 st March 2024	
2021 – 15 – Registration	498	The LCCC retention policy should be updated at the earliest opportunity.	A review of the Registration section of the Retention Policy will commence.	3	Original Date 30 th September 2019 Revised Date 29 th February 2024	

Key:

	Implemented
	Partially Implemented
	Not Implemented
	Not Due

4. Quality Assurance - Internal

KPI's for Internal Audit Plan 2023/24 are monitored on an ongoing basis. At this stage of the audit year, I am confident that sufficient assurance work will be completed by the end of the audit year to provide the Internal Audit opinion.

No.	Target	Narrative	Performance to date
1	Pre-Audit	Agreement of TOR with HOS & Director 10 days prior to commencement of audit / review	100%
2	Audit Delivery	Completion of 90% of the revised Internal Audit Plan	80%
3	Audit Delivery	80% of Recommendations accepted	100%
4	Customer Satisfaction Results	Achievement of Customer Feedback average score of 3 or more.	Reported in June
5	Resources / Costs	Manage the costs of the IA team within agreed budget	On track

5. Quality Assurance – External Review

As previously reported a Peer Review has been arranged through the Local Government Internal Audit Practitioners Group. This is due to take place during the 24/25 audit year and provision has been made in the draft new year audit plan.

Six local authorities across Northern Ireland are taking part in the 2024/25 Peer Review exercise.

The Peer Reviews have been allocated to the relevant Local Authorities. Consideration was given to minimise the risk of any perceived conflicts when allocating the participants.

The International Internal Audit Standards were reviewed last year and were published in January 2024. They will become effective as of January 2025.

The Public Sector Internal Audit Standards have not yet been updated and will be in due course to take into consideration any changes and the relevant guidance for Public Sector will be issued. Until then the PSIAS guidance remains the one issued in 2017.







The Peer Review Working Group has agreed that for the purposes of the 24-25 Peer Reviews among the participants, that the assessment will be using the current PSIAS (2107) requirements.






A Gap analysis will be carried out against the new PSIAS in 2025/26 as a self-assessment with the results and an action plan produced highlighting and issues that may come out of the gap analysis. Progress will then be reported to the Governance & Audit Committee within the quarterly progress








reports. This will ensure that compliance to the new PSIAS is achieved going forward and in place before the next external review is required in 5 years' time.






The dates for each review have yet to be arranged as consideration will need to be given to the operational needs of both council internal audit teams however it is anticipated that reviews will take place sometime during the second or third quarter. The next meeting of the Peer Review Group will take place on the 21st of March 2024.










Appendix 1 23/24 Operational Plan updated as at 11th March 2024

Audit Ref.	Auditable Unit	Type of Review	Sponsor	Status
Previous Year Audits B/F				
PY - 2021 - 05	Training and Development of Staff	<u>Assurance</u>	DES	
PY - 2223 - 09	BCP & Risk Management	<u>Assurance</u>	DES	
PY - 2223 - 15	Leisure, Arts and Facilities including Community Centres (Bridge, Ballyoran, Enler and Moneyreagh)	<u>Advisory</u>	DES	
PY - 2223 - 17	Waste Management	<u>Assurance</u>	DES	
PY - 2223 - 20	Waste Disposal and Recycling	<u>Assurance</u>	DES	
PY - WIP	Previous years audits b/f - started but not completed as at 31/03/2023		ALL	

Key Theme: Financial				
2324 - 01	Income Collection, Billing & Debt Management	<u>Assurance</u>	DL&W	
2324 - 02	Grants (others)	<u>Assurance</u>	DF&CS - HoS Finance	
2324 - 03	Payroll including expenses	<u>Assurance</u>	DODI	
Resources: Organisational Development				
2324 - 04	Personnel (Recruitment, Retention and HR Policies)	<u>Assurance</u>	DODI	
2324 - 05	Attendance Management	<u>Assurance</u>	DODI	

Resources: Other				
2324 - 06	Commissioning, Procurement & Contract Management	<u>Assurance</u>	DST	
2324 - 07	Data Governance and Security (FOI Requests)	<u>Assurance</u>	DST	
2324 - 08	Corporate Health & Safety	<u>Assurance</u>	DES	
Governance				
2324 - 09	Corporate Performance	<u>Advisory</u>	DODI	
2324 - 10	Policy Framework	<u>Advisory</u>	DF&CS	
2324 - 11	BCP & Risk Management (Deep Dive)		CEO	
2324 - 12	Anti Fraud and Corruption/Ethics	<u>Advisory</u>	CEO	

	Transformation & Change			
2324 - 13	Internal Change Projects	<u>Assurance</u>	DODI	
2324 - 14	Capital Project Management/PMO	<u>Assurance</u>	DST	
	Operational Delivery			
2324 - 15	PCSP	<u>Assurance</u>	DL&W	
2324 - 16	PEACE programme	<u>Assurance</u>	DL&W	
2324 - 18	Planning Development Management Planning Enforcement Local Development Plan	<u>Advisory</u>	DST	

Key		
		Not due to start per plan
		Planning Underway
		Draft Terms of Reference
		Terms of Reference Agreed
		Fieldwork
		Draft Report
		Final Report
		Cancelled/Postponed
		No report required

Committee:	Governance and Audit Committee
Date:	20 th March 2024
Report from:	Head of Finance

CONFIDENTIAL REPORT

Reason why the report is confidential:	Information relating to the financial or business affairs of any particular person (including the Council holding that information).
When will the report become available:	After Full Council
When will a redacted report become available:	N/A
The report will never become available:	N/A

Item for:	Noting
Subject:	Annual Audit Letter 2022-23: Lisburn & Castlereagh City Council

1.0	<u>Background and Key Issues</u>	
	<ol style="list-style-type: none"> 1. The Northern Ireland Audit Office has issued the Annual Audit Letter under Regulation 17 of the Local Government (Accounts and Audit) Regulations (Northern Ireland) 2015 and the Code of Audit Practice 2021. 2. The Northern Ireland Audit Office will present the Annual Audit Letter which is attached for Member's attention. 	
2.0	<u>Recommendation</u>	
	It is recommended that Members note the attached Northern Ireland Audit Office - Annual Audit Letter for 2022/2023.	
3.0	<u>Finance and Resource Implications</u>	
	Not applicable	
4.0	<u>Equality/Good Relations and Rural Needs Impact Assessments</u>	
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 <u>or</u> 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 or rationale why the screening was not carried out. Not Applicable	

Appendices:	Annual Audit Letter 2022-23: Lisburn & Castlereagh City Council Northern Ireland Audit Office – Letter to Cara McCrory
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Cara McCrory
Chief Financial Officer
Lisburn and Castlereagh City Council
Lagan Valley Island
Lisburn
BT27 4RL

26 January 2024

Dear Cara,

Annual Audit Letter 2022-23: Lisburn & Castlereagh City Council

Please find enclosed the Annual Audit Letter issued under Regulation 17 of the Local Government (Accounts and Audit) Regulations (Northern Ireland) 2015 and the Code of Audit Practice 2021.

Regulation 17 requires a local government body to:

- a) publish (as a minimum on the local government body's website) the letter;
- b) notify the local government auditor of the date of publication, and
- c) make copies available for purchase by any person on payment of a reasonable sum.

The Code of Audit Practice 2021 states that whilst it is the responsibility of the Council to publish the annual audit letter, the Local Government Auditor may publish each annual audit letter on the NIAO website to enhance the transparency of public reporting.

I would be grateful if you would arrange to include the Annual Audit Letter on the agenda of the next meeting of the Governance and Audit Committee.

I would like to take this opportunity to thank you and your staff for the assistance and co-operation received throughout the audit.

Yours sincerely,



Colette Kane
Local Government Auditor

Annual Audit Letter

Lisburn & Castlereagh City Council
2022-23

Date of issue

26 January 2024

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We have prepared this report for Lisburn & Castlereagh City Council's sole use. You must not disclose it to any third party, quote or refer to it, without our written consent and we assume no responsibility to any other person.

1. Key Messages

Audit of Financial Statements

The 2022-23 financial statements were certified without qualification as noted in my audit report. Key statistics from the accounts are outlined.

Work on economy, efficiency and effectiveness

The Council has in place proper arrangements to secure economy, efficiency and effectiveness in the use of its resources.

Governance

The governance statement reflects compliance with relevant guidance and standards.

Other Areas of interest

- Absenteeism figures for 2022-23
 - The latest National Fraud Initiative
 - The Local Government Auditor's Report 2023 was published on 15 December 2023
-

Outlook

- Financial resilience

2. Introduction

1. As Local Government Auditor, I have a statutory responsibility to provide an opinion on the Council's financial statements. The results of my audit of the 2022-23 Statement of Accounts are summarised in this report.
2. The legislative role for the Local Government Auditor is contained in the Local Government (Northern Ireland) Order 2005 and the Local Government (Northern Ireland) Act 2014. In addition, the Code of Audit Practice, published on 1 April 2021, prescribes the ways in which statutory audit functions are to be carried out. The Code of Audit Practice is supported further by a Statement of Responsibilities of Local Government Auditors and Local Government Bodies. Both of these documents are published on the NIAO website.
3. Management have specific responsibilities regarding the production of financial statements and are expected to have effective governance arrangements in place to deliver the Council's corporate objectives. The publication of the financial statements is an essential means to account for the stewardship and use of public money each year.
4. As external auditor, it is my responsibility to form an opinion on whether:
 - the financial statements give a true and fair view of the financial position of the Council and its income and expenditure for the year then ended;
 - the financial statements have been prepared in accordance with the relevant accounting and reporting framework as set out in legislation, applicable accounting standards or other directions thereunder;
 - the parts of the remuneration report to be audited have been properly prepared in accordance with the Department for Communities' directions; and
 - the information given in the Narrative Report is consistent with the financial statements.
5. The Code of Audit Practice outlines a range of other matters that can be reported by exception. One of these items relates to the information published with the audited financial statements, such as the governance statement. I report if the governance statement is

not consistent with the information gathered during the audit including that gained from carrying out work on the Council's arrangements for securing economy, efficiency and effectiveness of resources, and our work on performance improvement.

6. This report is solely based upon those matters that have come to my attention as a result of normal audit procedures. Consequently, our comments should not be regarded as a comprehensive record of all deficiencies that may exist or all improvements that could be made.

3. Audit of Financial Statements

Statement of Accounts

1. The accounts should be prepared in accordance with International Financial Accounting Standards as interpreted for Local Government in the, `Code of Practice on Local Authority Accounting in the United Kingdom`.
2. The financial statements were signed by the Chief Financial Officer and submitted for audit on 29 June 2023. Following the audit, the Statement of Accounts were approved by the Council and certified by me within the statutory deadline of 30 September 2023. The Statement of Accounts are published on the Council's website.
3. On conclusion of the audit, the 2005 Order requires me to issue a certificate stating the audit is complete and to give an opinion on the statement of the accounts. The audit certificate and opinion are contained within the Statement of Accounts.

Audit Certificate and Opinion

4. For the year ended 31 March 2023, I gave the following unqualified opinion on the financial statements.

In my opinion:

- the financial statements give a true and fair view, in accordance with relevant legal and statutory requirements and the Code of Practice on Local Authority Accounting in the United Kingdom 2022-23, of the financial position of the Council as at 31 March 2023, and its income and expenditure for the year then ended; and
 - the financial statements have been properly prepared in accordance with the Local Government (Accounts and Audit) Regulations (Northern Ireland) 2015 and the Department for Communities' directions issued thereunder.
5. At the end of the audit I issue a Report to those charged with Governance, addressed to the Chief Financial Officer of the Council, on the results of the audit, noting the most significant issues, making recommendations and seeking comments. That report is presented separately to the Governance and Audit Committee.

4. Key Statistics

Income and Expenditure	2022-23 £000	2021-22 £000	Variance £000
Total income	(77,488)	(72,519)	(4,969)
Total expenditure	83,715	79,508	4,207
Adjustments between accounting basis and funding basis	(3,395)	(7711)	4,316
Net expenditure chargeable to the General Fund	2,832	(722)	3,554

Capital and Reserves	2022-23 £000	2021-22 £000	Variance £000
Capital expenditure in year	2,139	2,122	17
Usable Reserves	40,922	39,770	1,152
Long Term Assets	161,125	151,788	9,337
Loans Outstanding	21,232	22,387	(1,155)

Staff	2022-23	2021-22	Variance
	FTE	FTE	FTE
Staff numbers	713	710	3
	£000	£000	£000
Staff Costs (including agency costs)	33,344	30,743	2,601
Staff Absences	Days	Days	Days
• short term	3.8	3.5	0.3
• long term	12.0	10.1	1.9
• total	15.8	13.6	2.2

5. Work on economy, efficiency and effectiveness

Proper Arrangements

1. The Local Government (Northern Ireland) Order 2005 requires me to be satisfied that the Council has in place proper arrangements for securing economy, efficiency and effectiveness in the use of its resources.
2. The Council is required to maintain an effective system of internal control that supports the achievement of their policies, aims and objectives, while safeguarding and securing value for money from the public funds and other resources at their disposal.
3. My review of the Council's arrangements for securing value for money covered a wide range of areas, including:
 - Strategic priorities, financial strategies and policies;
 - Financial reporting systems and sound financial internal controls;
 - Procurement strategies and policies to deliver sustainable outcomes and value for money;
 - Promoting a good governance environment including managing risks and systems of internal control;
 - Asset management strategies and policies to safeguard assets, deliver objectives and generate value for money; and
 - A framework to manage the workforce to effectively support the achievement of strategic priorities.
4. On the basis of my review this year, I am satisfied the Council has in place proper arrangements to secure economy, efficiency and effectiveness in the use of its resources.

6. Governance

Annual Governance Statement

1. The Local Government (Accounts and Audit) Regulations (Northern Ireland) 2015 requires the Council to conduct a review, at least once in a financial year, of the effectiveness of its governance framework (including its system of internal control) and to then approve an Annual Governance Statement.
 2. I am required to report if the Annual Governance Statement:
 - does not reflect compliance with the Code of Practice on Local Authority Accounting in the United Kingdom 2022-23;
 - does not comply with proper practices specified by the Department for Communities; or
 - is misleading or inconsistent with other information I am aware of from my audit.
 3. My review did not highlight any inconsistencies.
-

Internal Audit

4. The 2015 Regulations also require councils to undertake an adequate and effective internal audit of its accounting records and of its systems of risk management, internal controls and governance processes using current internal auditing standards. The Council has an in-house Internal Audit function that conducted a review on the effectiveness of the systems of internal controls in place during 2022-23. The findings of this work were presented to the Council's Governance and Audit Committee for review and was considered by me as part of the audit process.
-

Governance and Audit Committee

5. It is essential that Members exercise effective scrutiny of the internal controls processes and procedures in place within the Council. One way that Members carry out this function is through the Governance and Audit Committee.
6. The Governance and Audit Committee is also invited to review my audit reports and my staff attend meetings to present audit findings.

7. Other areas of audit interest

Absenteeism

1. For the twelve months to the end of March 2023, the average number of day's sick absence in the Council was 15.8 days per full time employee as compared to 13.6 days in 2021-22. The Council has told me that the increase of 2.2 days was mainly due to long term absence for mental health issues. The Council has a dedicated HR representative for long and short term sickness absence, who works in partnership with managers to offer support and coaching for dealing with attendance issues. The Council has indicated that it is currently reviewing its attendance policy, in consultation with stakeholders.
2. The Local Government Auditor produced a good practice guide on Managing Attendance in Central and Local Government on 23 November 2020. The report provides an overview of sickness absence across central and local government in Northern Ireland and sets out key principles for managing attendance that are consistent across the public sector.

Local Government Auditor's Report – 2023

3. The 2023 [Local Government Auditor's Report](#) was published on 15 December 2023 and is available on the NIAO website. The Report provides my perspective on local councils, based upon the findings of the various audits I have conducted across the 2020-21 and 2021-22 financial years.
4. The Report highlights areas of strength and areas for improvement within local councils. It also considers important issues that may affect councils in the medium term. The Council and its members should consider this report in the context of its own activities for any improvements that could be made.

Performance improvement audit and assessment

5. Under the Local Government (Northern Ireland) Act 2014 the Council has a statutory duty to make arrangements to secure continuous improvement in the exercise of its functions and to set

improvement objectives for each financial year.

6. Each year councils are required to produce an Annual Improvement Plan for the year ahead and a self-assessment report for the year just past. The Local Government Auditor is required to audit the prior year self-assessment report and the incoming Annual Improvement plan and assess whether the Council is likely to have complied with the legislation.
7. My Annual Improvement Report for 2022-23 was published on 31 March 2023 and concludes that Council met its statutory duties in relation to publication of the 2021-22 self-assessment report and 2022-23 Annual Improvement Plan. Given the impact of the pandemic on council services, however, I was unable to conclude on an assessment of whether the council was likely to meet their performance improvement responsibilities under legislation for the 2022-23 year.

WGA

8. Whole of Government Accounts (WGA) are consolidated financial statements for the whole of the UK public sector. The National Audit Office audits these accounts and sets the overall audit approach. As such the Council is within the band of organisations in 2021-22 where additional audit procedures were not required.
9. The Whole of Government Accounts annual return for 2021-22 has been submitted for HM Treasury's consolidation process.

NFI

10. The Council participates in the National Fraud Initiative, a UK wide data matching exercise undertaken every two years that is designed to highlight savings for the public sector as a whole.
 11. The report summarising the results of the data matching exercise for the period 1 April 2020 to 31 March 2022 was published on 19 July 2022 and is available on the NIAO website.
 12. The 2022-23 data matching exercise is currently underway and the results are due to be published mid-2024.
-

Audit Fee

13. The audit fees for the financial audit and performance improvement audit are in line with the estimate.

8. Outlook

Financial Resilience

1. The current cost of living crisis and high inflation rates have had a significant impact on council finances. There are continuing challenges for councils to deliver a balanced budget within the current environment. Costs have increased in multiple areas, such as utilities, construction, and pay settlements.
2. As part of the NIAO audit strategy this year, I examined Council's financial resilience through examination of their assessment of going concern, financial projections and plans, and also considered the robustness of Council reserves.
3. No issues were identified as a result of my audit, however Council should continue to carefully consider the impact of rising prices on budgets, and closely monitor and forecast future costs and affordability.

And finally.....

4. I would like to thank the Council for its continued co-operation during the audit. My staff and I look forward to working with Council during the year in preparation for next year's audit.