

**AGENDA FOR  
AUDIT COMMITTEE**



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**To: All Members of Audit Committee**

**Councillors** : A Arif, D Berry, C Birchmore, I Gartside, M Hayes,  
L McBriar, E Moss, M Rubinstein and M Whitby (Chair)

Dear Member/Colleague

**Audit Committee**

You are invited to attend a meeting of the Audit Committee which will be held as follows:-

|                             |   |
|-----------------------------|---|
| <b>Date:</b>                | Thursday, 14 December 2023  |
| <b>Place:</b>               | Council Chamber, Bury Town Hall   |
| <b>Time:</b>                | 7.00 pm   |
| <b>Briefing Facilities:</b> | If Opposition Members and Co-opted Members require briefing on any particular item on the Agenda, the appropriate Director/Senior Officer originating the related report should be contacted. |
| <b>Notes:</b>               |   |

## **AGENDA**

### **1 APOLOGIES FOR ABSENCE**

### **2 DECLARATIONS OF INTEREST**

Members of the Audit Committee are asked to consider whether they have an interest in any of the matters on the agenda and, if so, to formally declare that interest.

### **3 MINUTES OF THE LAST MEETING (Pages 5 - 14)**

The Minutes of the last meeting of the Audit Committee held on

### **4 CORPORATE RISK REGISTER (Pages 15 - 82)**

A report from Paul McKeivitt, Interim Executive Director of Finance (S151 Officer) is attached.

#### **a RISK REGISTER - DEEP DIVE (Pages 83 - 86)**

CR20 – Increasing Energy Prices – Laura Swann and Jason Kelly

### **5 MAZARS AUDIT PROGRESS REPORT (Pages 87 - 104)**

Report from the External Auditor is attached.

### **6 FRAUD PLAN (Pages 105 - 112)**

A report from Paul McKeivitt Interim Section 151 Officer is attached.

### **7 INTERNAL AUDIT PROGRESS REPORT (Pages 113 - 152)**

Reports from the Head of Fraud, Audit, Insurance and Risk are attached.

### **8 EXCLUSION OF PRESS AND PUBLIC**

To consider passing the appropriate resolution under Section 100(A)(4) of the Local Government Act 1972 that the press and public be excluded from the meeting during consideration of the following items of business since they involve the likely disclosure of the exempt information stated.

### **9 INTERNAL AUDIT REPORTS (Pages 153 - 184)**

A report from the Head of Audit, Fraud, Insurance and Risk is attached.

### **10 SPECIAL INVESTIGATIONS REPORT (Pages 185 - 190)**

A report from the Head of Fraud, Audit, Insurance and Risk is attached.

### **11 MEMBERS' FEEDBACK**

**Minutes of:**               **AUDIT COMMITTEE**

**Date of Meeting:**       12 October 2023

**Present:**                 Councillor M Whitby (in the Chair)  
Councillors A Arif, C Birchmore, M Hayes, J Mason, L McBriar,  
E Moss and M Rubinstein

**Also in attendance:** Isobel Booler, Director of Education and Skills  
Sam Evans, Executive Director of Finance  
Louise Kirkman, Risk Manager  
Paul Lakin, Executive Director (Place), Business Growth and  
Infrastructure  
Simon Peet, Chief Accountant  
Jeanette Richards, Executive Director, Children & Young  
People  
Amelia Salford, Mazars  
Janet Spelzini, Head of Fraud, Audit, Insurance and Risk

**Public Attendance:** No members of the public were present at the meeting.

**Apologies for Absence:** Councillor D Berry and Councillor I Gartside  
Jacqui Dennis, Director of Law and Democratic Services

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**AU.1           APOLOGIES FOR ABSENCE**

Apologies are recorded above.

**AU.2           DECLARATIONS OF INTEREST**

There were no declarations of interest made at the meeting.

**AU.3           PROCUREMENT UPDATE**

Nichola Cooke, Assistant Director, Star Procurement presented the Committee with an update on procurement across the Council.

The presentation explained the role of STAR Procurement and the support that they offered; Why procurement is important; roles and responsibilities of devolved procurement; the changes that have happened within procurement which includes;

- New Contract Procedure Rules in place
- New Procurement Strategy
- New Thresholds
- New Procurement Guide
- New Templates
- New Processes and procedures
- New Centralised Contracts Register and contracts amnesty
- New Governance guidance
- New Roles and responsibilities
- New Procurement Service Risk Register

It was explained that training on the procurement process had been provided to management, through the Management Development Programme and at Senior Management Forum, Service Specific Training had been providing and was still ongoing across the Council. Specific training regarding new regulations was under development and would be rolled out and mentoring a training for strategic procurement staff had been provided.

Nicola reported that the team had met with service leads to advise on how procurement can work with them, identify strategic priorities and impacts on existing contracts, identify support needs and where advice may be required, ensure that the Corporate Contracts Register is up to date and identify procurement activities in the future and how these can be delivered.

Nicola explained that she attended regular management meetings and was working with Corporate Procurement to provide advice and guidance.

The next steps had been identified as;

- Ongoing relationship building with services
- Detailed spend analysis
- Review of template documents
- Identification and delivery of internal collaborative contracts
- Forward Plan
- Support Financial Improvement Plan actions
- Input into development of Social Value Strategy
- Action plan for implementation of new Regulations
- Identification of 'Procurement Champions'

Following a question relating to how successful the roll out had been it was explained that the work to date had gone well and 1 over 100 staff members had participated to date with more to come.

**It was agreed:**

That a further update be provided in 12 months.

## **AU.4 MINUTES OF THE LAST MEETING**

**It was agreed:**

That the Minutes of the last meeting held on 31 July be approved as a correct record and signed by the chair.

## **AU.5 MATTERS ARISING**

The action log from the last meeting was attached.

A composite note from the Chief Executive was attached in relation to the 3 Corporate Risk Register deep dives presented at the July meeting of the Audit Committee following a request for further assurance and oversight regarding actions to reduce risk and effectively manage impacts.

**It was agreed:**

1. That the report of the Chief Executive be noted.
2. That the Chief Executive be thanked for the assurance.

**AU.6 RISK REGISTER 2023/24 Q2**

The Executive Director of Finance submitted a report providing an updated position with regards to the risks identified and assessed on the Council's Corporate Risk Register. These risks have been considered by the Executive Team as those with the potential to disrupt the Council's strategic objectives and service delivery.

A total of 22 risks have been identified as those of a genuine corporate nature and are summarised as follows:

- 22 risks are currently present on the Corporate Risk Register
- 16 risks are currently rated as Significant (risk score 15-25)
- 6 risks are currently rated as High (risk score 8-12)
- 0 risks are currently rated as Moderate (risk score 4-6).

Of these 22 risks:

- 1 has increased in score
- 0 have decreased in score
- 20 have remained static
- 1 has been newly introduced

Following a decision at the last meeting of the Audit Committee, Members asked for a further information in respect of the following areas of concern:

CR1 - Financial Sustainability

CR16 - SEND

CR15 - BGI – 3 major regeneration projects

Officers from each of those service areas attended the meeting and provided an update on work undertaken to mitigate risk, in addition, accompanying reports were circulated to Members ahead of the meeting and included key potential impacts and how those impacts were being controlled. Member's present in considering the following points and issues were raised:

CR15 - Regeneration & Development

In response to questions raised around timescales for levelling up projects, and the fixed timescales involved the Director of BGI explained that visits from the Department from Levelling Up have highlighted confidence in the ability to deliver.

In response to a question concerning the Prestwich Village Scheme it was explained that although it was still in the early stages tremendous progress had been made. The Council would be investing in the scheme and the use of partners such as Homes England and the GMCA to make it work and share expertise.

In response to concerns about increasing construction costs, the Director of BGI explained that although projects have become more difficult the Council were not dealing with the unknown. The schemes were both new builds and were therefore a lower risk profile.

Members discussed the need to ensure that the right market and skills set were identified in relation to the Atom Valley (Northern Gateway) site for employment development within the Places for Everyone Joint Plan. Paul explained that the discussions were ongoing with the GMCA and the Councils and other partners invested in the scheme to ensure that the site would be a key driver in achieving a more balanced Greater Manchester economy by significantly boosting the competitiveness of the northern districts and in delivering the aspirations.

It was also explained that the Leader of the Council is the portfolio holder for Technical Education and Skills for the Greater Manchester Combined Authority.

In response to Members' comments regarding HS2, Paul explained that he felt there would be little impact on the development of the scheme following the recent news regarding the future of HS2.

## CR16 SEND

The Director of Education and Skills provided Members with an overview of the issues of concern in relation to this risk.

Councillor McBriar referred to the increase in complaints of 400% and asked that the figures in relation to this were shared as this will show the true figures rather a percentage based on what could be low numbers. It was also asked for monthly figures to be provided in relation to complaints received.

In relation to a question raised with regard to the 1001 pathway, Isobel explained that 1001 related to the first 1001 days in a child's life and the requirement to ensure that needs are identified earlier and that the families' needs are being met. There had been an increase in the number of children starting school who were non-verbal which highlighted the requirement to ensure that the 6 month health visit and the 2 year health visits happened.

A question was raised in relation to the initiatives that were included in the information provided and it was asked which initiative was most important. Isobel explained that the Council needs to ensure that it has a SEND provision that it can be proud of. There are already 2 outstanding special schools in the borough that have received positive feedback from Ofsted and this provision needs to be maintained alongside graduated support being met in mainstream provision.

## CR1 FINANCIAL SUSTAINABILITY

The Executive Director of Finance attended to provide members with an overview of the concerns in relation to the risk.

Councillor McBriar referred to the risk remaining at the highest level and asked when it would begin to drop.

Sam Evans explained that when the council finances were in a balanced position the risks could be reduced.

In response to a question about staff pay rise and the percentages involved it was reported that each 1% equated to circa £1m. During budget setting, 7% had been allocated.

In response to a query in relation to council reserves it was reported that the £22m in the general fund had reduced to £15m. A departmental 'sweeping up' of reserves was ongoing and the transformation reserves had identified £6m for DSG.

**It was agreed:**

That the information provided be noted and those that had attended to report be thanked.

That, at its next meeting on 14 December 2023, the Audit Committee would carry out deep dives on the following risks:-

CR19 – Financial Capacity

CR20 – Increase in energy prices.

**AU.7 FINAL ACCOUNTS 2021/22**

The Committee was presented with the Statement of Accounts 2021-2022.

The Committee were asked to consider the updated 2021/22 Statement of Accounts (Appendix 2) and subject to there being no further material changes, delegate authority to the Chair of the Audit Committee, to sign-off the audited 2021/22 Statement of Accounts once the external auditors have confirmed completion of the 2021/22 audit.

Those present were given the opportunity to ask questions and make comments and the following queries were raised:

Councillor McBriar referred to the external valuation of Manchester Airport which had been revised downwards by £14.8m and asked how this had happened.

It was explained that when Mazars, the Council's External Auditors had tested the valuations they had found an error. The valuation had been carried out by BDO who are an external company on behalf of all Greater Manchester Authorities.

Amelia Salford from Mazars explained that Mazars had requested technical information in relation to the valuation and had found the error which affected all of the Greater Manchester Authorities valuations. Amelia explained that the valuation has no impact on the revenue budget.

Councillor Rubinstein referred to the error made by the external valuers and asked if this had therefore had further financial implications in relation to the External Auditor fee. The Council will have paid towards the valuation work and then paid towards the investigation work following the discovery of the error.

Councillor Rubinstein asked if the Council would be recompensed by BDO for the error.

Sam reported that she was due to attend the GM Treasurer's meeting and would raise the issue there.

**It was agreed:**

1. That the changes to the 2021/22 Statement of Accounts as a result of the annual audit as detailed in paragraphs 3.6 to 3.8 and 2021/22 Statement of Accounts Appendix 2) be noted.

2. That the Committee approve the updated 2021/22 Statement of Accounts (Appendix 2) and subject to there being no further material changes, delegate authority to the Chair of the Audit Committee, to sign-off the audited 2021/22 Statement of Accounts once the external auditors have confirmed completion of the 2021/22 audit.
3. That the Committee delegate authority to the Chair of the Audit Committee and the Executive Director of Finance, S151 Officer, to sign the Letter of Representations upon completion of the 2021/22 audit.

## **AU.8 INFORMATION GOVERNANCE REPORT**

### **It was agreed:**

That the report would be deferred to the next meeting of the Audit Committee.

## **AU.9 INTERNAL AUDIT PROGRESS REPORT**

The Head of Fraud, Audit Insurance and Risk presented a report of the Section 151 Officer setting out the progress made to date against the annual audit plan 2023/24.

The report enables Members to monitor the work of the Internal Audit service, raise any issues for further consideration and provide an opportunity to request further information or to suggest areas for additional or follow up work.

The conclusions drawn from the report were:

- The majority of work outstanding from the 2022/23 plan has now been completed and work on 2023/24 plan is progressing.
- Twelve reviews have concluded, and reports have been issued to Members since the beginning of the financial year. Eight reports relate to the 2022/23 annual audit plan and were considered when formulating the annual audit opinion for 2022/23. Four reports relate to the 2023/24 annual audit plan.
- Work on 2023/24 plan is progressing. Sixteen reviews are ongoing, two reviews are at draft report stage. Three reviews which were in progress have been put on hold and deferred until quarter 4 of 2023/24.
- Ten follow up exercises have been completed during Quarter 2.
- An additional second-follow up exercise has been introduced to pick up any recommendations not implemented or only partially implemented.
- Resources originally calculated as available for the delivery of the annual plan need to be reduced by 100 days. However, currently no proposal is made to remove any identified audits from the approved plan.

Members of the Committee were given the opportunity to ask questions and make comments and the following points were raised:-

- Councillor Moss referred to 3 reports where the recommendations had not been fully implemented and he requested the matrices be provided to show what steps were being taken.



- Councillor Whitby referred to the improvements made in the transport stores and asked that this be noted.

**It was agreed:**

That Members note the report and the work undertaken by Internal Audit.

**AU.10 ANNUAL FRAUD PLAN**

The Head of Fraud, Audit, Insurance and Risk presented a report of the Section 151 Officer presenting the Committee the Annual Fraud Plan for 2023/24 and providing an update of the work undertaken by the Fraud Team from 1st April.2023 to 30th September 2023

The conclusions drawn from the report are:

- The Counter Fraud Team have reviewed and updated 5 policies:-
- Anti-Fraud and Corruption Strategy
- Fraud and Corruption Prosecution Policy
- Whistleblowing Policy
- Anti-Bribery and Corruption Policy
- Anti- Money Laundering Policy

The National Fraud Initiative results are being checked. The Fraud Team have checked 731 entries resulting in 340 Blue Badges being cancelled with a Cabinet Office estimated saving of £221,000.

A review has been conducted of Business Rates accounts following work generated from Covid-19 Business Support Grants. 58 Business Rates accounts have been identified where there may be income totalling £740,000 which may be eligible for recovery. Additionally, covid-grant overpayments of £245,000 have also been identified, All this information has been passed to the Revenues and Benefits Team for their review and appropriate recovery action.

Appended to the report was:-

- the 2023-24 Counter Fraud Plan
- Anti Bribery Policy
- Anti Money Laundering Policy

Those present were given the opportunity to ask question or make comments and the following points were raised:-

- Councillor Hayes referred to the review of Business Rates accounts and asked that the Committee be advised when it was completed and how much the Council had been able to recover.
- Councillor Rubinstein referred to the NFI results and the work that had been completed by the Fraud Team relating to blue badges.

Janet explained that 731 entries had been checked which resulted in 340 blue badges being cancelled.

**It was agreed that:**

1. The Annual Fraud Plan be approved;
2. The Anti Bribery and Corruption Policy be approved;
3. The Anti Money Laundering Policy be approved;
4. The work undertaken by the Fraud Team be noted.

**AU.11 MAZARS PROGRESS REPORT**

Amelia Salford presented the Audit Progress Report which set out the Audit Progress to date and gave information relating to national publications.

It was reported that when the Audit Completion Report was presented to the Audit Committee a number of items were shown as outstanding.

Amelia explained that the agreement of the amendments required in respect of Property, Plant and Equipment had been completed, work was in progress in relation to the technical review of the financial statement and this was due to be signed off by the technical team.

With regards to the 2021/2022 Value for Money work, Mazars had received the supporting evidence that had been requested and the commentary in relation to this would be brought to the Audit Committee in December.

With regards to the 2022/2023 Audit work, Amelia reported that the Council had published its draft Accounts and Annual Governance Statement on 31 May 2023 in line with the statutory timetable. Amelia explained that Mazars would commence their Audit in January 2024 with a sign off expected in March 2024.

The members of the Audit Committee were given the opportunity to ask questions and make comments and the following points were raised:-

- In reference to the 2022 – 2023 Audit of the Statement of Accounts and Annual Audit Statement to be carried out by Mazars, Councillor Moss asked how realistic the proposed schedule of 3 months' was.

Sam Evans explained that the production of the accounts was improving year on year, Sam stated that Mazars had been asked for sampling ahead of Christmas so that any queries could be responded to.

- Councillor Whitby asked why it was not possible for Mazars to start the Audit work earlier.

Amelia explained that Mazars also carried out the NHS audit work which did not commence until later in the year which meant that work on the council audits started in June. Mazars had prioritised audits for smaller clients and councils where less work was required.

- Councillor Whitby asked that Amelia take the request for the External Audit work to start earlier back to Mazars on behalf of the Audit Committee.

**It was agreed:**

That the Audit Committee note the report.

**AU.12 EXCLUSION OF PRESS AND PUBLIC****Delegated decision:**

That in accordance with Section 100(A)(4) of the Local Government Act 1972, the press and public be excluded from the meeting during consideration of the following items of business since they involved the likely disclosure of exempt information, relating to any action taken, or to be taken in connection with the prevention, investigation and prosecution of crime.

**AU.13 INTERNAL AUDIT REPORTS**

Janet Spelzini presented a report setting out information in relation to final reports that had been issued since the last meeting of the Audit Committee meeting in July 2023.

Isobel Booler attended the meeting to update Members in relation to the Chesham School report.

**It was agreed:**

That the contents of the report be noted

**AU.14 INTERNAL AUDIT SPECIAL INVESTIGATIONS**

Janet Spelzini, Head of Fraud, Audit, Insurance and Risk presented a report updating members in relation to Internal Audit Special Investigations reports which have been undertaken to examine significant issues / whistleblowing allegations, raised with the S151 officer.

**It was agreed:**

That the contents of the report be noted.

**AU.15 MEMBERS' FEEDBACK**

Councillor Rubinstein referred to the acronyms that were used in reports received by the Audit Committee and asked that a list of acronyms be provided.

Councillor Rubinstein also explained that he found that Mazars report difficult to read due to the way that it was presented.

**COUNCILLOR M WHITBY**

**Chair**

**(Note: The meeting started at 7.00 pm and ended at 9.30 pm)**



| Classification | Item No. |
|----------------|----------|
| Open           |          |

|  |  |
|--|--|
| <b>Meeting:</b>                        | Audit Committee  |
| <b>Meeting date:</b>                   | 14 <sup>th</sup> December 2023   |
| <b>Title of report:</b>                | Risk Register  |
| <b>Report by:</b>                      | Paul McKeivitt<br>Interim Executive Director of Finance (S151 Officer) |
| <b>Decision Type:</b>                  | Non Key  |
| <b>Ward(s) to which report relates</b> | All  |

### Executive Summary:

Risk Management is a key part of Bury Metropolitan Borough Council's Code of Corporate Governance and underpins its system of internal control.

The Audit Committee are tasked with the responsibility of reviewing and scrutinising risks where the impact has the potential to disrupt achievement of the Council's priorities. This is achieved by regular review and their seeking assurance that appropriate controls are implemented to manage these risks.

This report provides an updated position with regards to the risks identified and assessed on the Council's Corporate Risk Register. These risks have been considered by the Executive Team as those with the potential to disrupt the Council's strategic objectives and service delivery.

A total of **22** risks have been identified as those of a genuine corporate nature and are summarised as follows:

- **22** risks are currently present on the Corporate Risk Register
- **15** risks are currently rated as Significant (risk score 15-25)
- **6** risks are currently rated as High (risk score 8-12)
- **1** risk is currently rated as Low (risk score 1-3).

Of these **22** risks:

- **0** has increased in score
- **3** have decreased in score
- **15** have remained static
- **4** have not been reviewed in the last reporting period
- **2** are proposed for closure

## **Recommendation(s)**

**That:**

The Audit Committee:

- Note the update provided;
- Receive the Corporate Risk Register at Appendix A;
- Review the Risk Matrix presented at Appendix B;
- Review the information presented;
- Review, analyse and discuss the Deep Dive Report at Appendix C;
- Determine whether the level of assurance provided against the risks is sufficient: and,
- In addition to CR19 (Financial Capacity), select two further risks to receive a “Deep Dive” review to be presented at the next meeting of the Audit Committee.

## Key Considerations

### 1. Background

The Corporate Risk Register is routinely presented to Audit Committee. This report provides an update on the work progressed to date and demonstrates that efforts are ongoing to embed a culture of good risk management across the Council.

### 2. Key Considerations

The work progressed in the last quarter reflects progress toward providing the Audit Committee with adequate assurance of dynamic corporate risk management. The Corporate Risk Register represents a collation of risks identified and assessed as significant risks to Bury Council.

The following heat maps reflect the current and target risk profile in respect to those risks on the appended register:

**Current**

|        |   |            |   |   |   |   |
|--------|---|------------|---|---|---|---|
| Impact | 5 | 1          | 2 | 6 | 5 |   |
|        | 4 | 1          | 2 | 1 | 1 |   |
|        | 3 | 1          | 2 | 1 | 1 |   |
|        | 2 | 1          | 1 | 1 | 1 |   |
|        | 1 | 1          | 1 | 1 | 1 |   |
|        |   | 1          | 2 | 3 | 4 | 5 |
|        |   | Likelihood |   |   |   |   |

**Target**

|        |   |            |   |   |   |   |
|--------|---|------------|---|---|---|---|
| Impact | 5 | 1          | 5 | 3 | 1 | 1 |
|        | 4 | 1          | 5 | 4 | 1 | 1 |
|        | 3 | 1          | 1 | 1 | 1 | 1 |
|        | 2 | 1          | 1 | 1 | 1 | 1 |
|        | 1 | 1          | 1 | 1 | 1 | 1 |
|        |   | 1          | 2 | 3 | 4 | 5 |
|        |   | Likelihood |   |   |   |   |

## Community impact/ Contribution to the Bury 2030 Strategy

Ensuring compliance with Financial Procedures and Policies

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### Equality Impact and considerations:

24. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

*A public authority must, in the exercise of its functions, have due regard to the need to -*

- (a) *eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
  - (b) *advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
  - (c) *foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*
25. *The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.*

**Assessment of Risk:**

The following risks apply to the decision:

| Risk / opportunity  | Mitigation   |
|---|--|
| <ul style="list-style-type: none"> <li>• Failure to identify and own major risks that may prevent the Council from achieving one or more of its objectives.</li> <li>• Failure to ensure that the major risks are being managed.</li> </ul> | <ul style="list-style-type: none"> <li>• Review of risk management arrangements at Corporate level.</li> <li>• Review of the Council's risk management strategy and arrangements for the maintenance of risk registers.</li> <li>• Review the associated information management system and reporting arrangements.</li> <li>• Regular review of a Corporate Risk Register in alignment with the revised risk management strategy.</li> </ul> |

**Consultation:**

  N/a  

**Legal Implications:**

The Council constitution sets out that the Audit Committee is responsible for providing assurance on the Council's audit, governance (including risk management and information governance) and financial processes in accordance with the functions scheme. Under the Account and Audit Regulations 2015, Authorities must



undertake an effective internal audit to evaluate the effectiveness of their risk management, control and governance processes. Consideration must be given to the Public Sector Internal Audit Standards (PSIAS) and sector specific guidance.

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### **Financial Implications:**

Mitigating some of the risks may require financial resources and a number of risks are around organisational and services financial resilience.

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### **Report Author and Contact Details:**

Louise Kirkman, Risk Manager  
l.kirkman@bury.gov.uk

### **Background papers:**

- Corporate Risk Register at Appendix A;
- Risk Matrix at Appendix B;
- Deep Dive Reports at Appendix C.

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

| Term | Meaning                                       |
|------|---|
| BGI  | Business Growth and Infrastructure Department |
| CC   | Corporate Core Department                     |
| CYP  | Children and Young People's Department        |
| H&C  | Health & Care Department                      |
| FIN  | Corporate Core Finance Department             |
| OPS  | Operations Department                         |

## Risk Register Update

### 1. Introduction

- 1.1. This report provides an updated position in respect to those risks that have been identified and assessed as significant risks to Bury Council, collectively referred to as the Corporate Risk Register.
- 1.2. The report presents the risk position and status as at **30 November 2023** and is the third report for the current financial year.

### 2. Background

- 2.1. Following revision to the Council's approach to Risk Management, the Executive Team were tasked with developing a risk register that would capture events and circumstances which had the potential to disrupt the Council's ability to meet its strategic and operational objectives.
- 2.2. The Corporate Risk Register is at Appendix A. This repository captures the Council's key strategic risks agreed by the Executive Team and categorised as warranting regular scrutiny to help the Council minimise future risks and adverse implications. Additionally, it details the existing controls that provide some level of assurance and identifies planned actions being undertaken to mitigate these risks.
- 2.3. Assessment of each risk has been performed in accordance with the Risk Matrix, introduced within the Council's Risk Management Strategy, attached at Appendix B for ease.

### 3. Corporate Risk Register

- 3.1 The Corporate Risk Register captures risks identified as significant to delivery of the Council's key objectives, irrespective of their current scoring.
- 3.2 There are currently 22 risks on the Corporate Risk Register. Of these 22, 17 have been reviewed by the Risk Owner during the last period and assessed to: update the progression of mitigating actions; consider the level of assurance provided by existing controls; and re-evaluate both the likelihood and impact, in order to determine whether the risk score should be increased, decreased or remain static.
- 3.3 There are currently a total of 22 risks on the corporate risk register, of which 15 risks (68%) are rated as significant:

| No. Risks | Low (1-3) | Moderate (4-6) | High (8-12) | Significant (15-25) |
|-----------|-----------|----------------|-------------|---------------------|
| 22        | 1         | 0              | 6           | 15                  |

3.4 The following table presents the risks as split across Council directorates:

| Department   | No. Risks | Low (1-3) | Moderate (4-6) | High (8-12) | Significant (15-25) |
|--------------|-----------|-----------|----------------|-------------|---------------------|
| BGI          | 1         |           |                |             | 1                   |
| CC           | 6         |           |                | 2           | 4                   |
| CYP          | 3         |           |                | 1           | 2                   |
| Finance      | 2         |           |                |             | 2                   |
| H&C          | 3         |           |                | 1           | 2                   |
| OPS          | 6         | 1         |                | 2           | 3                   |
| Multi (CR29) | 1         |           |                |             | 1                   |
| <b>TOTAL</b> | <b>22</b> | <b>1</b>  |                | <b>6</b>    | <b>15</b>           |

3.5 In exercising their duty to scrutinise those risks presented, the Audit Committee are requested to consider the points below in relation to the information detailed for each risk:

- Does the Key Potential Impact accurately describe the real risk to the Council?
- Are the risk scores (Current and Target) reflective of the current position?
- Are the Current Controls still operating effectively?
- Do the Current Controls articulate how they contribute to managing the risk?
- Have or will the Planned Actions achieve or go towards mitigating the risk further?
- Horizon scanning – Is the Committee aware of any significant changes that could affect the risk in the future?

## 4 Trend Analysis

4.1 This section of the report reflects the current position of each risk following review by the Risk Owner:

### Risks that have increased in score

4.2 During this reporting period, **0** risk have increased in score

### Risks that have decreased in score

4.3 During this reporting period, **3** risks have decreased in score:

- **CR4 - Digital Transformation**
- **CR26 – Increasing Fuel Costs and New Red Diesel Restrictions** (*proposed for closure*)
- **CR27 – General Contract / Tenders Inflation** (*proposed for closure*)

### Risks that have remained static

4.4 During this reporting period, **15** risks have remained static:

- **CR3 – Security & Resilience**
- **CR5 – Increasing Demand Pressures**
- **CR6 – Climate Change**
- **CR7 – ICS Implementation & Establishment**

- **CR9 – Workforce Skills & Capability**
- **CR11 – Building Management (Operational Health & Safety)**
- **CR12 – Children’s Social Care Services**
- **CR13 – Regulatory Compliance**
- **CR14 – Staff Safety & Wellbeing**
- **CR16 – Special Educational Needs & Disabilities**
- **CR20 – Increasing Energy Prices**
- **CR21 – Project Safety Valve**
- **CR23 – Adult Social Care Reforms**
- **CR28 – Asylum & Immigration**
- **CR29 – Reinforced Autoclaved Aerated Concrete (RAAC)**

#### **Risks that have not been reviewed**

4.5 During this reporting period **4** risks have not been reviewed by their assigned Risk Owners:

- **CR1 – Financial Sustainability**
  - Due to the changes within Corporate Core Finance Department recently, a new Risk Owner has recently been assigned and the risk will be reviewed at the next meeting of the Audit Committee.
- **CR15 – Regeneration & Development**
- **CR19 – Financial Capacity**
  - Due to the changes within Corporate Core Finance Department recently, a new Risk Owner has recently been assigned and the risk will be reviewed at the next meeting of the Audit Committee, along with the Deep Dive.
- **CR25 – Housing Conditions (Damp, Mould & Condensation)**
  - Due to this risk recently being assigned with a new Risk Owner, the risk will be reviewed at the next meeting of the Audit Committee.

#### **Risks that have reached their target level**

4.6 During this reporting period **4** risks have reached their target level.

- **CR4 – Digital Transformation** (*proposed to remain for oversight*)
- **CR12 – Children’s Social Care Services** (*proposed to remain for oversight*)
- **CR26 – Increasing Fuel Costs and New Red Diesel Restrictions** (*proposed for closure*)
- **CR27 – General Contract / Tenders Inflation** (*proposed for closure*)

#### **New risks**

4.7 During this reporting period **0** new risks have been added to the Corporate Risk Register

### **5 Risks Presented for Closure**

5.1 Since the last meeting of the Audit Committee, **2** risks have been identified as recommended for closure:

- **CR26 – Increasing Fuel Costs & New Red Diesel**

- The Risk had previously reached its target score and was proposed to remain for oversight, however fuel prices have stabilised and the risk score is now below its target score.
- **CR27 – General Contract / Tenders Inflation**
  - In the last refresh in September, there had not been any price increases during the previous 2-3 months but it would have been too premature to reduce the level of risk at that time. The risk has been reviewed again in November and as an in-year price increase has not been asked for since before July, the level of risk has been reduced to reflect this. Previously contractors were only holding their rates for short periods of time but this is currently no longer the case. This risk may need to be added to the Corporate Risk Register again in the future if the situation changes, but the current projections suggest this is unlikely.

## 6 Deep Dives

6.1 The purpose of the Deep Dive Report is to promote discussion and closer scrutiny of specific risks selected by the Audit Committee, to ensure appropriate controls are implemented and rationale adequately explained.

6.2 At the July and October meetings, the Audit Committee requested detailed reports in respect of the following 2 risks:

- **CR19 – Financial Capacity** (October meeting)
- **CR20 – Increasing Energy Prices** (July meeting)

6.3 The report for the Deep Dives is included within Appendix C for review, analysis and discussion.

6.4 In this regard, the Audit Committee are requested to select two further risks from the open risks captured on the Corporate Risk Register, for Deep Dive analysis at their subsequent meeting.

## 7 Risk Management Strategy

7.1 In November 2019, a revised Risk Management Strategy was introduced, which reinforced the use of a 5x5 matrix (see Appendix B) and provided some descriptors of risk to aid quantification of both impact and likelihood, however the advent of Covid-19 in March 2020 meant that the strategy was not fully rolled out.

7.2 Since June 2020, significant work has been undertaken to implement a robust approach to risk management across Bury Council, commencing with the introduction of a framework that has been rolled out across all directorates. This was later supplemented with information and guidance sessions department by department to further embed a culture of dynamic risk identification and proactive management.

7.3 Risk Owners moved toward a comfortable rhythm of analysing risks due for review in the relevant reporting month and including risk as a standing item on departmental team meetings.

7.4 In March 2023, a new Risk Manager was appointed, who's key role is to shape and lead developments in Risk across the organisation, ensuring that risk management remains an effective and integral part of the Council's governance and decision-making arrangements. They will be responsible for promoting a positive risk management culture within Bury, implementing the risk management framework and approach, and continuing to develop an effective infrastructure for managing and reporting risk across the Council.

- 7.5 Workshops have been underway since their appointment and the ethos and intention of their objective is already being well embedded. The Corporate Risk Register continues to be reviewed and maintained, Departmental Risk Registers are being reviewed, and Service Risk Registers being developed.
- 7.6 As the Council and Risk Manager are keen to further improve their approach to risk management in order to mitigate any potential factors that will affect the Council's objectives, during the meeting in July 2023, the Audit Committee approved the review and refresh of the Risk Management Strategy and work is well underway with this. A further updated position will be presented to Audit Committee as soon as the Strategy is ready for approval.

## **8 Recommendations**

8.1 The Audit Committee is asked to:

- Note the update provided;
- Receive the Corporate Risk Register at Appendix A;
- Review the Risk Matrix presented at Appendix B;
- Review the information presented;
- Review, analyse and discuss the Deep Dive Report at Appendix C;
- Determine whether the level of assurance provided against the risks is sufficient; and,
- In addition to CR19 (Financial Capacity), select two further risks to receive a "Deep Dive" review to be presented at the next meeting of the Audit Committee.

# **Bury Council**

## **Corporate Risk Register 2023/2024**

### **Quarter 3**

## SUMMARY

| Risk Ref | Risk Title                                      | Likelihood | Impact | Score |
|----------|---|------------|--------|-------|
| CR1      | Financial Sustainability                        | 5          | 5      | 25    |
| CR3      | Security & Resilience                           | 4          | 5      | 20    |
| CR4      | Digital Transformation                          | 2          | 4      | 8     |
| CR5      | Increasing Demand Pressures                     | 4          | 5      | 20    |
| CR6      | Climate Change                                  | 5          | 4      | 20    |
| CR7      | ICS Implementation & Establishment              | 3          | 4      | 12    |
| CR9      | Workforce Skills & Capability                   | 4          | 5      | 20    |
| CR11     | Building Management                             | 4          | 5      | 20    |
| CR12     | Children's Social Care Services                 | 2          | 5      | 10    |
| CR13     | Regulatory Compliance                           | 3          | 4      | 12    |
| CR14     | Staff Safety & Wellbeing                        | 4          | 4      | 16    |
| CR15     | Regeneration & Development                      | 4          | 5      | 20    |
| CR16     | Special Educational Needs & Disabilities        | 5          | 5      | 25    |
| CR19     | Financial Capacity                              | 4          | 5      | 20    |
| CR20     | Increasing Energy Prices                        | 5          | 5      | 25    |
| CR21     | Project Safety Valve                            | 5          | 5      | 25    |
| CR23     | Adult Social Care Reforms                       | 3          | 5      | 15    |
| CR25     | Housing Conditions                              | 3          | 3      | 9     |
| CR26     | Increasing Fuel Costs & Red Diesel Restrictions | 3          | 3      | 9     |
| CR27     | General Contract/Tenders Inflation              | 1          | 2      | 2     |
| CR28     | Asylum & Immigration                            | 5          | 5      | 25    |
| CR29     | Reinforced Autoclaved Aerated Concrete          | 3          | 5      | 15    |



| Risk Ref. | Risk Title               | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                          | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR1       | Financial Sustainability | 5                      | 5      | 25                | 5             | 5      | 25                | 3            | 3      | 9                 |

|                   |             |
|-------------------|-------------|
| <b>Risk Owner</b> | P. McKevitt |
|-------------------|-------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| P. McKevitt         | On target          | Static | February 2024         |

| Key Potential Impacts  | Current Controls   | Planned Actions   |
|--|--|---|
| <ul style="list-style-type: none"> <li>• Failure to eradicate deficit in Dedicated Schools Grant (DSG) or staying within High Needs Block allocation potentially resulting in Department of Education warning and intervention and budget restrictions.</li> <li>• Public sector spending cuts/ rising inflation/ recovery from the pandemic/ economic recession impacting ability to continue to deliver effective services.</li> </ul> | <ul style="list-style-type: none"> <li>• Medium Term Financial Strategy and plan being updated to be presented to November Cabinet; monthly monitoring of general fund budgets and DSG, revised DfE 'Safety Valve' deficit recovery management plan being developed; close scrutiny and escalation to Executive Team and Members.</li> <li>• Reserve Strategy and Financial Management and reporting refresh being undertaken</li> </ul> | <ul style="list-style-type: none"> <li>• Scrutiny through externally chaired Financial Improvement Panel which will monitor delivery against the financial improvement plan and increased reporting to Cabinet - work plan is multi faceted and includes increased financial rigour, rationalisation of reserves, increased training and accountability for financial management and control</li> <li>Rebaseline of capital programme for 23/4</li> </ul> |

- Winter demands increasing pressure on ASC budgets.
- Brexit related pressures such as loss of EU funding, disruption to supply chains and increased inflation.
- Failure to deliver savings results in increased pressures on budgets that are already being balanced by use of reserves
- Pressures on pay and pressures within both childrens and adults social care which may in part be due to Brexit but are all part of the wider economic pressures facing the UK at the current time.
- Financial impact of National Pay Award.
- Failure to keep spend within budget which exceeds the availability of reserves to support resulting in the need to issue a S114 notice as the Council may not be financially sustainable
- Economic recession will result in increased demand for public services.
- Rising inflation and interest rates has an impact on the affordability of the Council's capital programme and therefore the major regeneration projects which have already commenced.

as part of financial improvement plan.

- Budget Strategy Principles, complete review of all budgets as part of zero based budgeting approach and increased reporting to Departmental Management Teams.
- DfE Recovery Plan being updated; DfE engagement; Transformation plan priorities agreed with key stakeholders; review of expenditure and rebaselining being undertaken; additional capital funding secured for in-borough SEND provision.
- Rationalisation of admin buildings as part of transformation programme to reduce utilities expenditure and generate capital receipts which can be used for transformation under the flexible use of capital receipts policy.

was undertaken at Q1 but further work needed as part of MTFP for future years and closer working with directorates to identify potential pressures earlier in order to put mitigating actions into place - Work has commenced on the capital programme but increasing costs due to inflation is putting extra pressure on budgets, this is also having an impact on revenue budgets due to increased costs of borrowing.

- Early implementation of future years savings programmes where possible. As part of the monitoring and assurance process of the 2023/24 savings plan delivery and the budget challenge sessions as part of the 24/5 MTFP work a much strengthened corporate programme management approach is being implemented with reporting through the Exec Delivery Board and increased reporting through Cabinet of savings delivery.
- Monitoring of the spend moratorium which was put in place in July on all discretionary spend to bring budget over-spends back in line and bring a clearer focus on what spend can cease on an on-going basis. This has also identified areas for tightening of financial governance and training.

|  |  |  |
|--|--|--|
|  |  | <ul style="list-style-type: none"><li>• Lobbying of GMCA and Government for additional funding and support to LAs. A motion was passed at September Council on this and further discussions have been had at Treasurers</li><li>• Use of apprentices and training of existing workforce to ensure a workforce which meets both current and future needs.</li><li>• Reporting to Cabinet on revised modelling of MTFP, developed through zero based budgeting of key services with highest spend and demand</li></ul> |
|--|--|--|

| Risk Ref. | Risk Title            | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|-----------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                       | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR3       | Security & Resilience | 4                      | 5      | 20                | 4             | 5      | 20                | 2            | 5      | 10                |

|                   |              |
|-------------------|--------------|
| <b>Risk Owner</b> | K Waterhouse |
|-------------------|--------------|

| Responsible Officer              | Risk Action Status | Trend  | Next Risk Review Date |
|----------------------------------|--------------------|--------|-----------------------|
| 1) K. Waterhouse<br>2) J. Dennis | On target          | Static | February 2024         |

| Key Potential Impacts  |
|--|
| 1) • Ongoing national threat from terrorism resulting in potential resurgence of terrorist activity and radicalisation of vulnerable members of community.<br><br>• Crisis in Ukraine following the Russian invasion is also leading to increased risk of cyber attack and community tensions. |

| Current Controls   |
|--|
| 1) • Emergency response policies, Prevent initiative, GM Resilience Forum and Tension Monitoring Report.<br><br>• Training and updated Cyber Essentials Toolkit in place for NHS GM; PCN accreditation renewed annually for the Council. |

| Planned Actions   |
|---|
| 1) • Continued early intervention work and community engagement through the Community Safety Partnership.<br><br>• Further training and investment in cyber security to be progressed against IG Action Plan timeframes.<br><br>• Cyber Essentials accreditation for the Council to be achieved - Council has |

- External threat to data and systems potentially impacting system functionality/causing a data breach.

2) • General threat to safety and security of Councillors.

- Government guidance shared with parties currently exposed to such attacks. Local Government Assessment Toolkit implemented.

- Support from LGA and DLUHC now approved to develop Cyber Treatment Plan. All recommend actions have now been completed.

- Managed Security contract in place from July 2022, for 24 months.

- Security arrangements reviewed, following the recent cyber attack against St Helen's Council

2) • Newly appointed Councillors received security awareness training during induction process, following May Elections.

submitted it's PSN Certification for another year as a precursor to achieving Cyber Essentials accreditation.

2) • No further actions - situation to remain under review.

| Risk Ref. | Risk Title             | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                        | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR4       | Digital Transformation | 3                      | 4      | 12                | 2             | 4      | 8                 | 2            | 4      | 8                 |

|                   |               |
|-------------------|---------------|
| <b>Risk Owner</b> | K. Waterhouse |
|-------------------|---------------|

| Responsible Officer | Risk Action Status | Trend     | Next Risk Review Date |
|---------------------|--------------------|-----------|-----------------------|
| K. Waterhouse       | On target          | Decreased | February 2024         |

| Key Potential Impacts   | Current Controls   | Planned Actions  |
|---|--|--|
| <ul style="list-style-type: none"> <li>Inability to achieve ambition for new ways of working, improved customer and staff experience through delivery of the Digital Strategy.</li> </ul> | <ul style="list-style-type: none"> <li>Launch of staff consultation on the new Target Operating Model for a reconfigured Digital, Data &amp; technology function commenced in January. Implementation to begin from 1st April 2023.</li> </ul> | <ul style="list-style-type: none"> <li>Implementation plan for new operating model in development;</li> <li>All staff moved to new posts during September and October 2023</li> <li>Training and Development Plan to be developed to support staff moving into new roles and ensure appropriate transitions plans are in place.</li> </ul> |

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| <ul style="list-style-type: none"><li>• Transition to new operating model to be completed by the 1st April 2024, including recruitment to required vacancies within the new structure.</li></ul> |
|--|

| Risk Ref. | Risk Title                  | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|-----------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                             | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR5       | Increasing Demand Pressures | 4                      | 5      | 20                | 4             | 5      | 20                | 2            | 4      | 8                 |

|                   |              |
|-------------------|--------------|
| <b>Risk Owner</b> | W. Blandamer |
|-------------------|--------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| A. Crook            | On target          | Static | February 2024         |

| Key Potential Impacts  | Current Controls   | Planned Actions   |
|--|--|---|
| <ul style="list-style-type: none"> <li>• Failure to transform services likely result in the Council failing to meet its statutory obligations. Adults and children's care facing a significant increase in demand for services.</li> <li>• There is a risk of unsustainable demand for adult care services as a consequence of the substantial demand pressures and workforce challenges in the NHS, particularly in relation to volume and acuity of patients requiring dis-</li> </ul> | <ul style="list-style-type: none"> <li>• Regular transformation programme review meetings, scrutiny of the Executive Committee and appropriate reporting to cabinet. Also a new performance dashboard for ASC is being presented to cabinet in December 2023 and will be used to review effect.</li> <li>• Fee setting exercise and cost of care comparisons carried out annually. Close working and relationship building with all providers of care to ensure early warning are in place.</li> </ul> | Continued delivery of Adult Social Care Transformation plan, with a particular focus on transition, adults of working age, strengths based working, and market sustainability |



charge. In addition a key control is the work being undertaken on the national front runners discharge programme at FGH on discharge of those with dementia and a wider programme on strengths based working. This is having an effect on reducing ALOS, reducing the number of days patients are kept away from home, and limiting the loss of independence (and therefore complexity of care package)

- Real living wage agreed and funded through contracts for all social care packages.
- Locality Board review system wide pressures on a monthly basis, in addition to the work of the Urgent Care Board and the Integrated Delivery Collaborative

| Risk Ref. | Risk Title     | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|----------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR6       | Climate Change | 5                      | 4      | 20                | 5             | 4      | 20                | 3            | 4      | 12                |

|                   |         |
|-------------------|---------|
| <b>Risk Owner</b> | D. Ball |
|-------------------|---------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| L. Swann            | Some slippage      | Static | February 2024         |

| Key Potential Impacts  | Current Controls  | Planned Actions  |
|--|---|--|
| <ul style="list-style-type: none"> <li>Inability to meet Bury 2038 carbon neutral target due to lack of resources and engagement.</li> </ul> <p>Main detailed risks described below:</p> <ul style="list-style-type: none"> <li>Lack of funding and incentives provided by Government or private industry to secure the level of change necessary to achieve carbon neutrality.</li> <li>Lack of skills and supply chains in the business</li> </ul> | <ul style="list-style-type: none"> <li>Greenhouse Gas Emissions Report for 2021/22 produced and shows the Council has reduced greenhouse gas emissions by 63% since 2008/09.</li> <li>Climate Strategy and Action Plan approved and published in October 2021 following public consultation.</li> <li>Climate Action Board established and is part of the Team Bury Structure.</li> </ul> | <ul style="list-style-type: none"> <li>Continued partnership work across GM.</li> <li>Climate Action Board will continue to meet quarterly.</li> <li>Continued delivery of Social Housing Decarbonisation bid.</li> <li>Exploring means for securing effective local engagement on the Climate Change</li> </ul> |

sector to provide carbon neutral solutions.

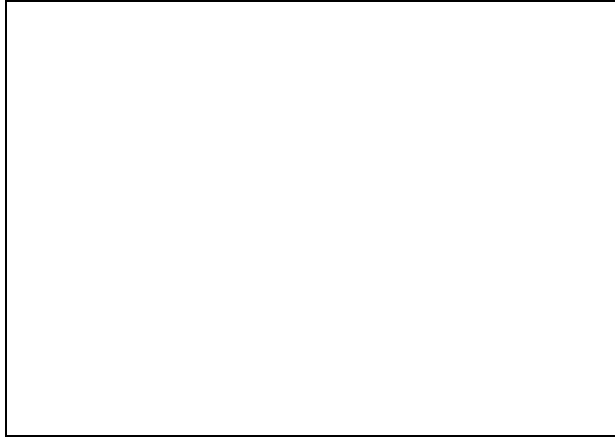
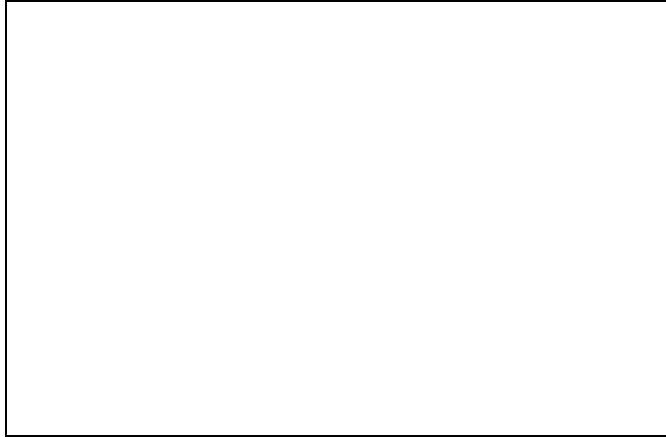
- Local communities and businesses suffer financial hardship as a result of moving to electricity-based heating systems that could include higher running costs (electricity is much more costly than gas currently).
- Those most in need are not able to decarbonise due to lack of funds and support.
- Local communities do not embrace active travel and public transport due to lack of motivation, confidence and good safe reliable systems and infrastructure.
- Failure to protect our communities from the impacts of climate change.
- Insufficient permanent council officer resource to achieve the level of action required.
- For council and other commercial buildings, the initial costs to install heat pump systems can be much higher than replacing with a gas boiler. This creates challenging business cases that can make it very difficult to justify the carbon neutral option.
- Regeneration schemes are not able to justify carbon neutral measures due to the restrictions placed on the available funding streams.

- £100k of community action funding distributed to 12 community groups, case study report published and video clips on the outcomes of our Community Climate Action Fund.
- Successful project from Six Town Housing (STH) and the Council to decarbonise 131 properties on the Chesham Estate in Bury.
- Successful bid from STH to the Social Housing Decarbonisation Fund (SHDF) Wave 2 funding for energy efficiency measures on a further 200 properties on the Chesham Estate.
- 70% of Council vehicles now replaced with lower emissions vehicles with the remaining 30% on order including, 19 small tippers, 5 small Luton vans, 2 RCV's, 1 Ranger pick up, HGV tipper and 11 electric vans (there will be 15 in total).
- Public sector Decarbonisation Funding awarded to Bury and used to decarbonise a number of council buildings - completed June 2022.
- E Car Club Pilot operating from Prestwich and Bury.
- 22 Council assets are being reviewed for

agenda using existing neighbourhood networks.

- Intention to expand the current car club offer to up to 20 locations through a procurement exercise.
- Intention to appoint an Electric Vehicle Charging Infrastructure (EVCI) supplier to install charging points for residents who do not have access to off-street parking using a potential £2m of combined CRSTS and Local Electric Vehicle Infrastructure (LEVI) funding.
- Street lighting column replacement and LED replacement programme to reduce the electricity use and carbon footprint of our streetlighting.
- Produce annual Greenhouse Gas Reports for the Council's emissions so that we can monitor our progress towards decarbonisation and highlight areas where more focussed action is required.
- Deliver energy efficiency measures to 80 low-income households using ECO4 grants to reduce the carbon footprint of these houses and to help protect low-income occupants from rising energy prices.
- Integration of 15 Electric Vehicles into

|   |  |  |
|---|--|--|
| <ul style="list-style-type: none"> <li>• Lack of carbon neutral solutions for larger vehicles.</li> </ul> | <p>feasibility of installing Solar PV by consultants appointed by GMCA with the view of taking some/all of these through the Go Neutral Framework to appoint a supplier to install the infrastructure.</p> <ul style="list-style-type: none"> <li>• Working with colleagues from BGI to ensure that regeneration projects take sustainability/decarbonisation in to consideration.</li> <li>• Procured an Electric Vehicle Charging Infrastructure provider to deliver charge points in a large number of our council car parks free of charge.</li> <li>• Carbon literacy course made mandatory for council employees and 52.4% staff have completed.</li> <li>• 68% of streetlights are now LED lanterns.</li> <li>• Working Group established for Climate Change Adaptation &amp; Resilience.</li> <li>• Application for funding for a heat network feasibility study submitted to HNDU.</li> </ul> | <p>the Council fleet to move towards the decarbonisation of council operations.</p> <ul style="list-style-type: none"> <li>• Incorporate single use plastic into the procurement policy to reduce both the amount of waste produced by the council and the carbon cost of dealing with this waste.</li> <li>• Produce an annual update of the Climate Action Plan to maintain a relevant document, monitor progress and highlight areas for more focussed action.</li> <li>• Continue to look for opportunities to use Government PSDS (Public Sector Decarbonisation Scheme) funding to further progress the decarbonisation of council assets.</li> <li>• Secure permanent employment contracts for the existing officer resource delivering Climate Action and Active Travel functions to demonstrate the Council's commitment to this agenda and to help with officer retention. AD - leaving end of Jan 24 - replacement Chair required for Climate Action Board and to drive Climate Agenda.</li> <li>• Secure in-house Mechanical and Electrical Engineer resource to help generate and deliver decarbonisation projects for our assets.</li> </ul> |
|---|--|--|



- Expand the existing number of Schools Streets to encourage walking and cycling to school and to reduce the number of car miles covered by the “school run”. This will improve air quality and reduce carbon emissions.
- Exploring the feasibility of a heat network in Bury Town Centre.

| Risk Ref. | Risk Title                         | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|------------------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                                    | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR7       | ICS Implementation & Establishment | 3                      | 4      | 12                | 3             | 4      | 12                | 2            | 4      | 8                 |

|                   |              |
|-------------------|--------------|
| <b>Risk Owner</b> | W. Blandamer |
|-------------------|--------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| W. Blandamer        | On target          | Static | February 2024         |

| Key Potential Impacts  |
|--|
| <ul style="list-style-type: none"> <li>Disruption to the health and care system caused by establishment of the Integrated Care System (ICS) and winter pressures leading to increasing demands on Adult Social Care services.</li> </ul> |

| Current Controls  |
|---|
| <ul style="list-style-type: none"> <li>Working closely as a locality as part of our winter plan - both command structure and proactive planning.</li> <li>Collaborative working within the GM Urgent Care System response meeting, operating as Gold, across the whole GM health and care system</li> </ul> |

| Planned Actions  |
|--|
| <ul style="list-style-type: none"> <li>Continue to work with GM partners as GM operating model develops. Review of operating model to assure delivery of NHS GM obligations locally commenced November 2023</li> <li>Transformation plans continue to be monitored monthly through IDC Board.</li> </ul> |

- Implementation - functional alignment review process of establishing GM ICS has the potential to reduce locality focus and capacity of previous CCG staff.

- Working with colleagues across the GM system to ensure the GM ICS operating model creates the conditions for our continued placed based transformation, and NCA footprint partners to continue to advocate for the place based approach; building and starting to operate the new Bury Health and Care System Partnership arrangements (including the Locality Board) to provide confidence and assurance of our arrangements.
- Issues and risks escalated to Integration Delivery Collaborative Board and to Locality Board.
- Conclusion of NHS GM staff transitional process in October 2023

- Transformation Board and Adult Social Care Savings and Transformation Programme also reported to Cabinet.
- Bespoke communication approach to address this agenda.
- Locality formalisation agreed at Cabinet and Council and Locality Board and submitted to NHS GM Board for final approval.
- Receipt of locality budget allocation and reconciliation with largely 'as is' structure on NHS GM – intended to retain resilience to secure on going transformation delivery in Bury ICP programmes.

| Risk Ref. | Risk Title                    | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|-------------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                               | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR9       | Workforce Skills & Capability | 4                      | 5      | 20                | 4             | 5      | 20                | 3            | 5      | 15                |

|                   |            |
|-------------------|------------|
| <b>Risk Owner</b> | S. McVaigh |
|-------------------|------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| S. McVaigh          | On target          | Static | February 2024         |

| Key Potential Impacts  | Current Controls   | Planned Actions   |
|--|--|---|
| <ul style="list-style-type: none"> <li>Adverse impact on delivery of Council priorities should the workforce capability and capacity prove insufficient, as the result of a lack of investment in employee development and / or an inability to fill key roles. Likelihood increased given current regional and national recruitment challenges across a range of roles.</li> <li>Increased costs through requirement to utilise more expensive agency or consultancy resources</li> </ul> | <ul style="list-style-type: none"> <li>Prioritisation through the Corporate Plan and strengthened approach to Departmental Planning &amp; Employee Reviews, including analysis of areas of cross-over and total capacity requirements</li> <li>Agreed recruitment and retention strategies for both Childrens and Adults Social Care.</li> <li>International recruitment programme for Children's Social Workers.</li> </ul> | <ul style="list-style-type: none"> <li>Continued focus on prioritisation; training and development to be considered in new People Strategy; development of a Talent Strategy.</li> <li>Resource planning for key new priorities e.g. LUF and Children's Improvement.</li> <li>Refresh and update core policies and procedures.</li> </ul> |



- National shortage of Social Workers, recent Children's department restructure sees the creation of a number of posts, however services continue to run with a high level of agency staff.

- Strengthened external recruitment processes, social media presence and advertising, improved processes and new policy.
- Management development programme.
- Clear two-way staff engagement approach, including regular Pulse Surveys
- Skills and capacity development opportunities, including through Apprenticeship Strategy
- New OD in place following HR restructure
- Focus on values and behaviours through the LET'S Challenge

- Values and behaviours work and wider focus on engagement linked to Pulse Survey.
- Development of the 'Greater Manchester Pledge' to support Children's Social Worker workforce stability.
- Engagement in LGA work on local government recruitment

| Risk Ref. | Risk Title   | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |  | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR11      | <b>Building Management (Operational Health &amp; Safety)</b> | 4                      | 5      | 20                | 4             | 5      | 20                | 3            | 5      | 15                |

|                   |         |
|-------------------|---------|
| <b>Risk Owner</b> | D. Ball |
|-------------------|---------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| D. Ball             | Some slippage      | Static | February 2024         |

| Key Potential Impacts   | Current Controls   | Planned Actions  |
|---|--|--|
| <ul style="list-style-type: none"> <li>• Breach of Health and Safety legislation leading to prosecution under the Corporate Manslaughter Act and other Health and Safety Regulations.</li> <li>• Council buildings, facilities and premises must provide safe and effective environments for all building occupants that use them.</li> </ul> | <ul style="list-style-type: none"> <li>• Corporate Health and Safety independent audit undertaken with formal report, findings and recommendations.</li> <li>• Establishment of Estates Transformation Board (BGI) to manage and oversee the disposal of selected buildings.</li> <li>• Decant Manager in place to support the decanting of services from buildings (temporary post).</li> </ul> | <ul style="list-style-type: none"> <li>• Develop the use of Concerto to improve information and processes in relation to the management of facilities across the Council's estate.</li> <li>• Produce an Asset Rationalisation Plan (Led by BGI).</li> <li>• Develop a proposal for a Facilities Management Service to act as a central point of expertise to provide support to services</li> </ul> |

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|--|--|--|
|  | <ul style="list-style-type: none"> <li>• Work underway to look at the future needs of education and Six Town Housing.</li> <li>• Current working practices (Managers responsible for own buildings) remain in place</li> <li>• Whittaker Street decanted and being prepared for sale.</li> <li>• Facilities Management Board established to have oversight of the individual departments responses of asset management, including compliance monitoring. Whilst not responsible for the actual assets, the board will work alongside service building managers to ensure they have the information required in order to operate safely or report issues.</li> <li>• Head of FM recruited.</li> </ul> | <p>under a Business Partner arrangement.</p> <ul style="list-style-type: none"> <li>• Work to ensure prompt action to address any known compliance issues ('big 6') across the 26 council buildings.</li> <li>• Carry out a building condition survey on the Town Hall.</li> <li>• Approval received to recruit the following posts ahead of the FM restructure: Fire Safety Officer, Procurement &amp; Contracts Officer, Project Officer (6-month internal secondment).</li> <li>• Following recruitment gather compliance information for the remaining Council estate.</li> <li>• Procurement &amp; Contracts post to centralise contracts for building related compliance/maintenance.</li> </ul> |
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| Risk Ref. | Risk Title                      | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|---------------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                                 | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR12      | Children's Social Care Services | 2                      | 5      | 10                | 2             | 5      | 10                | 2            | 5      | 10                |

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|-------------------|-------------|
| <b>Risk Owner</b> | J. Richards |
|-------------------|-------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| J. Richards         | On target          | Static | February 2024         |

| Key Potential Impacts   | Current Controls   | Planned Actions   |
|---|--|---|
| <ul style="list-style-type: none"> <li>Children left in harmful situations and risk.</li> <li>Following the inadequate ILACs judgement in October 2021 the improvement plan fails to deliver the pace of change needed which is reflected in poor monitoring visits from Ofsted and leaves the service and Council at risk to a greater level of intervention from the DFE.</li> <li>High caseloads continue to lead to social</li> </ul> | <ul style="list-style-type: none"> <li>Post Ofsted Improvement Plan which has been accepted by Ofsted and the DFE; reviewed with partners individually and via Children's Improvement Board May 2023.</li> <li>Independently Chaired Improvement Board with key partners to monitor impact of the improvement Plan.</li> <li>Regular DFE reviews.</li> </ul> | <ul style="list-style-type: none"> <li>International recruitment was successful with 23 offers made in January 2023. First cohort (4 social workers) started on 12th June and an additional 3 have joined since. Delays in Social Work England (SWE) registration - highlighted as a national issue - is the main cause of delay for the remainder.</li> <li>Develop a whole system approach to QA - building on the QA Framework already in</li> </ul> |

worker high turnover which then impacts on children, families and partners.

- Following the inadequate judgement recruitment has become more challenging leading to high staff turnover from senior leaders through to frontline staff, making it difficult to do what is most important - turning around services for children, young people and families in need.

- Budget pressures associated with the escalating cost of commissioned placements, planned actions - meets fortnightly.

- Regular Ofsted Monitoring visits
- Recruitment and Retention plan following full review aimed at attracting committed professionals to Bury.

- Permanent senior team in place

- Revised QA and audit processes in place.

- Managed team in place pending recruitment to vacancies to ensure reducing social worker caseloads across the service (reduced from 3 teams to 1)

- Placement Panel established is to gatekeep requests for high cost placements and review those in high cost provision - meets fortnightly.

- Restructure agreed bringing enhanced capacity and management oversight.

- Worked with Communications Team to develop online presence to support ongoing recruitment and retention.

place and taking learning on board from recent monitoring visits, while ensuring a whole system approach that will lead to improved practice and outcomes for our children and families.

- Implement Learning & Development plan which has been produced by the Principal Social Worker to ensure improvement in the quality of practice

- Strengthened system and architecture around the review and update of improvement plan internally and with partners, agreed with Improvement Board

| Risk Ref. | Risk Title            | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|-----------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                       | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR13      | Regulatory Compliance | 3                      | 4      | 12                | 3             | 4      | 12                | 3            | 4      | 12                |

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|-------------------|-----------|
| <b>Risk Owner</b> | J. Dennis |
|-------------------|-----------|

| Responsible Officer       | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------------|--------------------|--------|-----------------------|
| J. Dennis<br>J. Gallagher | On target          | Static | February 2024         |

| Key Potential Impacts   |
|---|
| <ul style="list-style-type: none"> <li>• Failure to meet the requirements of data protection legislation and good information governance practice / serious data breach.</li> <li>• Lack of compliance with statutory response times for Subject Access Requests may lead to legal challenge or intervention from the ICO or local government ombudsman.</li> </ul> |

| Current Controls  |
|---|
| <ul style="list-style-type: none"> <li>• Significant progress to completion of actions on ICO Workplan.</li> <li>• Comprehensive IG/Cyber Security training programme implemented.</li> <li>• Data Breach monitoring and processes significantly enhanced.</li> <li>• IG risk management strategy implemented,</li> </ul> |

| Planned Actions   |
|---|
| <ul style="list-style-type: none"> <li>• Ongoing development of an annual review/refresh process for the Record of Processing Activity.</li> <li>• Escalate weekly reporting to the Director of People and Inclusion (responsible for Business Support Team).</li> <li>• Review capacity to support the Data Protection Officer.</li> </ul> |

|  |  |  |
|--|--|--|
| <ul style="list-style-type: none"> <li>• Increased number of Childrens SEN complaints escalated to the Local Government Ombudsman</li> </ul> | <p>including required completion of Data Protection Impact Assessments for any project involving the processing of personal data.</p> <ul style="list-style-type: none"> <li>• Staff induction process and system access implemented.</li> <li>• IG KPIs reviewed.</li> <li>• 2022/23 DSPT submitted and Standards Met maintained.</li> <li>• Six monthly reporting to Audit committee to ensure that the work is embedded across the Council.</li> <li>• Information Security Policy updated</li> <li>• Weekly performance reporting to Head of Service for Business Support and Data Protection Officer.</li> <li>• Additional capacity in Business Support identified to manage throughout.</li> <li>• Establishment of new Corporate Governance Board to cover all IG matters</li> <li>• Report to Executive on a weekly basis on FOI progress</li> <li>• Restructure of delivery of IG support</li> </ul> | <ul style="list-style-type: none"> <li>• Review communications and engagement with requesters whose claim is outstanding.</li> <li>• Convene working group to strengthen process, roles and responsibilities.</li> <li>• Network of IG Champions refreshed and re-established.</li> <li>• Escalate monthly reporting of LGO complaints to the CE and MO.</li> <li>• Regularly meetings held with the Department and Complaints lead and additional staffing support to department</li> <li>• Restructure of complaints team to report to the Monitoring Officer</li> </ul> |
|--|--|--|

| Risk Ref. | Risk Title               | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                          | Likelihood             | Impact | Total Score (LxI) | Likelihood    | Impact | Total Score (LxI) | Likelihood   | Impact | Total Score (LxI) |
| CR14      | Staff Safety & Wellbeing | 4                      | 4      | 16                | 4             | 4      | 16                | 2            | 4      | 8                 |

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|-------------------|------------|
| <b>Risk Owner</b> | S. McVaigh |
|-------------------|------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| S. McVaigh          | On target          | Static | February 2024         |

| Key Potential Impacts   |
|---|
| <ul style="list-style-type: none"> <li>• Staff wellbeing, welfare and morale may potentially result in increased cases of stress, depression and general absence, thereby impacting service delivery.</li> <li>• Harm to staff and potential legal and financial implications for the authority of failure to comply with health and safety legislation.</li> </ul> |

| Current Controls   |
|--|
| <ul style="list-style-type: none"> <li>• Corporate Health &amp; Safety Team moved under the leadership of the Director of People and additional operational management capacity in place</li> <li>• Health &amp; Safety Policy reviewed and new incident reporting process live.</li> <li>• Health and Safety staff drop-in sessions and inclusion in mandatory management training programme</li> </ul> |

| Planned Actions   |
|---|
| <ul style="list-style-type: none"> <li>• Delivery of annual Health and Safety plan including service level risk assessment needs checkers and targeted deep dive audits</li> <li>• Targeted additional work within the Operations Department in response to external review</li> <li>• Delivery of targeted action plan related to staff sickness absence.</li> </ul> |



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|--|---|--|
|  | <ul style="list-style-type: none"><li>• Robust governance arrangements, action planning and partnership working with the TUs now in place.</li><li>• New improved Occupational Health provider in place</li><li>• Employee assistance programme and comprehensive health and wellbeing offer in place which incorporates mental wellbeing support.</li><li>• Targeted improvement plan for sickness absence levels, including focus on hotspot services.</li><li>• External review of Health and Safety in Operations Department completed.</li></ul> | <ul style="list-style-type: none"><li>• Review of health and safety related training. Including new mandatory eLearning and strengthened training assurance</li><li>• Development of 3 year Health and Safety Improvement Strategy</li><li>• Review of sickness absence policy</li><li>• Review of Risk Assessment Process</li></ul> |
|--|---|--|

| Risk Ref. | Risk Title                 | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|----------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                            | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR15      | Regeneration & Development | 4                      | 5      | 20                | 4             | 5      | 20                | 3            | 5      | 15                |

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|-------------------|----------|
| <b>Risk Owner</b> | P. Lakin |
|-------------------|----------|

| Responsible Officer        | Risk Action Status | Trend  | Next Risk Review Date |
|----------------------------|--------------------|--------|-----------------------|
| R. Summerfield<br>C. Logue | Some slippage      | Static | February 2024         |

| Key Potential Impacts   |
|---|
| <ul style="list-style-type: none"> <li>Northern Gateway - failure to grasp opportunity presented by the largest regeneration project to impact this part of the country.</li> <li>Challenges faced in driving inclusive growth within the region, impacted by a slow housing market and accessing up to date planning policies.</li> <li>Rising construction inflation and interest rate</li> </ul> |

| Current Controls  | Planned Actions   |
|---|---|
| <ul style="list-style-type: none"> <li>Detailed working with the JV and Rochdale Council around Northern Gateway has allowed parties to work collectively on a major inward investment project, which has brought national attention to the potential of the site. There are a number of subgroups that have been established to drive forward the project, including Transport, Planning, Skills and Marketing &amp; Promotion.</li> </ul> | <ul style="list-style-type: none"> <li>Continue to explore funding opportunities - linked to various regeneration schemes: BGI will keep abreast of up-and-coming funding sources through regular contact with GMCA and other public bodies and will work with colleagues to ensure that opportunities are explored, and subsequent applications made for regeneration/development projects. Joint Bid being prepared to GM Growth Fund to</li> </ul> |

shifts increasing cost of delivering town centre regeneration and housing programmes.

- Challenges in leveraging council assets due to macro economic environment.
- Availability of Council / External funding.
- Skills/resource availability for regeneration delivery
- Removal of revenue funding for regeneration delivery (puts at risk resource/capacity for implementation).

- Progression of Development Plan through to adoption
- Hire staff and experts in the field.
- Establishment of Projects Board and give delegated powers.
- Cost plans for the 'Levelling Up' bids show increased construction inflation, options being worked through for value-engineering and review of overall specification.

further support project delivery and promotion. Bury have appointed an externally funded, dedicated PM to ensure internal capacity and skills in place.

- The Examination process ended and the Panel has indicated that it can be found sound subject to modifications. These are to be consulted on later in the year before the Plan can be taken forward to adoption.
- Value engineering activity / scope reduction in design development for major regeneration projects.
- Establish JV structures to leverage private sector capacity.

| Risk Ref. | Risk Title                               | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |  | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR16      | Special Educational Needs & Disabilities | 5                      | 5      | 25                | 5             | 5      | 25                | 2            | 5      | 10                |

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|-------------------|-------------|
| <b>Risk Owner</b> | J. Richards |
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| Responsible Officer  | Risk Action Status | Trend  | Next Risk Review Date |
|----------------------|--------------------|--------|-----------------------|
| M. Kemp<br>I. Booler | Some slippage      | Static | February 2024         |

| Key Potential Impacts   |
|---|
| <ul style="list-style-type: none"> <li>• Further increase in LGO ombudsman complaints and general complaints.</li> <li>• Further loss of parental trust and further increase in parental complaints (400% increase of complaints since March 2023)</li> <li>• Current reduction in SEND tribunals is reversed.</li> </ul> |

| Current Controls   | Planned Actions   |
|--|---|
| <ul style="list-style-type: none"> <li>• SEND Strategic Board and plan, with clear governance and Independent Chair appointed.</li> <li>• Focused SEND inspection preparation activity - plan in place and fortnightly meetings with Local Area SEND SLT to review progress.</li> <li>• Strategic lead for SEND and EHCP team</li> </ul> | <p>Continue to develop training offer for Statutory assessment team to focus on case resolution. Case surgeries and inclusion service surgeries to continue.</p> <ul style="list-style-type: none"> <li>• Implement strengthened architecture re. SEND Development Plan clearer ownership of plans and clarity around highlight reports and reporting frequency.</li> </ul> |

- Reduction in compliance in regard to 20 week timescales (which has improved).
- Ofsted/CQC inspection finds the local area to have systemic weaknesses in a local area SEND inspection, impacting further on reputation.
- Increase in EHCP assessments which is disproportionate to population increases sufficiency issues.
- 63 % increase in EHCP referrals putting increased pressure on system and Council has difficulties meeting provision within EHCPs and increased pressure on SEND special school place sufficiency.

- manager now in post.
- Co-production with strategic partner Bury2Gether.
  - Following education restructure increased capacity in EHCP team - increased investment in data case surgeries and inclusion surgeries now in place.
  - Graduated response co-produced and implemented
  - Local Offer Newsletter continues to be well received.
  - Regular operational meetings with Health partners and Education and SC.
  - Redesigned EHCP processes bringing parents earlier in the process including the advice with EP service advising.
  - Second a social worker to the EHCP team to ensure social care advice is statutory.
  - Revised Senco networks
  - School Roof:
    - Fortnightly steering group meeting within Bury Council with legal, education and operations
    - Weekly meetings within school holding builders in account for progress plan

- Continue working with managers to ensure Annex A in place, to ensure we can respond promptly when we are notified of inspection.
- Develop and launch a communication and engagement strategy.
- Specific review around phone calls to SEN EHCP team and revise phone set up.
- School roof:
  - Independent assurance to continue to check all plans and building as the programme of work progresses.
  - To continue steering group meetings, independent engagement of assurance of works and to continue engaging with regional director and school.
- \* Develop engagement strategy to include the CEO and DCS in meetings with the parents who attend scrutiny in protest.
- \* Revise SEN support strategy and to ensure EHCP data is known across the Local area - reports have been shared with SEND Partnership and also Locality Board.
- \* Implement QA framework and to continue multi agency audits - multi-agency



- Engaged independent company to assure all plans and structural solutions  
- Monthly roof checks.

audit completed Nov 2023

| Risk Ref. | Risk Title         | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                    | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR19      | Financial Capacity | 4                      | 5      | 20                | 4             | 5      | 20                | 2            | 4      | 8                 |

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|-------------------|--------------|
| <b>Risk Owner</b> | P. McKeveitt |
|-------------------|--------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| P. McKeveitt        | On target          | Static | February 2024         |

| Key Potential Impacts   | Current Controls   | Planned Actions  |
|---|--|--|
| <ul style="list-style-type: none"> <li>Lack of finance capacity leads to budget holders not receiving a quality service that supports them across a range of functions such as :- <ul style="list-style-type: none"> <li>to control costs,</li> <li>manage their budgets,</li> <li>identify and deliver savings,</li> <li>identify and maximise opportunities to generate additional income or external funding for projects,</li> <li>to submit government and funding returns,</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>Close monitoring and prioritising of all asks for support including reassigning staff to meet high profile/risk pieces of work.</li> <li>The main post still to be filled is the Deputy Director of Finance, there is an interim in place and whilst the advert for the permanent recruitment closed on the 26th June the process was paused as there were not enough candidates of sufficient calibre to progress to member shortlisting. Due to the needs of the</li> </ul> | <ul style="list-style-type: none"> <li>Continued use of interims, and also double running through the use of the transformation budget and new burdens monies where necessary to support services where items of organisational strategic risk exist i.e. childrens. Additional capacity has also been retained through CIPFA</li> </ul> |

- be supported in financial business case development for project work.
- Senior members of the finance department undertaking pieces of work that should be completed by capable qualified staff - resulting in additional pressure on a few key individuals. Capacity is also being stretched due to the significant work that is required as part of the finance improvement plan, as a consequence of business partnering being a new concept for Bury, the financial position of Bury and the work needed to address the budget and demand pressures
- The interim market is becoming increasingly fierce with interims demanding inflated costs to do roles that require permanent placement. There is also a shortage of some specialist skills such as DSG and commercial investment which is making it extremely difficult to recruit permanent staff with these skills and harder to find interims and when they are available they are at premium costs.

CYP service as a consequence of Project Safety Valve and the pressures on the budget as part of the improvement journey within social care additional support in the form of a childrens transformation consultant has been commissioned and an additional interim finance BP for childrens services has been retained.



| Risk Ref. | Risk Title               | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                          | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR20      | Increasing Energy Prices | 5                      | 5      | 25                | 5             | 5      | 25                | 5            | 4      | 20                |

|                   |         |
|-------------------|---------|
| <b>Risk Owner</b> | D. Ball |
|-------------------|---------|

| Responsible Officer  | Risk Action Status | Trend  | Next Risk Review Date |
|----------------------|--------------------|--------|-----------------------|
| L. Swann<br>J. Kelly | On target          | Static | February 2024         |

| Key Potential Impacts  | Current Controls  | Planned Actions  |
|--|---|--|
| <ul style="list-style-type: none"> <li>As a result of global increases in energy prices Bury Council saw significant increases in energy cost in 2022/23 compared to 2021/22 (approximately £3.5 million)</li> <li>A further increase of approximately £889k is expected from 2022/23 to 2023/34.</li> <li>Projected energy prices in 24/25 currently</li> </ul> | <ul style="list-style-type: none"> <li>Delivery of the following building decarbonisation measures using funding from the Public Sector Decarbonisation Scheme (PSDS): <ul style="list-style-type: none"> <li>6 x solar PV</li> <li>2 x double glazing</li> <li>1 x new variable refrigerant flow (VRF) heating system.</li> </ul> </li> <li>Report agreed by Cabinet in September 2022 to utilise the YPO Framework for the</li> </ul> | <ul style="list-style-type: none"> <li>Street lighting LED replacement programme approved as a further savings option for delivery during 2023/24 and 2024/25.</li> <li>Building/Estate Rationalisation Programme - reviews currently taking place.</li> <li>Centralising energy budgets across the Council to be managed by the Energy</li> </ul> |

showing reduced costs - impact on budgets currently being assessed.

purchase of electricity for the next 4 years starting in April 2023.

Team going forward.

- Regular updates provided to Exec Team and to Schools in relation to costs.
- Newly developed mandatory Carbon Literacy Training module available for staff and now mandatory.
- Team Bury away day on Climate Change and impact of rising energy costs.
- Internal communications campaign to highlight energy saving opportunities within corporate buildings.
- 68.72% streetlights converted to LED lanterns.
- £500K bid submitted to Swimming Pool Grant Fund, however, unfortunately this bid was unsuccessful.
- New water supply contract procured and commenced on 01/11/23. This includes schools, all corporate buildings and selected 3rd party organisations.

- Further energy saving opportunities being investigated.
- A deep dive report will be submitted for the Audit committee in December 23.
- Feasibility studies being carried out on 23 corporate buildings for potential solar PV opportunities.
- Exploring the feasibility of a heat network in Bury Town Centre to secure stable energy costs in the future.
- Explore impact of projected gas and electricity charges on 24/25 budget.

| Risk Ref. | Risk Title           | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|----------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                      | Likelihood             | Impact | Total Score (LxI) | Likelihood    | Impact | Total Score (LxI) | Likelihood   | Impact | Total Score (LxI) |
| CR21      | Project Safety Valve | 5                      | 5      | 25                | 5             | 5      | 25                | 2            | 5      | 10                |

|                   |             |
|-------------------|-------------|
| <b>Risk Owner</b> | J. Richards |
|-------------------|-------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| I.Booler            | Some slippage      | Static | February 2024         |

| Key Potential Impacts   | Current Controls  | Planned Actions  |
|---|---|--|
| <ul style="list-style-type: none"> <li>Risk of Bury Council being withdrawn from Project Safety Valve (PSV) due to increased activity and not being able to eradicate the deficit on the DSG (Dedicated Schools Grant) resulting in a loss of £6m of additional funding the need to use reserves to pay the remaining of the DSG deficit, when the national dispensation ends.</li> <li>Increase in levels of need post Covid and 63% increase in new EHCP assessments mean that the eradication of the deficit will not be achieved</li> </ul> | <ul style="list-style-type: none"> <li>Since February 2023 there has been enhanced internal project management capacity and close working between finance and the service.</li> <li>The Governance structure has been revised; terms of reference of the Project safety Valve Board have been strengthened and there have been three multi agency workshops.</li> </ul> | <ul style="list-style-type: none"> <li>Internet launch of Graduated Approach toolkit - this is underway using the GAT on the existing Bury Directory. Working with IT to move this to a Council micro-site, pending resource availability from IT.</li> <li>Recruit a schools capital programme manager.</li> <li>Review internal capacity around the PSV</li> </ul> |

within the agreed timescale due to the demand compounded by the continued lack of SEND sufficiency in Borough and the continued need for out of borough places.

- The latest PSV modelling is that despite £6.3m savings achieved in 2022/23, the closing deficit balance was £18.601m and currently the High Needs Block is projecting an in year overspend.
- There has been joint working across the Council, however modelling including reduced demand through the implementation of a number of strategies including the graduated approach still leaves a deficit on the DSG beyond the original timeframe of the end of 2024/25. Current modelling identifies that the historic deficit will be clear by 2028/29.
- Special educational needs and disabilities improvement adversely impacted by the challenges in regard to the safety valve agreement leading to escalation of complaints.

- There have been weekly joint service meetings to ensure alignment between service activity and spend.
- Since March 2023 the existing finance panel and EHCP panel has been strengthened with increased multi-agency membership including commissioning and finance.
- An additional jointly commissioned fixed term senior post within children's commissioning has been created to enable a review of our commissioning approach to ensure joint partnership working and best value.
- Education restructure has strengthened the SEN EHCP team and has also created a SEN support enhanced offer.
- The Graduated Approach has been launched with a toolkit and the Senco networks have been revised.
- Finance developed tracking and reporting mechanisms to report on progress against PSV.
- Plan in place to create Resource Provision within primary and secondary mainstream schools, the first of has gone live in September 2023.
- Completing DSG Management Plan for DfE

programme and begin the recruitment process.

|  |  |  |
|--|--|--|
|  | <p>Advisers and regular meetings with DfE Advisers. External consultant brought in to provide additional expertise and support.</p> <ul style="list-style-type: none"><li>• Revised plans on the page to capture all the activity including the enabling workstreams</li><li>• Revised the management plan and the plans to eradicate the deficit and submitted to the DfE at the end of September.</li><li>• Autumn Term launch of Matching Provision to Need tool.</li></ul> |  |
|--|--|--|

| Risk Ref. | Risk Title                | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|---------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                           | Likelihood             | Impact | Total Score (LxI) | Likelihood    | Impact | Total Score (LxI) | Likelihood   | Impact | Total Score (LxI) |
| CR23      | Adult Social Care Reforms | 3                      | 5      | 15                | 3             | 5      | 15                | 3            | 4      | 12                |

|                   |              |
|-------------------|--------------|
| <b>Risk Owner</b> | W. Blandamer |
|-------------------|--------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| A.Crook             | On target          | Static | February 2024         |

| Key Potential Impacts   | Current Controls  | Planned Actions  |
|---|---|--|
| <p>Preparation for the CQC inspection</p> <ul style="list-style-type: none"> <li>• There is insufficient workforce or Government funding for additional workforce to carry out the assessments required to enable customers to access their care accounts,</li> <li>• Further contribution to the Council's financial pressures.</li> </ul> | <ul style="list-style-type: none"> <li>• Briefing paper on Adult Social Care reforms submitted to Cabinet, Scrutiny and Locality Board.</li> <li>• Project Manager appointed to oversee implementation of reforms.</li> </ul> | <ul style="list-style-type: none"> <li>• Review of IMC capacity to ensure right capacity and balanced portfolio</li> </ul> |

| Risk Ref. | Risk Title   | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|--|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |  | Likelihood             | Impact | Total Score (LxI) | Likelihood    | Impact | Total Score (LxI) | Likelihood   | Impact | Total Score (LxI) |
| CR25      | <b>Housing Conditions (Damp, Mould &amp; Condensation)</b> | 3                      | 3      | 9                 | 3             | 3      | 9                 | 2            | 3      | 6                 |

|                   |         |
|-------------------|---------|
| <b>Risk Owner</b> | D. Ball |
|-------------------|---------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| D. Ball             | On target          | Static | February 2024         |

| Key Potential Impacts  |
|--|
| <ul style="list-style-type: none"> <li>• Negative impact on resident health and wellbeing resulting from unsatisfactory housing conditions.</li> <li>• Poor management of disrepair claims in public and private sector housing and insufficiently robust processes during litigation.</li> <li>• Inability to deliver proactive support to landlords and tenants to address existing housing</li> </ul> |

| Current Controls   | Planned Actions   |
|--|---|
| <ul style="list-style-type: none"> <li>• Monthly performance reports from Six Town Housing on compliance on damp and mould 1 00% stock condition survey in progress, 68% stock assessed 100% by April 2024</li> <li>• Introduction of Tenant Satisfaction Measures April assessed monthly</li> <li>• Regular communication with tenants to encourage reporting.</li> </ul> | <ul style="list-style-type: none"> <li>• Additional resources achieved – GMCA Pathfinder funding to increase resources in PRS Enforcement Team and introduce civil penalties</li> <li>• Develop a winter communication plan to tenants and residents</li> </ul> |

concerns as a result of limitations on current capacity.

- Risk of adverse publicity and reputational damage.

- Service standards in place to address tenant reports & remedial works

- Staff awareness "Eyes wide open" process reviewed to ensure all staff are reporting issues and concerns & communication and customer pathways for complaints and being heard.

- Safeguarding referrals where property condition is a factor, integrated into operating model

- PSR enforcement team triage system in place.

- Participation in Good Landlord scheme approved & staff appointed.
- Recruitment of PRS Unit Manager complete.



| Risk Ref. | Risk Title  | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|---|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |   | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR26      | Increasing Fuel Costs & New Red Diesel Restrictions | 3                      | 4      | 12                | 3             | 3      | 9                 | 3            | 4      | 12                |

|                   |         |
|-------------------|---------|
| <b>Risk Owner</b> | D. Ball |
|-------------------|---------|

| Responsible Officer | Risk Action Status | Trend     | Next Risk Review Date |
|---------------------|--------------------|-----------|-----------------------|
| D. Dixon            | On target          | Decreased | N/a                   |

| Key Potential Impacts   | Current Controls   | Planned Actions  |
|---|--|--|
| <ul style="list-style-type: none"> <li>As a result of government changes resulting in the removal of tax relief for red diesel, ground maintenance and street scene have seen a large increase in the cost of diesel.</li> <li>Combined with the highest fuel prices seen in decades, unprecedented financial pressures is being levied.</li> </ul> | <ul style="list-style-type: none"> <li>Member of AGMA Framework to help keep fuel costs to a minimum.</li> <li>Meeting undertaken to look at the financial implications.</li> <li>Fuel prices have stabilised but will continue to monitor the situation.</li> </ul> | <ul style="list-style-type: none"> <li>Look at cost of providing all Council drivers to attend a fuel efficient driving course - part of CPC training.</li> <li>Roll out new electric vehicles.</li> </ul> |

| Risk Ref. | Risk Title                         | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|------------------------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                                    | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR27      | General Contract/Tenders Inflation | 4                      | 5      | 20                | 1             | 2      | 2                 | 1            | 2      | 2                 |

|                   |         |
|-------------------|---------|
| <b>Risk Owner</b> | D. Ball |
|-------------------|---------|

| Responsible Officer | Risk Action Status | Trend     | Next Risk Review Date |
|---------------------|--------------------|-----------|-----------------------|
| P. Stokes           | On target          | Decreased | N/a                   |

| Key Potential Impacts  |
|--|
| <ul style="list-style-type: none"> <li>• The construction industry has been hit hard by the current inflationary environment from the skyrocketing price of steel, lumber and fuel to the significantly increased cost of skilled labour.</li> <li>• Increased demand and a shrinking labour market together with a scarcity of essential materials are having a major impact on construction projects in the Highways and Engineering Service leading to increased costs and delays.</li> </ul> |

| Current Controls   | Planned Actions   |
|--|---|
| <ul style="list-style-type: none"> <li>• Causes cannot be mitigated against. However, management and reprofiling of the re-surfacing programme will be required to ensure sufficient headroom to fund the additional costs.</li> <li>• Redesign buildings and road schemes within available budgets or seek additional funding.</li> </ul> | <ul style="list-style-type: none"> <li>• Amend programmes of work due to increased cost of schemes.</li> <li>• Continue to modify (reduce in scope) programmes of work to meet available budgets.</li> <li>• Reduce the number of schemes being delivered to release enough funding to meet the increase in costs.</li> </ul> |

• Similar impacts are being felt across other non-construction related services e.g, Grounds Maintenance have seen circa 500% increase in the cost of herbicides.

- Score will reduce once buildings reduce significantly and when CLL in place.
- Robust budget monitoring.

• Ensure contingency allowed for in projects and funding bids going forward.

| Risk Ref. | Risk Title           | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|----------------------|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |                      | Likelihood             | Impact | Total Score (Lxl) | Likelihood    | Impact | Total Score (Lxl) | Likelihood   | Impact | Total Score (Lxl) |
| CR28      | Asylum & Immigration | 5                      | 5      | 25                | 5             | 5      | 25                | 2            | 5      | 10                |

|                   |               |
|-------------------|---------------|
| <b>Risk Owner</b> | K. Waterhouse |
|-------------------|---------------|

| Responsible Officer | Risk Action Status | Trend  | Next Risk Review Date |
|---------------------|--------------------|--------|-----------------------|
| P. Cole             | Some slippage      | Static | February 2024         |

| Key Potential Impacts   |
|---|
| <ul style="list-style-type: none"> <li>Increasing demands resulting from the two refugee crisis's in the last 12 to 18 months (Afghan &amp; Ukrainian) plus the new Home office asylum dispersal and resettlement scheme the numbers placed into Bury are expected to significantly increase over the next 12 months.</li> <li>The Council's statutory and non-statutory homelessness provision will also be impacted by</li> </ul> |

| Current Controls   |
|--|
| <ul style="list-style-type: none"> <li>Partnership working with GMCA and NW RSMP to robustly and collectively feedback to the Home office on their new dispersal and resettlement scheme to help ensure numbers placed in GM and Bury are realistic and can be achieved over the next 12 months. HO still working to 1:200 ratio numbers - therefore 100% increase in projected numbers over the next 6 to 12 months.</li> </ul> |

| Planned Actions   |
|---|
| <ul style="list-style-type: none"> <li>Empty homes officer appointed to deliver and tasked to develop an Empty Homes Strategy. Appointed. Regular information being received on empty properties with owners/landlord engagement taking place to identify barriers and encourage bringing properties back into use. Following the appointment of maternity cover unit manager backfill a project to be explored on engagement event with property owners</li> </ul> |

the cost of living crisis as well as general homelessness increasing.

- The risk is capacity to meet immediate emergency / temporary provision and also having sufficient long term permanent affordable housing to meet demand.
- Additionally, the Council is at risk of not being able to meet demand and leave families and people vulnerable without appropriate housing.
- New impacts by the Home office - fast track system for asylum decisions to move people from HO dispersed accommodation into LA duty.
- Home office - Afghan bridging hotel closures - projected further cases and numbers with passed duty to LA's.
- Uncontrollable and unmanageable numbers via the Home office - Unable to meet statutory homelessness duty due to staffing capacity but also the lack of emergency temp and permanent accommodation options when factoring in other homelessness pressures such as the cost of living crisis.
- 100%+ projected increase in asylum dispersal numbers over the next 12 months
- Use of B&B provision to meet temp accommodation demands which has increase expenditure and further financial risk.

- Development of the Private rented sector to maximise accommodation opportunities. new incentive scheme developed with identified funding - Now recruited PRS Development coordinator - recommence PRS incentive scheme to increase access to properties.
- New DLUHC match funded PRS Development coordinator role (3 years) to create capacity to prevent evictions in the PRS with landlord support + develop better relationships with PRS landlords to create greater access to properties.
- New empty homes officer in post to help deliver the new empty homes strategy that has identified 1000+ long terms voids to target for homelessness & social housing applicants – incentivisation scheme for landlords.
- Maximising all opportunities with the 20+ registered social landlord providers in the Borough to ensure all new developments supported by the Council or wider that they provide either social or affordable housing that's accessible for homelessness inc. asylum seekers / refugees within those new developments to assist with demand.
- Reviewing the allocations policy to include a common housing register with all RP's to gain greater access to all social housing across the Borough not just the Council. Now appointed HQN to carry out the independent

and possible property developers to encourage redevelopment and bring back into use.

- Steering group – timescales to have new allocations policy with common housing register by early 2024. Commissioned provider to be appointed - HQN - awaiting outcomes of exemption approval - time-scales - review draft report complete Jan 24 for Council approval.
- Home Office 'Dispersal and Resettlement Scheme' Consultation and feedback now provided collectively via GMCA / NW RSMP – awaiting response from the Home Office. Outcomes received - Home office to continue with 1:200 ratios in Bury and the rest of GM despite GMCA / RSMP collective response on existing numbers. Therefore numbers could increase by 100% in the next 6 to 12 months - circa increase from 440 to 1000+.
- ELA partnership: GMCA 'Let Us' - Needs refreshing with targets & outcomes.
- Progress delayed due to PRS Development coordinator leaving in June and internal HR blockage in obtaining approval to recruit permanently. Now recruited and re-commenced delivery of the PRS incentive scheme to increase access to PRS

- Projected significant increase in rough sleeper numbers and street homeless via migration pathways and the Home office / serco – non statutory single males being the main co-hort, some with no recourse to public funds. Existing rough sleeper provision – ie ABEN is always at capacity / full.
- Significant lack of affordable and social housing to meet current and projected demands with limited solutions in the short to medium term. Longer term solutions dependant on future funding streams aligned with the general needs housing strategy and delivery. Similar to wider homelessness pressures.
- Further potential refugee crisis - Gaza / Israel conflict could increase refugee numbers further especially if escalates - recent Govt change to legislation to provide / access social housing and services.

review by Nov / Dec 23. Jan cabinet for approval subject to formal consultation time-scales - legal advice needed.

- Co-delivery of the new Homelessness Strategy with Bury Homeless partnership - ongoing - new report to the overview and scrutiny committee in Jan 24 - further highlighted demand and challenges.
- Existing pathways with Serco / Home Office emergency accommodation within the Borough and the Council homelessness team to meet statutory provision and accommodation.
  - Set up operational migration meeting with all partners inc serco to help manage and support. Bi-monthly
- Existing pathways for non-statutory provision for asylum seekers evicted from Home office accommodation into Council provision.
- Internal Ukrainian operational meetings to support refugees via the Homes for Ukraine and the Family Visa route. Now maximising funding since under homeless service control
- Commissioned service with Stepping Stones to support the ARAP and Afghan refugees with support and accommodation. Contract extended for 3rd year.
- New funding - Afghan Bridging hotel impact - Any Afghan persons that have entered the

properties.

- New social housing strategy for the Borough to complement the Homelessness Strategy - process and approach to be agreed to evidence demands /needs. Recent GMCA paper that will support this element to increase social and affordable housing - 30,000 new social / affordable properties between 2024 to 2038.
- Explore all opportunities to increase emergency & permanent accommodation - Social, affordable & PRS. Need future strategy with timescales and outcomes to support operational delivery. eg - Former magistrates court site.
- Change in Council policy - use of B&B to meet homelessness duty to meet demands until more appropriate emergency and permanent housing solutions found - this option is also limited considering B&B provision being used by other GM LA's within the Borough and expensive.
- Opdec produced and in the process of approval to increase migration staffing by 3 fulltime temp posts to increase capacity to meet increasing demands to reduce risks. New increased governance and approvals delaying the recruitment process that may increase risk due to unexpected

|  |   |   |
|--|---|---|
|  | <p>UK on the ARAP and ACRS Scheme and currently in bridging hotels – circa – 8000 nationally, 1500 people in 7 hotels across the NW with 880 in GM hotels across Manchester and Stockport can present to any LA in the UK and therefore will be difficult to project numbers or have a planned approach for Bury - Funding - £35m national funding package, £9500 per person who presents to a LA - £28 per day for 6 months for support provided - Additional £7100 per household. Signed up to National find your own home scheme in the PRS to avoid increasing demands on social housing.</p> <ul style="list-style-type: none"> <li>• Home office fast track system - HO scheme to speed up asylum decisions in their serco dispersed accommodation and pass duty to LA's. Planned actions to manage increased demands.</li> <li>• Strategic migration meeting - monthly but lacking support and buy in by other services and partners.</li> <li>• External migration funding budgets &amp; reserves available to meet demands and now being appropriately managed and governed with finance.</li> <li>• Audit committee deep dive report 31/7/23 provided &amp; presented to members for updates and feedback with further migration report to CEO for assurance to emphasis risks</li> </ul> | <p>internal delays. Funded wholly via external migration funding. Now approved - out to recruit asap.</p> <ul style="list-style-type: none"> <li>• Homelessness Hub – 35 bed complex needs provision - Continued development of the business case for Council consideration / approval in Q3/4 – 2023/24. Draft Business case produced &amp; feasibility study - Meeting BGI colleagues to agree approval process - Regeneration Board, Growth sub group + Cabinet approval - align with governance timescales / dates. Aiming for Jan 24 Cabinet.</li> </ul> |
|--|---|---|

|  |  |  |
|--|--|--|
|  | <p>and mitigation of risks.</p> <ul style="list-style-type: none"><li>• Externally funded RTOF (Regional Transitional Outcomes Fund) worker to support 20 asylum seekers – 2 years commissioned contract with Stepping stones to deliver.</li><li>• Always exploring new opportunities to increase affordable housing supply and temp emergency housing solutions / provision.</li></ul> |  |
|--|--|--|



| Risk Ref. | Risk Title                                    | Previous Quarter Score |        |                   | Current Score |        |                   | Target Score |        |                   |
|-----------|---|------------------------|--------|-------------------|---------------|--------|-------------------|--------------|--------|-------------------|
|           |   | Likelihood             | Impact | Total Score (LxI) | Likelihood    | Impact | Total Score (LxI) | Likelihood   | Impact | Total Score (LxI) |
| CR29      | Reinforced Autoclaved Aerated Concrete (RAAC) | 3                      | 5      | 15                | 3             | 5      | 15                | 1            | 5      | 5                 |

|                   |                                |
|-------------------|--------------------------------|
| <b>Risk Owner</b> | I. Boler<br>L.Swann<br>P.Lakin |
|-------------------|--------------------------------|

| Responsible Officer                              | Risk Action Status | Trend  | Next Risk Review Date |
|--|--------------------|--------|-----------------------|
| L.Swann<br>M.Beswick<br>P.Cooke<br>R.Summerfield | On target          | Static | February 2024         |

| Key Potential Impacts  |
|--|
| <ul style="list-style-type: none"> <li>The limited durability of RAAC roofs and other RAAC structures has long been recognised; however recent experience (which includes two</li> </ul> |

| Current Controls   |
|--|
| <ul style="list-style-type: none"> <li>All local authority-maintained schools, for which Bury is the Responsible Body, have been surveyed to identify the presence of</li> </ul> |

| Planned Actions   |
|---|
| <ul style="list-style-type: none"> <li>BGI commissioned Building Condition Surveys of approximately 50x buildings and RAACs will be checked as part of</li> </ul> |

roof failures with little or no warning) suggests the problem may be more serious than previously appreciated and that many building owners are not aware that it is present in their property.

- Council needs to review all our buildings as a matter of urgency to understand if RAACs is present in any of them and the appropriate action can then be taken.

RAACs and there are no outstanding issues. Assurances have been provided by all other Responsible Bodies with schools in Bury, and there are no reported concerns.

- Identified all building leads for buildings in the master list.
- Email sent to all responsible leads for buildings to explain the issue and to ask them to complete spreadsheet and provide information (to include date building was constructed, any extensions and date and copies of any building condition surveys they may have commissioned). Initial exercise identified 3x potential buildings with RAACs present - 2x eliminated and RAACs confirmed at Bury Market.
- RAACs assessment sheet developed to document Building Control RAAC assessment visits.
- RAACs is being overseen by the Facilities Management Board.

these surveys. Any remaining buildings to be checked by Building Control/contracted out depending on capacity of the team.

- Identify what could be sent to Commercial Estate and consider responsibility in terms of the Commercial Estate.
- Follow up STH to check how they are responding.

Appendix B – Risk Matrix

Quantitative Measure of Risk – Impact / Consequence Score

|   | Impact / Consequence score (severity levels) and examples of descriptors                                       |  |   |  |  |
|---|--|--|---|--|--|
|   | 1  | 2  | 3   | 4  | 5  |
| AT RISK   | Very Low   | Minor  | Moderate  | High   | Severe   |
| <b>EXAMPLES : NEW POLITICAL ARRANGEMENTS, POLITICAL PERSONALITIES, POLITICAL MAKE-UP</b>  |  |  |   |  |  |
| <p><b>POLITICAL</b><br/>Associated with the failure to deliver either local or central government policy or meet the local administrations manifest commitment</p>  | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |
| <b>EXAMPLES : COST OF LIVING, CHANGES IN INTEREST RATES, INFLATION, POVERTY INDICATORS</b>  |  |  |   |  |  |
| <p><b>ECONOMICAL</b><br/>Affecting the ability to meet financial commitments. These include budgetary pressures, the failure to purchase adequate insurance cover, external macro level economic changes or proposed investment decisions</p> | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |
| <b>EXAMPLES : STAFF LEVELS FROM AVAILABLE WORKFORCE, AGEING POPULATION, HEALTH STATISTICS</b>   |  |  |   |  |  |
| <p><b>SOCIAL</b><br/>Relating to the effects of changes in demographic, residential or social economic trends on council's ability to meet its objectives</p>   | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |

|  | Impact / Consequence score (severity levels) and examples of descriptors                                       |  |   |  |  |
|--|--|--|---|--|--|
|  | 1  | 2  | 3   | 4  | 5  |
| AT RISK  | Very Low   | Minor  | Moderate  | High   | Severe   |
| <p><b>TECHNOLOGICAL</b><br/>Associated with the capacity of the Council to deal with the pace/scale of technological change, or its ability to use technology to address changing demands. May also include consequences of internal technological failures on the Council's ability to deliver its objectives</p> | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |
| <b>EXAMPLES : HUMAN RIGHTS, TUPE REGULATIONS, DATA PROTECTION</b>  |  |  |   |  |  |
| <p><b>LEGISLATIVE/LEGAL</b><br/>Associated with current or potential changes in national or European law</p>   | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |
| <b>EXAMPLES : LAND USE, RECYCLING, POLLUTION, WASTE MANAGEMENT</b>   |  |  |   |  |  |
| <p><b>ENVIRONMENTAL</b><br/>Relating to the environmental consequences of progressing the council's strategic objectives</p>   | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |

|   | Impact / Consequence score (severity levels) and examples of descriptors  |  |  |  |  |
|---|---|--|--|--|--|
|   | 1   | 2  | 3  | 4  | 5  |
| AT RISK   | Very Low  | Minor  | Moderate   | High   | Severe   |
| <b>EXAMPLES : STAFF RESTRUCTURE, CAPACITY, TRAINING, WORKFORCE NEEDS</b>  |   |  |  |  |  |
| <b>PROFESSIONAL / MANAGERIAL</b><br>Associated with the particular nature of each profession, internal protocols and managerial abilities | The risk will result in a minor delay, inconvenience<br><br>Can be managed no real impact upon service.                               | The risk will result in a minor loss, delay, inconvenience, interruption.<br><br>Opportunity to innovate/make minor improvements missed. Short term effect.                    | The risk will result in a waste of time and resources.<br><br>Good opportunity to innovate/improve missed.<br><br>Moderate impact on efficiency, output, quality.<br><br>Medium term effect which may be costly to recover from.                     | The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.<br><br>Medium to long term effect and expensive to recover from                      | The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.<br><br>Difficult to recover from and may require a long-term recovery plan/period.                        |
| <b>EXAMPLES : BUDGET OVERSPENDS, LEVEL OF COUNCIL TAX, LEVEL OF RESERVES</b>  |   |  |  |  |  |
| <b>FINANCIAL</b><br>Associated with financial planning and control  | Small<br><br>Loss>£100<br><br>The risk will result in a minor delay, inconvenience<br><br>Can be managed no real impact upon service. | Loss>£1,000<br><br>The risk will result in a minor loss, delay, inconvenience, interruption.<br><br>Opportunity to innovate/make minor improvements missed. Short term effect. | Loss>£10,000<br><br>The risk will result in a waste of time and resources.<br><br>Good opportunity to innovate/improve missed.<br><br>Moderate impact on efficiency, output, quality.<br><br>Medium term effect which may be costly to recover from. | Loss>£100,000<br><br>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.<br><br>Medium to long term effect and expensive to recover from | Loss>£1,000,000<br><br>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.<br><br>Difficult to recover from and may require a long-term recovery plan/period. |
| <b>EXAMPLES : SECURITY, ACCIDENTS, HEALTH &amp; SAFETY, HAZARDS, FIRE</b>   |   |  |  |  |  |
| <b>PHYSICAL</b><br>Related to fire, security, accident prevention and health and safety   | The risk will result in a minor delay, inconvenience<br><br>Can be managed no real impact upon service.                               | The risk will result in a minor loss, delay, inconvenience, interruption.<br><br>Opportunity to innovate/make minor improvements missed. Short term effect.                    | The risk will result in a waste of time and resources.<br><br>Good opportunity to innovate/improve missed.<br><br>Moderate impact on efficiency, output, quality.<br><br>Medium term effect which may be costly to recover from.                     | The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.<br><br>Medium to long term effect and expensive to recover from                      | The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.<br><br>Difficult to recover from and may require a long-term recovery plan/period.                        |

|  | Impact / Consequence score (severity levels) and examples of descriptors                                       |  |   |  |  |
|--|--|--|---|--|--|
|  | 1  | 2  | 3   | 4  | 5  |
| AT RISK  | Very Low   | Minor  | Moderate  | High   | Severe   |
| <b>EXAMPLES : CONTRACTOR FAILS TO DELIVER, PARTNERSHIP AGENCIS WITH CONFLICTING GOALS</b>  |  |  |   |  |  |
| <p><b>PARTNERSHIP/CONTACTUAL</b><br/>Associated with failure of contractors and partnership arrangements to deliver services or products to the agreed costs and specification</p> | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |
| <b>EXAMPLES : STANDARDS NOT MET, ACCREDITATION,</b>  |  |  |   |  |  |
| <p><b>COMPETITIVE</b><br/>Affecting the competitiveness of the service (in terms of cost or quality) and /or its ability to deliver best value</p>                                 | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |
| <b>EXAMPLES : MANAGING EXPECTATIONS, COMPLAINTS, CONSULTATION, COMMUNICATION EXTERNALLY</b>  |  |  |   |  |  |
| <p><b>CUSTOMER/CITIZEN</b><br/>Associated with failure to meet the current and changing needs and expectations of customers and citizens</p>                                       | <p>The risk will result in a minor delay, inconvenience</p> <p>Can be managed no real impact upon service.</p> | <p>The risk will result in a minor loss, delay, inconvenience, interruption.</p> <p>Opportunity to innovate/make minor improvements missed. Short term effect.</p> | <p>The risk will result in a waste of time and resources.</p> <p>Good opportunity to innovate/improve missed.</p> <p>Moderate impact on efficiency, output, quality.</p> <p>Medium term effect which may be costly to recover from.</p> | <p>The risk will have a major impact on the achievement of ambitions/priorities, serious impact on costs, income, performance, reputation, substantial opportunities missed.</p> <p>Medium to long term effect and expensive to recover from</p> | <p>The risk will have a critical impact on the achievement of ambitions and priorities, huge impact on costs, income, performance, reputation, critical opportunities missed.</p> <p>Difficult to recover from and may require a long-term recovery plan/period.</p> |

**Qualitative measure of risk – Likelihood Score**

| Descriptor                                  | 1  | 2                          | 3                              | 4                        | 5                                   |
|---|--|----------------------------|--------------------------------|--------------------------|-------------------------------------|
|   | Rare   | Unlikely                   | Possible                       | Likely                   | Almost certain                      |
| <b>Frequency</b><br>Time framed descriptors | Not expected to occur for years              | Expected to occur annually | Expected to occur monthly      | Expected to occur weekly | Expected to occur daily             |
| <b>Frequency</b><br>Broad descriptors       | Will only occur in exceptional circumstances | Unlikely to occur          | Reasonable chance of occurring | Likely to occur          | More likely to occur than not occur |
| <b>Probability</b>                          | 1-9% chance                                  | 10-24% chance              | 25-50% chance                  | 51-80% chance            | 81% or higher                       |

**Quantification of the Risk – Risk Rating Matrix**

|                      |   |          | Likelihood |          |          |        |                |
|----------------------|---|----------|------------|----------|----------|--------|----------------|
|                      |   |          | 1          | 2        | 3        | 4      | 5              |
|                      |   |          | Rare       | Unlikely | Possible | Likely | Almost certain |
| Impact / Consequence | 5 | Severe   | 5          | 10       | 15       | 20     | 25             |
|                      | 4 | High     | 4          | 8        | 12       | 16     | 20             |
|                      | 3 | Moderate | 3          | 6        | 9        | 12     | 15             |
|                      | 2 | Minor    | 2          | 4        | 6        | 8      | 10             |
|                      | 1 | Very Low | 1          | 2        | 3        | 4      | 5              |

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|------------------------------|
| <b>OPERATIONS DEPARTMENT</b> |
|------------------------------|



| <b>REPORT FOR AUDIT COMMITTEE</b> |  |   |   |
|-----------------------------------|--|---|---|
| <b>To:</b>                        | Executive – 22 November 2023<br>Audit Committee – 14 December 2023                                     |   |   |
| <b>Contact Officer:</b>           | Laura Swann – Assistant Director of Operations Strategy<br>Jason Kelly – Head of Facilities Management |   |   |
| <b>Risk Reference:</b>            | CR20   |   |   |
| <b>Risk Description:</b>          | Increasing Energy Prices   |   |   |
| <b>Reason for Briefing Note:</b>  | <b>Information</b><br><input type="checkbox"/>   | <b>Analysis &amp; Discussion</b><br><input checked="" type="checkbox"/> | <b>Decision</b><br><input type="checkbox"/> |

### 1.0 Context

Due to a series of major and unexpected events across the world over recent years, there has been a swift and unprecedented shift in the availability and pricing of energy in the UK.

Bury Council have been working closely with suppliers and YPO (our Framework Energy Provider) to mitigate price rises, but the energy market continues to be unpredictable and difficult to navigate even for specialist teams, which has led to price uncertainty.

### 2.0 Key Potential Impacts

The increase in energy costs over the last few years has had a significant impact on both the Council's budgets and the Local Authority school budgets. The Energy team have been working closely with Finance to provide regular impact forecasts to the Exec team since April 2022.

### 3.0 Current Forecast

The table below shows the actual gas and electricity costs for the council in 2022/23 and the latest forecasts for 2023/24.

Actual costs for 2022/2023 have been added in the table below using invoiced data. A forecast for 2023/24 with invoiced costs to date and a forecast to the end of the financial year has also been included. All costs are exclusive of VAT.

| <b>Period</b>                                    | <b>Costs</b>      |
|--|-------------------|
| Gas Costs 2022/23                                | £1,646,875        |
| Electricity costs 2022/23                        | £4,445,619        |
| Gas Forecast 2023/24                             | £1,794,552        |
| Electricity Forecast 2023/24                     | £5,468,419        |
| <b>Total energy costs for 2022/23</b>            | <b>£6,092,494</b> |
| <b>Total energy forecasted costs for 2023/24</b> | <b>£7,262,971</b> |

**NB** The above forecasts for 2023/24 include the **Energy Bills Discount Scheme** (EBDS) which runs from **1 April 2023 to 31 March 2024**.

Please note this only includes corporate sites. Schools are responsible for their own energy bills and are therefore not included in the forecast but will be subject to the same increases. Schools have been kept informed throughout in conjunction with Children's Services.

The price increases will result in a current projected increase in energy costs for the council from 2022/23 to 2023/24 of £1,170,477. The final increase will be dependant on gas and electricity usage for the remainder of the financial year.

#### **4.0 Current Controls**

The Government has launched the Energy Bills Discount Scheme to provide support to those on non-domestic contracts, including businesses, voluntary sector and public sector organisations, between 1 April 2023 and 31 March 2024. Non-domestic customers will receive a discount on gas and electricity unit prices, calculated by comparing the estimated wholesale portion of the unit price to a baseline 'government supported price' which is lower than currently expected wholesale prices this winter.

#### **5.0 2024/25 Energy Price Forecasts**

Bury Council have been provided indicative costs for the financial year 2024/25 (From YPO). The prices indicate a 70% reduction in the cost of gas compared to 2023/24 and a 39% reduction in the cost of electricity, which would result in a significant reduction in energy costs for 2024/25.

However, these figures need to be looked at with caution, as only 79% of gas and 59% of electricity has been purchased by YPO to date for 2024/25 and prices remain volatile, so costs could increase on the above figures provided. The Energy team will be able to provide more accurate energy price forecasts in January for the next financial year, to understand likely cost implications for 2024/25 (at this point the majority of gas and electricity should have been purchased for 2024/25 to help provide the price certainty).

Based on the prices provided by YPO for the gas and electricity purchased to date the current estimate is that the budget held for energy in 2024/25 will be sufficient and the MTFs has used this assumption in the current modelling.

## **6.0 Mitigation of rising energy costs**

Following the increases in price last year a working group was set up to review, monitor and mitigate the rising energy costs. The group have carried out and created a set of actions to be implemented across the Council's estate:

- Report agreed by Cabinet in September 2022 to utilise the YPO Framework for the purchase of electricity for the next 4 years starting in April 2023.
- Regular updates provided to Exec Team and to Schools in relation to costs.
- Newly developed Carbon Literacy Training module available for staff and now mandatory.
- Team Bury away day on Climate Change and impact of rising energy costs.
- Internal communications campaign to highlight energy saving opportunities within corporate buildings.
- 68.72% streetlights converted to LED lanterns.
- £500K bid submitted to Swimming Pool Grant Fund, however, unfortunately this bid was unsuccessful.
- New water supply contract procured and commenced on 01/11/23. This includes schools, all corporate buildings and selected 3rd party organisations.
- Further street lighting LED replacement programme approved as a further savings option for delivery during 2023/24 and 2024/25.

## **7.0 Conclusion**

Based on the projected rates for 2024/25, the risk of rising energy costs will reduce significantly in the next financial year. Based on the prices provided by YPO for the gas and electricity purchased to date the current estimate is that the budget held for energy in 2024/25 will be sufficient and the MTFs has used this assumption in the current modelling. However, there is still a risk around the energy not yet purchased and costs for 2024/25 will be confirmed in Jan 2024.

**Update for Deep Dive regarding CR19 to follow**

# Audit Progress Report

Bury Metropolitan Borough Council

December 2023



1. Audit Progress
2. National Publications

## Section 01: **Audit Progress**

# Audit Progress

## Purpose of this report

This report provides the Audit Committee with an update on progress in delivering our responsibilities as your external auditors.

## Audit progress

### 2021/22 financial statements audit

A number of items previously reported as outstanding remain.

Items currently in progress are

- Agreement of the amendments required in respect of Property, Plant & Equipment
- Agreement of the Council's group consolidation entries
- Confirmation and assessment of the existence of RAAC in Council buildings and the impact on the financial statements
- Resolution of queries from the technical review of the financial statements
- Queries in respect of related party disclosures and
- Final file review and closure.

The Council has also identified 2 further amendments that will require review.

We will issue a follow up letter to this Committee following the completion of the outstanding work

### 2021/22 VFM

We have commenced our work on the Council's value for money arrangements. Following some initial queries, we received further supporting evidence and we are currently reviewing this.

We plan to complete and report our Value for Money arrangements work alongside the remaining aspects of work on the financial statements.



# Audit Progress

## 2022/23 audit

The Council published its draft Accounts and annual governance statement on 31st May 2023, in line with the statutory timetable.

We will agree a detailed timetable for our work following resolution of the outstanding areas of work on 2021/22.

Section 02:  
**National Publications**

# National publications

|                     | Publication/update   | Key points  |
|---------------------|--|---|
| <b>Publications</b> |  |   |
| 1                   | NAO report – Investigation into the homes for Ukraine scheme                       | The NAO has published its investigation into the Homes for Ukraine scheme. The UK government launched the Homes for Ukraine scheme (the scheme) on 14 March 2022, following the Russian invasion of Ukraine in February 2022. The scheme enables people in the UK to act as sponsors for Ukrainian nationals and their families seeking refuge from the war, with individuals being granted three-year visas to stay in the UK, with full access to public services, benefits, and other support.   |
| 2                   | NAO insight - Financial management in government: strategic planning and budgeting | The NAO has published a good practice guide in financial management/ The guide is aimed at senior finance leaders in government departments and other public bodies. It sets out the first stage in the financial management lifecycle: strategic planning and budgeting.   |
| 3                   | NAO report - Approaches to achieving net zero across the UK                        | The NAO has published its report on Approaches to achieving net zero across the UK. This report is a joint piece of work between the public audit offices of the four UK nations – Audit Scotland, Audit Wales, NAO and Northern Ireland Audit Office – and has been produced with engagement from each respective government or administration. It sets out the UK and devolved governments’ legislation, policy, strategy, governance and monitoring arrangements, relevant to achieving net zero greenhouse gas emissions.   |
| 4                   | NAO Report Reforming adult social care in England                                  | In 2019, the government promised to “fix the crisis in social care”. Following the COVID-19 pandemic, in September 2021 Department of Health & Social Care (DHSC) published Build Back Better: Our Plan for Health and Social Care. The NAO report looks at how DHSC is responding to the challenges facing adult social care in England, and its progress with delivering the reforms set out in the 2021 white paper.   |
| 5                   | NAO Departmental overviews   | The NAO has published the following department overviews. They summarise the key information and insights that can be gained from the NAO’s examinations of the departments and related bodies in the sector in England and annual reports and accounts.  |
| 6                   | NAO report: Resilience to flooding   | The NAO last reported on government’s management of flood risk in November 2020. This report looks at the government’s long-term ambition “to create a nation more resilient to future flood and coastal erosion risk” and, in the more immediate term, whether the Department for Environment, Food, & Rural Affairs (Defra) and the Environment Agency (EA) are delivering value for money after two years of the capital programme. The report assesses Defra’s progress against the backdrop of its 2020 policy statement and EA’s 2020 strategy and EA’s performance in maintaining existing flood defence assets. |
| 7                   | NAO Departmental overview: Education   | The NAO has published its Departmental overview for Education which supports the Education Committee in its examination of the Department for Education’s (DfE’s) spending and performance. It summarises information and insights gained from examinations of the DfE and related bodies across the sector in England and the DfE’s annual report and accounts.  |

# National publications - continued

|              | Publication/update                                   | Key points   |
|--------------|--|--|
| Publications |  |  |
| 8            | NAO report: Levelling up funding to local government | The NAO has published its report Levelling up funding to local government which examines whether the Department for Levelling Up, Housing & Communities' (DLUHC) three significant levelling-up funds are likely to deliver value for money. The study has been conducted at a relatively early stage in the lifecycles of the three funds to identify lessons for securing value for money for the funds committed to date and inform decisions around future funding rounds. |

# NATIONAL PUBLICATIONS

## Publications

### 1. NAO Report – Investigation into the Homes for Ukraine Scheme

The NAO has published its investigation into the Homes for Ukraine scheme. The UK government launched the Homes for Ukraine scheme (the scheme) on 14 March 2022, following the Russian invasion of Ukraine in February 2022. The scheme enables people in the UK to act as sponsors for Ukrainian nationals and their families seeking refuge from the war, with individuals being granted three-year visas to stay in the UK, with full access to public services, benefits, and other support.

Any adult is able to act as a sponsor providing they pass eligibility checks conducted by the Home Office and local authorities. Sponsors must commit to hosting for a minimum of six months and can claim thank you payments from government for providing suitable accommodation for Ukrainians to live in of £350 per month for the first 12 months, and then £500 for the next 12 months. In addition, the local authority where the sponsor is based receives a one-off payment of £10,500 per arrival (reduced to £5,900 for all arrivals after 31 December 2022) to help with support and integration needs.

The scheme is jointly run by the Department for Levelling Up, Housing & Communities (DLUHC) and the Home Office, who established a joint taskforce in March 2022. The Home Office primarily leads on operational matters relating to the processing of visas and checks on the suitability of the sponsor. DLUHC leads on all aspects of the scheme from the point of arrival of Ukrainians into the UK, working closely with local authorities and devolved governments.

#### Scope of the report

The first people to arrive in the UK under the scheme are now halfway through their permitted stay, and the emergency phase of the UK government's response to the Ukraine refugee crisis has come to a close. This report aims to increase transparency by taking stock of what has been achieved to date, for what cost, and what can be learned. The report sets out:

- how the scheme was set up at speed and the scheme objectives
- arrival numbers and the checks conducted on applicants and sponsors
- the funding provided
- challenges and future risks with the scheme

This investigation does not seek to examine and report on the value for money of the scheme.

<https://www.nao.org.uk/reports/investigation-into-the-homes-for-ukraine-scheme/>

## Publications continued

### 2. NAO insight - Financial management in government: strategic planning and budgeting

The NAO has published a good practice guide in financial management aimed at senior finance leaders in government departments and other public bodies. It sets out the first stage in the financial management lifecycle: strategic planning and budgeting. Planning in a strategic and realistic way gives organisations the best chance to thrive – to help inform trade-offs and operate in an effective and efficient way.

The guide outlines how finance leaders can plan strategically and realistically to:

- Align strategy and planning
- Make planning inclusive
- Plan dynamically
- Address optimism bias
- Deal with risk and uncertainty

The insights have been drawn from NAO reports, the experiences of NAO audit teams, and the thoughts of a range of senior finance decision-makers.

[Financial management in government: strategic planning and budgeting - NAO insight](#)

# NATIONAL PUBLICATIONS

## Publications continued

### 3. NAO report - Approaches to achieving net zero across the UK

The NAO has published a report – Approaches to achieving net zero across the UK. This report is a joint piece of work between the public audit offices of the four UK nations – Audit Scotland, Audit Wales, NAO and Northern Ireland Audit Office – and has been produced with engagement from each respective government or administration. It sets out the UK and devolved governments' legislation, policy, strategy, governance and monitoring arrangements, relevant to achieving net zero greenhouse gas emissions.

This work has several aims:

- To set out how the responsibilities and powers for achieving the net zero target are split between the UK government and each of the devolved governments.
- To provide insight and stimulate public discussion on each UK nation's overall approach to achieving net zero.
- To support the scrutiny of governments' arrangements to achieve net zero.
- To lay the foundations for potential further work on climate change by the UK's public audit offices.

The report include the following key themes:

- The four nations have different emissions profiles and varied approaches to achieving net zero, but the choices they make must ultimately deliver net zero at the UK level.
- Given the different net zero targets, carbon budgets and policies across the nations, there will be opportunities for the governments to learn from each other.
- Achieving net zero in any one nation depends on UK-level action, and vice versa.
- Effective working relationships and close engagement between the UK and devolved governments will be vital to achieving the overall aim of net zero.

<https://www.nao.org.uk/reports/approaches-to-achieving-net-zero-across-the-uk/>

# NATIONAL PUBLICATIONS

## Publications continued

### 4. NAO report - Reforming adult social care in England

Following the COVID-19 pandemic, in September 2021 Department of Health & Social Care (DHSC) published Build Back Better: Our Plan for Health and Social Care. The NAO report looks at how DHSC is responding to the challenges facing adult social care in England, and its progress with delivering the reforms set out in the 2021 white paper. The report examines:

- key pressures and challenges in adult social care in England;
- DHSC's response to increasing pressures in adult social care during 2022; and
- how DHSC is delivering reform and progress against its commitments

The report concludes that DHSC's 10-year vision for adult social care reform was broadly welcomed by the sector as a step forward. But rising inflation compounded long-standing pressures and led DHSC to reprioritise money and activity to provide local authorities and care providers with some much-needed financial stability.

The sector remains challenged by chronic workforce shortages, long waiting lists for care and fragile provider and local authority finances. Although there are some early signs of improvement in some of these, it remains to be seen whether these trends will continue and at what cost.

Two years into its 10-year plan, DHSC has delayed its charging reforms, scaled back system reform, and is behind on some aspects of its revised plan. It has a long way to go if it is to deliver its ambitions. If DHSC is to successfully reform adult social care, it will need to manage some significant risks, including its own capacity and that of local government to resume charging reform activity alongside system reform.

To maximise its chances of succeeding, DHSC will need to make sure it understands how the different strands of its reforms relate to each other, and the cumulative impact on local authorities and other stakeholders. It must be clear what the critical steps are, manage delivery against those closely and put in place governance needed to manage delivery risks effectively.

Adult social care reform has been an intractable political challenge for decades, and in 2019 DHSC raised expectations that it would be addressed. Working with the sector, DHSC now needs to demonstrate how it is delivering on these plans.

<https://www.nao.org.uk/reports/reforming-adult-social-care-in-england/>



# NATIONAL PUBLICATIONS

## Publications continued

### 5. NAO Departmental overviews

- The NAO has published the following department overviews. They summarise the key information and insights that can be gained from the NAO's examinations of the departments and related bodies in the sector in England and annual reports and accounts:
- Department for Transport: Spends £41 billion each year to support the transport network that helps get people and goods travelling around the UK
- Home Office: Spends some £25 billion each year with the aims of keeping UK citizens safe and our borders secure, reducing crime; tackling terrorism; enabling the legitimate movement of people and goods to support economic prosperity; and tackling illegal migration.

<https://www.nao.org.uk/overviews/department-for-transport-2022-23/>

<https://www.nao.org.uk/overviews/departmental-overview-2022-23-home-office/>

# NATIONAL PUBLICATIONS

## Publications continued

### 6. NAO report: Resilience to flooding

The NAO last reported on government's management of flood risk in November 2020. This report looks at the government's long-term ambition "to create a nation more resilient to future flood and coastal erosion risk" and, in the more immediate term, whether the Department for Environment, Food, & Rural Affairs (Defra) and the Environment Agency (EA) are delivering value for money after two years of the capital programme. The report assesses Defra's progress against the backdrop of its 2020 policy statement and EA's 2020 strategy and EA's performance in maintaining existing flood defence assets.

The report covers:

- the government's long-term ambition and objectives and Defra's governance, understanding and management of flood risk
- progress on the capital programme to build new flood defences and risks to future delivery
- EA's performance in maintaining flood defence assets

The report concludes that to combat the growing dangers from flooding, the government has doubled its capital funding in England for the six years to 2027. To manage the larger capital programme and record levels of investment, Defra has intensified its scrutiny and is taking steps with EA to develop a more granular understanding of flood risk.

However, the capital funding is forecast to deliver protection to far fewer properties by 2027 than was promised when the capital programme was launched. Due to underspending in the first two years of the programme, EA will need to achieve record levels of investment in the remaining four years of the programme to spend the full £5.2 billion allocated to the programme. There is a risk that value for money will be further eroded if projects are accelerated or new projects are introduced too quickly to meet this level of investment.

On top of this, EA's maintenance of its assets is not optimising value for money. For the lack of £34 million in annual maintenance funding for 2022-23, more than 200,000 properties are at increased risk of flooding. At the same time, EA underspent by £310 million in the first two years of the capital programme.

Neither Defra nor EA assessed whether using some of this underspend to meet the shortfall in its maintenance budget in 2022-23 would have provided better value for money than deferring it to later in the capital programme.

The government acknowledges that building new flood defences and maintaining existing ones is no longer enough and that a wider range of interventions is now needed to build resilience against increasing flood risk. Although the government's vision for flood resilience stretches to the year 2100 and EA has a number of strategic objectives for 2050, it has not set a target for the level of flood resilience it expects to achieve and has not mapped out any solid plans beyond 2026 to bridge the gap between its shorter-term actions and long-term objectives. This will make it difficult for the government to make rational and informed decisions about its priorities, measure its progress or plan effective investment for the long term.

<https://www.nao.org.uk/reports/resilience-to-flooding/>

# NATIONAL PUBLICATIONS

## Publications continued

### 7. NAO Departmental overview: Education

The NAO has published its Departmental overview for Education which supports the Education Committee in its examination of the Department for Education's (DfE's) spending and performance. It summarises information and insights gained from examinations of the DfE and related bodies across the sector in England and the DfE's annual report and accounts.

In 2022-23, the DfE spent £83 billion to meet its responsibilities for children's services and education, including early years, schools, further and higher education policy, apprenticeships, and wider skills in England.

<https://www.nao.org.uk/overviews/department-for-education/>

# NATIONAL PUBLICATIONS

## Publications continued

### 8. NAO report: Levelling up funding to local government

The NAO has published its report Levelling up funding to local government which examines whether the Department for Levelling Up, Housing & Communities' (DLUHC) three significant levelling-up funds are likely to deliver value for money. The study has been conducted at a relatively early stage in the lifecycles of the three funds to identify lessons for securing value for money for the funds committed to date and inform decisions around future funding rounds. The report considers whether:

- the three funds have clear aims and objectives and have been designed and allocated as part of a joined-up approach
- the three funds have been distributed in line with their objectives and if they are delivering projects as planned
- DLUHC has an effective approach for the evaluation of the three funds

The report concludes that in 2021 DLUHC had a poor understanding of what had worked in its previous local growth programmes and was not well placed to manage the increase in grant-making required by its new £4.8 billion Levelling Up Fund and £2.6 billion UK Shared Prosperity Fund. However, more recently the Government Internal Audit Agency has found that DLUHC has improved its oversight of its major levelling-up funds.

DLUHC was slow to agree funding across the Towns Fund, Levelling Up Fund and UK Shared Prosperity Fund. Towns Fund and Levelling Up Fund projects are experiencing delays, which has led to many projects needing to be adjusted or rescope.

Projects are being delivered in the context of rising costs and pressures on public finances. Reflecting this context, DLUHC has taken steps to understand local authorities' delivery challenges and is piloting a more flexible approach to move money between Towns Fund and Levelling Up Fund projects. However, at this stage it appears unlikely that local authorities will be able to complete projects by the original deadlines.

The ability of projects to deliver all their intended benefits will rely on DLUHC and local authorities working together to unblock those projects which are delayed or have not started and set realistic expectations for delivery.

DLUHC has made significant improvements in its approach to evaluation, which puts it in a better position to understand future impacts delivered by these funds. DLUHC has ambitious plans for the evaluation of each fund, has sought external input and is undertaking feasibility work before committing to final approaches. Most of this work is still to come and further funding will be needed to understand the effect of the projects over the longer term.

Equally important is that any high-quality learning from this evaluation work is shared with local decision-makers to support better value for money in future economic growth approaches.

To secure value for money and maximise the desired benefits from these funds DLUHC should review expectations for what outcomes can be delivered by when and support local authorities and their partners to deliver the long-term benefits for people in their local places.

<https://www.nao.org.uk/reports/levelling-up-funding-to-local-government/>

## Contact

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| <b>Classification:</b><br>Open | <b>Decision Type:</b><br>N/a |
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| <b>Report to:</b> | Audit Committee     | <b>Date:</b> 14 December 2023 |
| <b>Subject:</b>   | Annual Fraud Plan   |                               |
| <b>Report of</b>  | Section 151 Officer |                               |

### Summary

This report provides an update on the Annual Counter Fraud Plan 2023/24 and the work undertaken by the Fraud Team during the financial year to 30<sup>th</sup> November 2023.

The conclusions drawn from the report are:

The five policies which have previously been approved by Audit Committee have now been communicated to staff and to the public. The policies are: -

- Anti-Fraud and Corruption Strategy
- Fraud and Corruption Prosecution Policy
- Whistleblowing Policy
- Anti-Bribery and Corruption Policy
- Anti- Money Laundering Policy

The National Fraud Initiative results continue to be checked. The Fraud Team have now checked 1846 entries relating to a variety of matches including Payroll, Housing and Blue Badges. 340 Blue Badges have been cancelled with a Cabinet Office estimated saving of £221,000. A number of further investigations have also been opened relating to other NFI data matching results.

Four cases which have been investigated have been passed to legal services for prosecution.

The Counter Fraud Team have received 475 referrals and have achieved £258,888 in overpayments (including £221K for blue badges) and savings in this financial year to date.

### Recommendation(s)

- Members note this report and the work undertaken by the fraud team.

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### Report Author and Contact Details:

Name: Janet Spelzini

Position: Head of Fraud, Audit, Insurance and Risk

Department: Corporate Core - Finance

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## **Background**

- The Fraud Investigators are members of the FAIR (Fraud, Audit, Insurance and Risk) Team. The team comprises two Senior fraud Investigators, one of which is part-time, and one Fraud Investigator. The team have been established for approximately 8 years; however, they were previously based within the Revenue and Benefits Team and transferred to FAIR following the restructure of the Finance Department which was implemented in January 2023.
- A plan has been compiled which sets out the work the team aims to deliver throughout 2023/24. This is the first time that a plan has been drawn up for the team and it is very much based on the teams' experience and knowledge of work undertaken in previous years. It is the intention that the plan will be under continuous review and will be developed. The team have contacts within Councils both within the boundaries of GMCA and in other regions in the country. By networking and liaising with other teams, the team become aware of any topics / subject areas which fraudsters may be targeting and become aware of work and developments that other colleagues are undertaking. This knowledge will be taken-into account and topics identified will be considered for inclusion in future plans for the Bury team.

## **ISSUES**

- The annual plan for 2023/24 provides for 464 days to be delivered throughout 2023/24. The plan is attached to this report, Appendix A.
- It is intended that updates of the work of the team, including details of any reports produced and funds recovered, will be shared with Audit Committee Members. All the work undertaken is of a confidential nature and therefore will be presented in Part B of the meeting, which is closed to the press and public.
- This report provides an update to Audit Committee of the work undertaken from 1<sup>st</sup> October to 30<sup>th</sup> November 2023.

## **Fraud Awareness and Prevention**



## Policies

During 2023/24 to date the Counter Fraud Team have reviewed the Anti-fraud and corruption strategy (inc whistleblowing) and five revised documents were produced and presented to and accepted by Audit Committee. The new documents are:-

- Anti Fraud and Corruption Strategy
- Fraud and Corruption Prosecution Policy
- Whistleblowing Policy
- Anti-Bribery Policy
- Anti-Money Laundering Policy.

Since Audit Committee, met in October 2023, the policies have been made available on the Intranet and Internet and a communication has been sent out to all staff making them aware of the new policies.

Manager Training re the Whistle Blowing Policy is planned for February 2024.

## Fraud Awareness Week

It was 'National Fraud Awareness Week' 12<sup>th</sup> November to 18<sup>th</sup> November. The Fraud Team sent out a communication on social media and to all Bury Council Staff to raise fraud awareness to the public and staff. A coordinated communication was also sent by Six Town Housing on their website and will also be included in their resident newsletter. The communication drew attention to the work of the fraud team and in particular highlighted tenancy fraud.

## **Pro-Active Counter Fraud Activity**

### National Fraud Initiative (NFI)

This year, the Counter Fraud Team are leading on checking data matches that are received from the NFI.

In total the NFI results identified 4429 potential fraud matches and, of these, 3240 have been processed and have generated savings estimated of £222,148.00, the majority of which relates to blue badge information. A sum of £20,585.15 is being recovered which relates to incorrect creditor payments and incorrect council tax support payments which have been made. All amounts due to be recovered resulted from errors which had been made and no frauds have been identified.

The Fraud Team have checked 1846 matches relating to a variety of matches including Payroll, Housing and Blue Badges, resulting in 340 Blue Badges being cancelled with a Cabinet Office estimated saving of £221,000. The team have now received three reports of Blue Badge misuse from badge numbers included in those 340 cancelled. Two of the badges have been returned and destroyed. One case has resulted in a warning letter being issued, one has been passed for prosecution and the other case is still ongoing. This shows if the badges were still in circulation (over the 3-year period) it could result in a considerable loss in parking charges to the Council. Other NFI matches (including payroll and Housing), have resulted in further

cases being opened for investigation which are still ongoing. There is nothing of significance to report to Audit Committee at this point.

### Operation Challenger

The Counter Fraud Team not only investigates cases of fraud, but also provides a wealth of advice across the Council to services and to external bodies including immigration and the police.

A combination of intelligence, skills and powers from the different enforcement agencies are used to prevent and detect fraud within the Borough.

Currently the following cross-agency teams attend the bi-monthly meeting: GMP – Organised Crime Team; Safeguarding, Intelligence Officers, Bury Council - Fraud; Trading Standards; Private Sector Housing, DWP – Fraud, Probation Service, Immigration Services and the Fire Service.

The Counter Fraud Team have dealt with 53 ‘police checks’ on Bury Council systems, to help the police gather intelligence to tackle crime. These checks include some in-depth requests providing information to combat organised crime which have resulted in the discovery of several large cannabis farms.

Information provided to Rochdale police has helped them contact victims and secure a successful prosecution of 5 offenders who were sentenced to in excess of 70 years for child sexual exploitation.

### **Responsive Investigation Activity**

A total of 475 fraud referrals have been received during this financial year including 386 fraud referrals, 32 Blue Badge misuse referrals and 57 Right to Buy applications requiring additional checks including Money Laundering checks.

The main sources of these referrals came from the National Fraud Initiative exercise (NFI), NSL Limited (Council’s contractor for car parking inspections), Six Town Housing, anonymous referrals and online forms.

A number of these referrals do not progress to formal investigation because after initial examination and research there is not enough information to progress the matter.

Four cases have passed to legal for prosecution. 1 case was for Council Tax Single Person Discount and 3 cases were for Blue Badge misuse.

### **Other Counter Fraud Activity**

The Counter Fraud Team have continued to deal with fraud work related to COVID-19, including allegations of fraud arising from the Pandemic.

The team have documented the details of their findings which highlights Business Rates accounts which require a review of charges and grant eligibility.

The report outlines 58 Business Rates accounts for review with a potential value of approximately £740,000 in additional Business Rates charges which may need to be recovered and £245,000 in Covid-19 grant overpayments. This information has been passed to the Business Rates Team for review and to take any appropriate recovery action.

The Counter Fraud Team met with the Revenues and Benefits team on the 8<sup>th</sup> November 2023 but at that point limited progress had been made to progress the report. Since the report was produced, two cases have been closed following the receipt of information made under data protection requests and the value of Business rates which may be recovered has reduced to £723,000k.

A separate investigation into a Business rates account, not included in the exercise referred to, has led to an invoice of approximately, £60k being raised to recover business rates relief which appears to have been incorrectly claimed by the occupant, additionally £10k covid grant has been invoiced for recovery from the same debtor. The debtor has not admitted liability of the debts but they have agreed a plan to repay the debt.

The team will continue to liaise with the Business Rates Team and will bring updates to future Audit Committee meetings.

#### Data Protection Requests

The Fraud Team have also responded to a 69 general Data Protection requests which include internal requests for teams such as Trading Standards and Licensing which helps combat illegal activity within Bury Council's boundaries.

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#### **Links with the Corporate Priorities:**

*Please summarise how this links to the Let's Do It Strategy.*

The Fraud Team undertakes work across the Council, to raise the profile of fraud awareness, and undertake investigations where there is suspicion that fraud may have been perpetrated. They also undertake preventative work, examining applications for Council services / benefits where it is known the opportunity of fraud does exist. The workplans cross all areas of the organisation. The team works closely with the Internal Audit Team and highlights areas for inclusion in the Internal Audit Plan. The Fraud Team are able to make recommendations for improvements to be made to systems in place to improve the control of and protect the assets and resources of the Council. The control and mitigation of the loss of funds gives the

assurance that public money is used in an appropriate manner to deliver the Corporate Priorities.

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**Equality Impact and Considerations:**

*Please provide an explanation of the outcome(s) of an initial or full EIA.*

Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under this Act.
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.

The Fraud Team provide assurance to Committee Members and the public that the organisation is preventing and investigating fraud. They work alongside Internal Audit and also ensure the areas they examine are being operated in line with legislation and in line with agreed policies and procedures which have considered the requirements of the Equality Act 2010.

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**Environmental Impact and Considerations:**

*Please provide an explanation of the carbon impact of this decision.*

N/a – no decision required

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**Assessment and Mitigation of Risk:**

| Risk / opportunity | Mitigation |
|--------------------|------------|
|--------------------|------------|

|  |   |
|--|---|
| <p>The Council is a large organisation which has the potential to be targeted by fraudsters who try to divert the assets of the Council for improper gain.</p> | <p>The fraud team undertake both proactive and reactive exercises to prevent fraud and to investigate any alleged incidents of fraud. A zero tolerance to fraud and corruption is in place and where appropriate, internal disciplinary action is taken and / or criminal proceedings take place.</p> |
|--|---|

**Legal Implications:**

The Council must have a sound system of internal control which includes the work of the Fraud Team having an effective annual plan and regular review of the key policies is good practice to ensure that the Council meets its legal obligations and ensures compliance with the Council's constitution.

**Financial Implications:**

Whilst there are no direct financial implications arising from this report, the work of the fraud team to prevent, detect fraud and prosecute where fraud is found to have occurred can result in recovery of funds to the Council.

**Background papers:**

*Please list any background documents to this report and include a hyperlink where possible.*

- Counter Fraud Strategy
- Fraud Plan 2023/24

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

| Term      | Meaning                               |
|-----------|---------------------------------------|
| FAIR Team | Fraud, Audit, Insurance and Risk Team |

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| <b>Classification:</b><br>Open | <b>Decision Type:</b><br>N/a |
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|-------------------|--------------------------------|-------------------------------|
| <b>Report to:</b> | Audit Committee                | <b>Date:</b> 17 November 2023 |
| <b>Subject:</b>   | Internal Audit Progress Report |                               |
| <b>Report of:</b> | Section 151 Officer            |                               |

## Summary

1. This report sets out the progress to date against the annual audit plan 2023/24. The report enables Members to monitor the work of the Internal Audit service, raise any issues for further consideration and provide an opportunity to request further information or to suggest areas for additional or follow up work.

The conclusions drawn from the report are:

- The majority of work outstanding from the 2022/23 plan has now been completed and work on 2023/24 plan is progressing.
- Fourteen reviews have concluded, and reports have been issued to Members since the beginning of the financial year. Eight reports relate to the 2022/23 annual audit plan and were considered when formulating the annual audit opinion for 2022/23. Six reports relate to the 2023/24 annual audit plan.
- Work on 2023/24 plan is progressing. Ten reviews are ongoing, three reviews are at draft report stage. Three reviews which were in progress have been put on hold and deferred until quarter 4 of 2023/24.
- Three follow up exercises and three second follow up exercises have been completed since Audit Committee met in October 2023.
- Resources originally calculated as available for the delivery of the annual plan may need to be reduced by approximately 125 days. Reviews earmarked to be deferred until 2024/25 are outlined at paragraph 2.1 of the report.

## .Recommendation(s)

- Members note this report and the work undertaken by Internal Audit

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## Report Author and Contact Details:

Name: Janet Spelzini  
 Position: Head of Fraud, Audit Insurance and Risk  
 Department: Corporate Core - Finance  
 E-mail: j.spelzini@bury.gov.uk

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## Background

- 1.1 This report outlines the work undertaken by Internal Audit between 1<sup>st</sup> October to 17<sup>th</sup> November 2023.
- 1.2 Management is responsible for establishing and maintaining appropriate risk management processes, control systems, accounting records and governance

arrangements i.e., the control environment. Internal Audit plays a vital role in reviewing whether these arrangements are in place and operating properly and providing advice to managers. On behalf of the Council, Internal Audit review, appraise and report on the efficiency, effectiveness and economy of these arrangements and provide assurance to the organisation (Chief Executive, Executive Directors, and the Audit Committee) and ultimately the taxpayers, that the Council maintains an effective control environment that enables it to significantly manage its business risks. The service helps the Council achieve its objectives and provides assurance that effective and efficient operations are maintained.

- 1.3 The assurance work culminates in an annual opinion given by the Head of Fraud, Audit Insurance and Risk on the adequacy of the Council's control environment, based on the work undertaken, and this opinion feeds into the Annual Governance Statement.
- 1.4 The Internal Audit Plan for 2023/24 provides for 898 days to be delivered throughout the 2023/24 year across all Council Departments, and group companies, Six Town Housing and Persona. The Audit plan covers a range of themes.
- 1.5 The 2023/24 plan was approved by Audit Committee at the meeting on 30<sup>th</sup> March 2023.
- 1.6 Work has been continuing throughout the year to date, completing outstanding reviews from 2022/23 and addressing audits in the 2023/24 plan. Regular progress reports are produced, informing Members of audit activities, and this is the third report of the 2023/24 financial year covering the period from 1<sup>st</sup> October to 17<sup>th</sup> November 2023 which includes 7 completed weeks.

## 2.0 ISSUES

### 2.1 Annual Audit Plan

- 2.1.1 The annual plan for 2023/24 was presented to Audit Committee in March 2023 and provided for 898 audit days to be delivered throughout the year.

The original plan is shown at appendix A and has been updated to show the position as at 17<sup>th</sup> November 2023.

Section 2.8 of this report outlines that due to a variety of reasons, the plan requires an adjustment of approximately 125 days. The table below identifies audits which have been earmarked for deferring until 2024/25.

| Directorate              | Topic   | Indicative Days | Reason for removal from 2023/24 plan                             |
|--------------------------|---|-----------------|--|
| Corporate Core - Finance | Budgetary Control                                     | 15              | CIPFA undertaking external review<br>Remove                      |
| Corporate Core - Finance | Insurance   | 15              | Acknowledged issues within the team<br>Roll forward into 2024/25 |
| Corporate Finance / HR   | ITrent Payroll - Additional Hours / Overtime Payments | 15              | Module has not gone live.  |



|                                    |                                      |     |   |
|------------------------------------|--------------------------------------|-----|---|
|                                    |                                      |     | Roll forward into 2024/25   |
| Corporate Finance / HR             | ITrent - Expense Module              | 15  | Module has not gone live.<br>Roll forward into 2024/25  |
| Corporate Finance / HR             | Automated Absence Pay                | 15  | Module only just t gone live.<br>Roll forward into 2024/25  |
| Children and Young People          | Recruitment Process                  | 15  | New on-boarding system only just gone live. Not enough data to undertake adequate testing yet.<br>Roll forward into 2024/25   |
| Corporate Core - Finance           | Cash Handling and Banking Activities | 15  | Majority of petty cash imprests were removed and online payments are encouraged therefore minimal cash handling now undertaken.<br>Monitor cash handling and consider for inclusion in 2024/25 plan |
| Business Growth and Infrastructure | Estates Property Management          | 15  | Some areas of duplication with ongoing Rental Collections from Commercial Tenants. Additionally, second follow up currently ongoing.<br>Defer until 2024/25   |
| Total Days to be removed           |                                      | 120 |   |

There have been two management requests for work to be undertaken before the end of the financial year, and these are: -

- Starters and leavers and control of establishment
- Assurance of Six Town Housing HR data to be transferred to the Council

These requests should be met from the contingency already built into the audit plan.

## 2.2 Audit Plan Progress

This report details the outcome of reviews undertaken, including work reported to Audit Committee in this period, work currently ongoing and draft reports which have been issued to Audit clients.

### Audits completed and Reports Issued.

..

- 2.2.1 Fourteen audits have been finalised and issued since commencement of the current financial year, Eight of these reports were considered in formulating the annual opinion of the Head of Fraud, Audit, Insurance and Risk, and reflected in the Annual

Governance Statement for 2022/23 and will not be carried forward and reflected in the opinion for 2023/24.

Full reports have been provided to Committee Members for each of these reviews.

- 2.2.2 The Table below summarises the two audits that have been finalised and issued since Audit Committee last met in October 2023, and the corresponding number of agreed actions and overall level of assurance provided for each of those audits. These reports will be considered when formulating the annual opinion of the Head of Fraud, Audit, Insurance and Risk which will be reflected in the Annual governance Statement for 2023/24.

Table 1: Final Reports Issued during period 1<sup>st</sup> October 2023 to 17<sup>th</sup> November 2023 2023/24

| Audit               | Number of agreed actions and priority |             |                  |       | Level of Assurance |
|---------------------|---------------------------------------|-------------|------------------|-------|--------------------|
|                     | Fundamental                           | Significant | Merits Attention | Total |                    |
| <b>Bury Council</b> |                                       |             |                  |       |                    |
| CCTV                | 0                                     | 0           | 0                | 0     | Full               |
| Fleet Management    | 3                                     | 0           | 1                | 4     | Limited            |
| Total               | 3                                     | 0           | 1                | 4     |                    |

Summary reports detailing the overall opinion, the findings, recommendations, and action plans of these reviews, are also presented in part B of the Audit Committee meeting. The summary reports are exempt from publication as they may contain information which is likely to reveal the identity of an individual or information relating to the financial or business affairs of any particular person (including the Authority).

- 2.2.3 Any level of assurance given to each audit is a balanced judgement based upon the established system of controls, the subject's approach to risk management and the nature of any recommendations and actions agreed. (See appendix B for explanations of the various levels of assurance).

Actions are classified over the categories of Fundamental, Significant and Merits Attention. See appendix B for explanations of the various levels of priority.

- 2.2.4 The agreed actions are designed to improve the control environment and / or improve "value for money" within the client's area of responsibility and we can report that the actions made in this period have been agreed by management.

Our audit reports include an action plan that records the detail of our findings, the agreed action that management intend to take in response to these findings and the timescale to undertake such action. This provides a record that progress can be measured against when we undertake our Post Implementation Reviews or follow up work.

## 2.3 Follow up reviews

All audit reports are subjected to a follow up review by internal audit. For those reports issued with limited assurance, a follow up review is undertaken three months after the

report has been finalised, and for all other reports, a follow up is undertaken after six months. The recommendations which had been graded fundamental or significant are subjected to follow up.

Internal Audit processes have been amended during this year, to support the strengthening of Corporate Governance within the organisation, and a second follow up is now undertaken six weeks after the first follow up, to pick up on any recommendations that have not been implemented or only had partial implementation. Updates will be provided to Audit Committee.

A recommendation tracker has been developed and all fundamental and significant recommendations made and, progress to implement these recommendations, will also be reported to the newly established Corporate Governance Group, which is headed by the Council Monitoring Officer.

There are no plans for a third follow-up process. Any reviews with recommendations which have not been implemented / only partially implemented will then be considered for inclusion in future audit plans for a full audit review.

Twenty first follow up exercises have taken place during the year, three of which, (shown in table 1 below) have been completed since reporting to the last Audit Committee in October 2023.

Three second follow up exercises have been undertaken in the year, all since the last Audit Committee in October 2023 and these are detailed in table 2 below.

Table 1: First Follow Ups Undertaken during 2023/24

| Audit                                  | Number of agreed actions and priorities (fundamental and significant only) |             |  |
|--|--|-------------|--|
|  | Fundamental  | Significant | Follow up number of recs fully implemented |
| STH - Anti Social Behaviour            | 0  | 1           | 0 of 1                                     |
| STH - No Access                        | 3  | 2           | 3 of 5                                     |
| Treasury Management Key Controls 21/22 | 0  | 4           | 3 of 4                                     |

Table 2: Second Follow Ups Undertaken during 2023/24

| Audit                       | Number of agreed actions and priorities (fundamental and significant only) |             |  |
|-----------------------------|--|-------------|--|
|                             | Fundamental  | Significant | Follow up number of recs fully implemented |
| Complaints Procedures - CYP | 0  | 1           | 0 of 1                                     |
| Housing Benefits Key        | 0  | 1           | 0 of 1                                     |

|                       |   |   |        |
|-----------------------|---|---|--------|
| Controls<br>21/22     |   |   |        |
| Contracts<br>Register | 0 | 1 | 0 of 1 |

Further information about follow ups is shared in part B of the meeting on 14<sup>th</sup> December 2023.

Follow up matrices with details taken to address the recommendations made can be provided to Audit Committee Members on request.

## 2.4 Other work

This section details other work completed by the audit team.

### 2.4.1 Assurance work - Ongoing reviews

There are some audits still being finalised from the 2022/23 plan and work has also commenced to deliver the audits detailed in the audit plan for 2023/24. Audits which are currently taking place are: -

#### 2022/23

- Care Planning Permissions

It was reported to October 2023 Committee that it was expected that draft reports for this subject would be completed with a final report being brought to Audit Committee in December 2023. This review is still ongoing. The review has been delayed due to a variety of reasons, including auditor being required to undertake other unplanned works and delays ascertaining system access and gathering information to progress the review. It is expected that this review will be completed with a final report being brought to Audit Committee in March 2024.

#### 2023/24 – Ongoing reviews

- Car Parking Income \*
- Rent Collection from Commercial Tenants \*
- Persona – Payroll
- Persona - Debtors
- STH Right to Buy
- Independent Foster Agency
- School and College Transport
- Department of Work and Pensions – Memorandum of Understanding
- Integrated Community Equipment Stores (ICES)
- Building Stores

2023/24 - allocated to Auditor, preparation work being undertaken

- Persona Property & Building Maintenance
- NNDR
- Substance Misuse Commissioning
- Corporate Health and Safety
- Climate Change

The July 2023 report indicated that for those subjects marked \*, draft reports would be issued to client before Audit Committee met in October 2023. There have been delays progressing these reviews for a variety of reasons, including one auditor providing support to the Insurance section of the FAIR Team, and for one review, delays engaging with the client to commence the review. Unfortunately, continuing delays have meant that these audits are still being progressed.

It is expected that these reviews will have been completed before next Audit Committee meets in March 2024.

It was also reported in July 2023 that three audit reviews, Debtors Key Controls 2022/23, Council Tax Key Controls 2022/23 and Corporate Complaints were being undertaken. These audits have been put on hold and will be completed in quarter 4 of this financial year. A request has been received from the Council monitoring Officer to defer the Complaints review to allow a new process to embed, and for the audit to therefore add more value by testing the controls in the new procedures. The key control audits normally focus on transactions made in the previous financial year, in this case, 2022/23, however as there are many changes currently being made to finance systems and procedures, to address previous audit recommendations, and also due to changes to staffing responsibilities following the Finance Department restructure, the key control reviews have been deferred to quarter 4 and will focus on examining the revised processes using 2023/24 transactions.

#### **2.4.2 Assurance work – Draft reports**

The following reviews have been completed and draft reports have been issued to client:-

- Six Town Housing – Debtor Invoice Processing
- Six Town Housing – Arrears Prevention
- Persona – Creditors

It is expected that final reports will have been issued to client and Audit Committee Members before Audit Committee meets in March 2024.

#### **2.4.3 Grants**

The following grants have been reviewed during the current financial year so far:

- Bus Operators Grant for 2022/23
- Changing Places Fund Grant

#### **2.4.4 Information Governance and Data / Digital**

Internal Audit provide advice and consultative support to the Council's arrangements for information governance and its continued response to the Information Commissioners Office (ICO) inspection of June 2021. An IG Delivery Group has been established and Internal Audit are represented on this group.

#### **2.4.5 Supporting Transformation and Change**

The Internal Audit Plan includes a provision of days to be made available to support services throughout the year by providing consultancy advice or independent assurance as / when our input is appropriate.

Advice since last Committee in October 2023:-

- Work is undertaken with Registrars on a monthly basis to securely destroy any spoilt certificates.

#### **2.5 Investigations / Fraud / Whistleblowing**

The team continues to be available to support the business with internal investigations providing technical skills and advice when called upon and managing the whistleblowing hotline / online referrals.

Details of investigations are reported separately to Audit Committee in part B of the meeting.

##### **National Fraud Initiative**

The Council is required to take part in the mandatory exercise which is undertaken every two years. Data extracts from a variety of financial systems are submitted to the Cabinet Office, where the information is cross checked to similar information from other organisations. Data was extracted on 30<sup>th</sup> September 2022 and results were released for checking in January 2023. The results are being checked by Housing Benefits staff and also by members of the Fraud Team.

A total of 4,429 potential matches were identified during the matching exercise, and these are being worked through. A total of 3,1762 matches have been progressed and no frauds have yet been identified. 337 errors have been identified, and a sum of £20,585.15 is in the process of being recovered. Additionally, projected future savings to date, i.e. savings which potentially will be made by updating records from information identified in NFI matches, are £222,148.50

##### **Anti-fraud and corruption policy and strategy**

Internal Audit are responsible for updating of the Council anti-fraud and corruption policy and strategy which incorporates the whistleblowing policy.

This strategy was very detailed and covered a variety of topics: -

- Whistleblowing Policy
- Housing Benefit / Council Tax Benefit – Fraud Prosecution Policy

- Standards of Conduct (Local Government Act 2000 PART III)
- Guidance for Members and Officers on how to report suspected fraud and corruption.
- Local Code of Corporate Governance
- Anti-Money laundering Guidance
- Anti-Bribery Policy

Work has been undertaken to review the documents. All documents have been reviewed and approved by Audit Committee during 2023/24. Five separate documents have been produced:

- Bury Anti -Fraud and Corruption Strategy
- Bury Fraud and Corruption Prosecution Policy
- Bury Council Whistleblowing Policy
- Bury Council Anti-Money Laundering Policy
- Butry Council Anti-Bribery Policy

The new policies have been placed on the Council intranet and internet pages and a communication has been sent to all staff via sharepoint to make them aware of the new policies. Training awareness of the Whistleblowing Policy is to be provided to Senior Managers in February 2024.

## **2.6 School Audits**

In recent years individual School Audits have not been incorporated in the annual audit plan, they were, replaced with thematic reviews of areas which were covered in the school audit reviews.

For 2023/24 the annual plan includes a mix of thematic reviews, and individual school reviews. The audit team have consulted with colleagues from Childrens Services and have developed a school audit plan to be delivered during 2023/24. Request have been made for 10 school reviews to be undertaken. This has been provisionally agreed but caveated that the time taken to complete reviews will be monitored and there may be a need to take uncompleted reviews forward into the 2024/25 financial year. Our first two schools audit visits are to commence in December 2023.

In addition, arrangements remain in place that Internal Audit will undertake School Audits on requests received, during the year, from the Executive Director of Children's Services and / or Executive Director of Finance, where it is thought an audit review would be beneficial to the School and the Council.

A Schools Assurance Group has also been established within the Council and Internal Audit are represented on this group, providing advice to the group on specific issues which may arise at schools.

### School funds

In previous years, Internal Audit offered a service to audit school voluntary funds, on receipt of requests from individual schools. This work did generate a small amount of income.

School voluntary funds do not belong to the Council, and to allow the audit resources to be used for undertaking significant reviews for the Council, this

service is not currently offered to schools. However, arrangements are in place that if the Director of Children's Services / Executive Director of Finance had concerns regarding a school voluntary fund, then an audit review would be undertaken.

## **2.7 Collaboration**

We have ongoing representation on sub-groups of the Northwest Heads of Internal Audit Group. The groups have been established to share good practice across the region.

- Contract Audit Group
- IT Audit Group
- Schools Audit Group.
- Fraud Group (attended by members of the Counter-Fraud Team, information shared with Internal Audit)

## **2.8 Resources – Requests for Additional Work / Staffing / Deferral of ongoing work**

### **2.8.1. Staffing**

In 2022/23, following a restructure within the Finance Department, a number of vacancies became available on the Internal Audit Team. From 5<sup>th</sup> June 2023, all vacancies on the team have been filled. The Audit Team falls under the portfolio of the Head of Fraud Audit, Insurance and Risk, and comprises two Senior Auditors, and three auditors (one of which is part time).

Since the resources for the 2023/24 plan were calculated, changes need to be made due to: -

- One auditor has been recruited on a reduced hours arrangement.
- Since the beginning of the financial year, staff have purchased additional annual leave, which in addition to enhancing their own work life balance, also attracts a financial saving for the Council.
- A member of the internal audit team having to be seconded over for 1 to 2 days per week to provide help within the insurance team to maintain stability due to vacancies and a long-term sickness.
- Since the Audit Committee met in July 2023, work took place examining the annual key controls for eight finance systems. Approximately 40 days were spent on this work and the work has now been put on hold until quarter 4, for reasons explained in 2.4.1 of this report.
- Some completed audits have exceeded their allocated days, and the follow up process now undertakes more detailed testing and the second follow up process has been introduced.
- A member of the internal audit team, since September 2023, is now studying to complete their Association Accounting Technicians (AAT) - Level 2 certificate via day release. This will approximately equate to 25 days for the period September 2023 to the end of March 2024.
- As at the end of period 8 it has been identified that the training allocation and general office duties allocations have now been overspent by a total of 53 days. Reasons for this overspend are:



- Training allocation has been used for new auditors to undertake the mandatory training modules, and inexperienced auditors to shadow experienced auditors within new areas, learning how to access the various systems that Bury Council uses and apply this knowledge to the audits that they have been allocated.

The total number of days which may need to be removed from the plan are approximately 125. A list of audits which have been earmarked for removing from the 2024/25 plan and to be carried forward into the 2024/25 plan are shown at paragraph 2.1 of this report. This list totals 120 days. The full 125 has not been identified at this point as potentially remaining audits in the plan may be undertaken in fewer days than expected and there is also scope to use unused days from contingencies already built into the plan, e.g. management requests, investigations, work for GMCA (Greater Manchester Combined Authority) There is also scope to reduce the days which have been earmarked for service improvement and Council wide work such as assurance mapping. The progress against the current plan will continue to be monitored and any further proposed revisions will be brought to Audit Committee in March 2024.

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### **Links with the Corporate Priorities:**

*Please summarise how this links to the Let's Do It Strategy.*

- Internal Audit undertakes assurance work to all Departmental Directors and Statutory Officers regarding the systems in place, making recommendations for improvements to control and protect the assets and resources of the Council. The control and mitigation of the loss of funds gives the assurance that public money is used in an appropriate manner to deliver the Corporate Priorities.

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### **Equality Impact and Considerations:**

Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to -

- (a) eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited by or under this Act.
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.

Internal Audit provide assurance to Committee Members and the public that the organisation is delivering services in line with agreed policies and procedures which have considered the requirements of the Equality Act 2010.

**Environmental Impact and Considerations:**

*Please provide an explanation of the carbon impact of this decision.*

- N/a – no decision required.

**Assessment and Mitigation of Risk:**

| Risk / opportunity  | Mitigation   |
|---|--|
| Risks are highlighted in Audit Plans and in the terms of reference for each Audit review. | Internal Controls are reviewed in each audit to mitigate identified risks. Actions are reported to managers and progress is monitored and reported on a regular basis. |

**Legal Implications:**

- The Council must have a sound system of internal control which facilitates the effective exercise of its functions, including risk management. This is both a legal requirement and a requirement of the Financial Regulations set out in the Council’s Constitution. This report provides information on the work of the Council’s Internal Audit Service, in ensuring compliance.

**Financial Implications:**

- There are no financial implications arising from this report. The work of the Internal Audit Service however supports the governance framework.

**Background papers:**

- Internal Audit Plan 2023/24
- Internal Audit Reports issued throughout the course of the year.

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

| Term | Meaning                               |
|------|---------------------------------------|
| GMCA | Greater Manchester Combined Authority |
|      |                                       |

## **Annex 1 Internal Audit Plan 2023/24**

Updated to show position as at end of November 2023

| CORPORATE GOVERNANCE AND RISK |                       |  |   |                 |                 |   |
|-------------------------------|-----------------------|--|---|-----------------|-----------------|---|
| Directorate                   | Topic                 | Potential Control / Governance Issue   | Proposed Audit Coverage   | Indicative Days | Proposed Timing | Comments  |
| Corporate Core                | Complaints Procedures | Failure to comply with Council policy and regulations, potential for reputational damage should a complaint be taken to the Ombudsman. | Review of system for receiving and dealing with complaints.   | 15              | QTR 1           | Roll forward from 22/23<br><br>Deferred to Q4 23/24 on request of Director of Law and Democratic Services |
| Corporate Core                | FOI /Subject access   | Failure to comply with Council policy and regulations, potential for reputational damage should a complaint be taken to the Ombudsman. | Review of system for receiving and dealing with FOI / SAR requests. Specific request to focus testing on Childrens' Services. | 15              | QTR 2           | Roll forward from 22/23   |

| Directorate    | Topic             | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments  |
|----------------|-------------------|--|--|-----------------|-----------------|---|
| Corporate Core | ROPA              | Failure to comply with Council policy and regulations, potential for reputational damage should the Council fail an ICO inspection.  | Review of the processes in place to ensure that the Register of Processing Activities is collated and maintained up to date.                                 | 10              | QTR 4           | Risk Register   |
| Corporate Core | Health and Safety | Potential damage to health / wellbeing or loss of life which may result in claims, reputational damage, litigation or corporate manslaughter / Failure to comply with Council policy and regulations, potential for reputational damage should the Council fail a HSE inspection | Review of Health and Safety at Corporate level - CPFA matrix<br><br>Review processes in place for the recording and reporting of Health and Safety incidents | 20              | QTR 2           | Previous audit - Limited Assurance<br><br><a href="#">Allocated to Auditor, preparation work being undertaken</a> |

| Directorate | Topic             | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments   |
|-------------|-------------------|--|--|-----------------|-----------------|--|
| Operations  | Health and Safety | Potential damage to health / wellbeing or loss of life which may result in claims, reputational damage, litigation or corporate manslaughter | Review of Health and Safety arrangements within Operational Services, including the identification of services provided, the risk assessments in place action to address any remedial action identified. | 15              | QTR 4           | Originally planned as a roll forward from 22/23, however HSE enquiries ongoing so allocation to be used for follow up of implementation of recommendation from HSE review. |

| Financial / HR Systems   |                                |  |  |                 |                 |  |
|--------------------------|--------------------------------|--|--|-----------------|-----------------|--|
| Directorate              | Topic                          | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments   |
| Corporate Core - Finance | Finance Systems - key controls | Errors and omissions resulting in weaknesses in the integrity of financial data and statements | Routine annual review of high-level controls within the key finance systems, retrospective review looking at transactions in 2022/23, to support closure of accounts process:<br>Council Tax<br>NNDR<br>Housing Benefits<br>Treasury Management<br>Payroll<br>Creditors<br>Main Accounting<br>Debtors<br>Cash Collection and Banking | 88              | QTR 1 to 4      | Annual work required to support statement of accounts<br><br><u>Reviews completed: -</u><br><br>Housing Benefits<br><br><u>Other reviews deferred to Q4:</u> <ul style="list-style-type: none"> <li>• Debtors</li> <li>• Creditors</li> <li>• Council Tax</li> <li>• Main Accounting</li> <li>• Treasury Management</li> <li>• Payroll</li> <li>• Cash Collection and Banking#</li> </ul><br>NNDR key controls will not be assessed but subject to a full system review. |

| Directorate              | Topic                     | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing               | Comments  |
|--------------------------|---------------------------|--|--|-----------------|-------------------------------|---|
| Corporate Core - Finance | Budgetary Control         | Failure to identify budget variances promptly and take corrective action.                | Routine review of the Council's approach to budget development, monitoring/ forecasting and taking action to address significant variances.                | 15              | QTR2                          | Roll forward from 22/23<br><br>Corporate Core Accountancy team are undertaking a zero-based budget exercise across the organisation and, additionally Finance Improvement Panel are scrutinising Council Financial position.<br>Potential for review to be removed from plan.<br><br>December Committee – proposal to remove from plan. |
| Corporate Core - Finance | National Fraud Initiative | Statutory requirements are not complied with   | Manage and co-ordinate the NFI including additional checks on data matches where appropriate.  | 15              | Ongoing through -out the year | Annual work.<br><br>In progress   |
| Corporate Core - Finance | NNDR                      | Failure to collect NNDR promptly, and failure to apply Business Rates Relief accurately. | Systems review of the processes in place for the billing and collection of National Non-Domestic Rates, including the application of Business Rates Relief | 15              | QTR 2                         | Audit knowledge<br><br>Allocated to Auditor, preparation work being undertaken  |



|                          |   |   |  |                 |                 |  |
|--------------------------|---|---|--|-----------------|-----------------|--|
| Corporate Core – Finance | Insurance   | Failure to process insurance claims promptly                          | Review the process in place for the administration of Insurance claims   | 15              | QTR 2           | Request from client<br><br>December Committee – proposal to defer to 2024/25   |
| Directorate              | Topic   | Potential Control / Governance Issue                                  | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments   |
| Corporate Core - Finance | Capital Programme                                       | Failure to meet corporate objectives and ineffective use of resources | Evaluate the governance, processes and controls, supporting key capital projects and ensure compliance with procurement rules and regulations  | 15              | QTR 3           | Risk Register  |
| Corporate Finance/HR.    | iTrent - Payroll – Additional hours / overtime payments | Failure to respond effectively and efficiently to any major incident. | Review arrangements to manage and process timekeeping and overtime effectively as the self-serve module is introduced in iTrent. Cover all directorates, and report to each Executive Director with results of findings. | 15              | QTR 1           | 2022/23 looked at Operations, select another department for review.<br><br>December Committee – proposal to defer to 2024/25 |

|                        |                          |  |  |                 |                 |  |
|------------------------|--------------------------|--|--|-----------------|-----------------|--|
| Corporate Finance / HR | iTrent – Expenses Module | Inaccurate / fraudulent claims for expenses may be made.   | Review the processes in place for the submission, authorisation and payment of employee’s expenses.  | 15              | QTR 4           | Request from client<br><br>December Committee – proposal to defer to 2024/25     |
| Directorate            | Topic                    | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments   |
| Corporate Finance/HR   | Automated Absence Pay    | Absence not identified and inaccurate calculations of absence pay  | Review the processes in place for the calculation of absence pay   | 15              | QTR 3           | Request from client<br><br>December Committee – proposal to defer to 2024/25     |
| Children’s Services    | Recruitment Process      | Failure to undertake robust pre-employment checks (right to work in the UK etc.) which may result in reputational damage or financial penalties. | Review of recruitment process – including assurance over the design and operation of the recruitment process including:<br>1. completeness and timeliness of pre-employment checks<br>2. completeness, accuracy and timeliness of adding new employees to the payroll<br>3. monitoring by HR of compliance with pre-employment and recruitment processes | 15              | QTR 3           | Roll forward from 22/23<br><br>December Committee – proposal to defer to 2024/25 |

|             |                            |   | 4. an appropriate division of duties is enforced by the system.  |                 |                 |                     |
|-------------|----------------------------|---|--|-----------------|-----------------|---------------------|
| Directorate | Topic                      | Potential Control / Governance Issue  | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments            |
| Operations  | Procurement of Contractors | Failure to comply with contract procedure rules, and failure to have adequate systems in place, could result in financial loss and additionally in reputational damage should complaints / allegations be received. | Review of processes in place for the selection of contractors, the award of works and subsequent payments. | 15              | QTR 2           | Request from client |

| Grants and Verification   |                              |  |  |                 |                            |  |
|---------------------------|------------------------------|--|--|-----------------|----------------------------|--|
| Directorate               | Topic                        | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing            | Comments   |
| Corporate Finance         | Grant Claims                 | Failure to comply with grant arrangements.   | <p>Certification of those grant claims required to be certified by the Council's Head of Internal Audit.</p> <p>Anticipated during 2023/24:<br/>Public Sector<br/>Decarbonisation Scheme<br/>Bus Operator Grant<br/>Pothole Grant<br/>Universal Drug Treatment Grant</p> | 15              | QTR 1 to QTR 4             | <p>Annual work</p> <ul style="list-style-type: none"> <li>• Bus Operators Grant 2022/23</li> <li>• Changing places Fund Grant</li> </ul> |
| Children and Young People | GM Supporting Families (TFG) | Failure to comply with grant requirements and failure to deliver programme objectives. | Routine annual review. GMCA have been granted devolved powers over the programme and are collaborating to develop a more traditional / risk- based approach to the annual  | 10              | QTR3/4 (in line with GMCA) | Annual work for GMCA   |

|                |       |  | assurance work. Reviews to be undertaken once / twice a year as directed by GMCA and the devolution agreement. |                 |                 |   |
|----------------|-------|--|--|-----------------|-----------------|---|
| SERVICE AREAS  |       |  |  |                 |                 |   |
| Directorate    | Topic | Potential Control / Governance Issue   | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments  |
| Corporate Core | CCTV  | Failure to adhere to the agreement and follow the CCTV Code of Practice could impact on the Council's reputation and reliance placed on the CCTV function in supporting other agencies and community safety. | Annual review as required by CCTV agreement.   | 5               | QTR 2           | Annual review<br><br>Audit complete – report issued |

| Directorate              | Topic                                | Potential Control / Governance Issue  | Proposed Audit Coverage  | Indicative Days | Proposed Timing | Comments  |
|--------------------------|--------------------------------------|---|--|-----------------|-----------------|---|
| Corporate Core           | Members Delegated Funds              | Loss of accountability, lack of corporate ownership of decision making and possible failure to deliver the expected level of services to residents. | Routine review to focus on the transparency and compliance of the arrangements in place for administration of payments to Members.                               | 5               | QTR 4           | Previous audit – limited assurance  |
| Corporate Core – Finance | Cash handling and banking activities | Cash is not handled in a secure manner. Inappropriate reimbursements of expenditure are made.   | Review of the processes for reimbursement of petty cash claims, and for the handling of cash and associated banking activities within the Business Support Unit. | 15              | QTR 3           | Request from client<br><a href="#">December Committee – proposal to defer to 2024/25</a>  |
| Operations               | Stores                               | Weaknesses in the control of assets and stock may result in   | Review the arrangements to manage the assets held at the Stores based at Bradley Fold depot.   | 15              | QTR 2           | Transport Stores undertaken in 2022/23, look at Building Stores in 2023/24<br>Auditor knowledge<br><a href="#">Review in progress</a> |

| Directorate | Topic                                   | Potential Control / Governance Issue   | Proposed Audit Coverage   | Indicative Days | Proposed Timing | Comments  |
|-------------|---|--|---|-----------------|-----------------|---|
| BGI         | Estates Property Management             | Inaccurate information may be held in the financial accounts and income due may not be collected | Review the management arrangements over the rental estates portfolio to ensure that adequate records are maintained, income due is collected promptly and valuations are regularly undertaken and updated in the Councils accounts. | 15              | QTR 4           | Previous audit – Limited Assurance<br><br>December Committee – proposal to defer to 2024/25 |
| BGI         | Rent collection from Commercial Tenants | Failure to achieve objectives due to inappropriate or ineffective use of fund                    | Evaluate the processes and controls over the management of commercial and investment properties to ensure an appropriate return is being generated from the assets and properly accounted for.                                      | 15              | QTR 1           | Risk Register<br><br>Review in progress   |

|                           |                                 |  |   |                 |                 |   |
|---------------------------|---------------------------------|--|---|-----------------|-----------------|---|
| Operations                | Waste Management                | Inadequate arrangements in place for the provision of waste services.  | Review the management and contractual arrangements in place for the delivery of the Waste Management Service.   | 15              | QTR 4           | Request from Monitoring Officer                               |
| Directorate               | Topic                           | Potential Control / Governance Issue   | Proposed Audit Coverage   | Indicative Days | Proposed Timing | Comments  |
| Children and Young People | Independent Foster Agency (IFA) | Inability to place “looked after children” with suitable families or promptly as the need arises.  | Review of the use of IFA’s, including the controls in place to help ensure cost effectiveness and manage quality and quantity of placements.  | 15              | QTR 2           | Roll forward from 22/23<br><a href="#">Review in progress</a> |
| Children and Young People | Care Packages                   | Failure to comply with Council policy and legislation when procuring goods / services / administering contracts with suppliers. Best value may not be achieved, and high-cost care packages may not be challenged. | A review of the process for the calculation and award of care packages for vulnerable children, and the billing and payment processes around care processes to provide assurance that financial risks are mitigated. Review the arrangements in place for ongoing reviews of care packages, to ensure they are still appropriate and consider the financial | 15              | QTR3            | Roll forward from 22/23                                       |



|                           |                              |   | controls in particular authorisation for changes to rates and providers. Determine if any benchmarking processes are in place and review. |                 |                 |  |
|---------------------------|------------------------------|---|---|-----------------|-----------------|--|
| Directorate               | Topic                        | Potential Control / Governance Issue  | Proposed Audit Coverage   | Indicative Days | Proposed Timing | Comments   |
| Children and Young People | Schools                      | Appropriate financial and operational control is not maintained over school funds.          | Provision for undertaking reviews at schools.   | 45              | QTR 1 to QTR 4  | Request from client.<br><br>One review undertaken at request of Childrens Services – Chesham Primary School. Completed – Final report issued.<br>Now agreed a schedule of 10 schools for audit review, caveat, that time spent to be monitored and not all 10 may be deliverable and school reviews may have to roll forward into 2024/25.<br><a href="#">School Audits to December 2023</a> |
| Children and Young People | School and College Transport | Children with special educational needs may be excluded from education as they may not have | Review the management and contractual arrangements over SEN transport to ensure outcomes for service users are achieved and risks to      | 15              | QTR 2           | Roll forward from 22/23<br><br><a href="#">Review in progress</a>  |

|                                |                                       |  |   |                 |                 |  |
|--------------------------------|---------------------------------------|--|---|-----------------|-----------------|--|
|                                |                                       | any available transport or other support to enable them to be able to travel to and from school.                                   | the service users and the Council are mitigated. Ensure VFM is received by planning routes and consider the make use of shared transport. |                 |                 |  |
| One Commissioning Organisation | Integrated Community Equipment Stores | Weaknesses in the control of assets and stock may result in losses / increased costs.  | Review the arrangements to manage the assets (equipment) and stock of care equipment.   | 15              | QTR 2           | Previous audit – Limited Assurance   |
| Directorate                    | Topic                                 | Potential Control / Governance Issue   | Proposed Audit Coverage   | Indicative Days | Proposed Timing | Comments   |
| One Commissioning Organisation | Substance Misuse Commissioning        | Inappropriate procurement processes in place. Contract procedure rules and legislation not followed. Value for money not obtained. | Review the arrangements in place for the procurement of goods / services related to the prevention of Substance Misuse.                   | 15              | QTR 2           | Request from client<br><br>Allocated to Auditor, preparation work being undertaken |

|             |                     |   |   |                 |                 |   |
|-------------|---------------------|---|---|-----------------|-----------------|---|
| Operations  | Fleet Management    | Vehicles and plant equipment may not be maintained appropriately and may also be mis-used / mis-appropriated  | Review to assess the maintenance and security of the vehicle and plant equipment and the arrangements in place to ensure that all items can be accounted for.                                   | 15              | QTR 1           | Roll forward from 22/23<br><br>Audit complete – report issued |
| Operations  | Car Parking Income  | Income due may not be collected, affecting cash flow of the Council. Additionally, errors and omissions resulting in weaknesses in the integrity of financial data and statements | Review the processes in place to ensure that income due to the service is collected in line with any agreements in place, and that the income is collected and posted to the accounts promptly. | 15              | QTR 1           | Roll forward from 22/23<br><br>Review in progress             |
| Directorate | Topic               | Potential Control / Governance Issue  | Proposed Audit Coverage   | Indicative Days | Proposed Timing | Comments  |
| Operations  | Highways - Potholes | Failure to meet corporate objectives and ineffective use of resources   | Evaluate the governance and controls over the use of funds provided to improve highways across the Borough.   | 15              | QTR 3           | Request from Monitoring Officer                               |

|                                    |                       |  |   |                        |                        |  |
|------------------------------------|-----------------------|--|---|------------------------|------------------------|--|
| Operations                         | Climate Change        | Due to the Global increase in energy prices, there will be significant increases in gas and electricity costs for 2023/24. | Review processes in place for the monitoring and targeted reduction of energy costs, including energy audits, building conditions surveys, and rationalisation of the estate.   | 15                     | QTR 2                  | Roll forward from 22/23<br><br>Allocated to Auditor, preparation work being undertaken |
| <b>CONTRACTS</b>                   |                       |  |   |                        |                        |  |
| <b>Directorate</b>                 | <b>Topic</b>          | <b>Potential Control / Governance Issue</b>  | <b>Proposed Audit Coverage</b>  | <b>Indicative Days</b> | <b>Proposed Timing</b> | <b>Comments</b>  |
| Business Growth and Infrastructure | Regeneration Projects | Failure to comply with Council policy and legislation  | Identify regeneration projects that have / are taking place. Review a project to ensure that best practice was followed, considering project initiation, procurement of works, ongoing monitoring, and administration of payments, record keeping and post project implementation review. | 15                     | QTR 3                  | Roll forward from 22/23  |

| SUPPORT / SYSTEMS IMPLEMENTATION |        |  |   |                 |                          |  |
|----------------------------------|--------|--|---|-----------------|--------------------------|--|
| Directorate                      | Topic  | Potential Control / Governance Issue   | Proposed Audit Coverage                     | Indicative Days | Proposed Timing          | Comments   |
| Corporate Core – Finance         | iTrent | Failure to adequately secure systems could result in a data breach, loss of service / downtime and loss of data. | Provision to support system implementation. | 5               | Ongoing through the year | Annual Provision - Advice to be given as and when requested. |
|                                  |        |  | TOTAL                                       | 623             |                          |  |

| OTHER COMMITMENTS   |                        |  |
|---|------------------------|--|
| <i>Activity</i>   | <i>Indicative Days</i> | <i>Comments</i>  |
| <b>Completion of audits commenced in previous years:</b><br><u>2021/22</u><br><b>Housing Development Programme</b><br><b>Highways Maintenance</b><br><u>2022/23</u><br><b>Home Care</b><br><b>Care Planning Permissions</b><br><b>Six Town Housing Invoice Processing</b> | 35                     | Complete – Final report issued<br>Complete - Final report issued to Members<br><br>Complete – Final report issued<br>Review in progress<br>Draft report issued to client – awaiting response   |
| <b>Audit work for Six Town Housing (STH) and Persona (separate audit plans)</b>   | 56                     | STH 36 – separate plan agreed with Six Town Housing Audit Committee – 3 audit reviews: <ul style="list-style-type: none"> <li>• Right to Buy – Review in progress</li> <li>• Procurement</li> <li>• Housing Rents Key Controls 2023/24 – moved to Q4.</li> </ul> Also, complete two reviews outstanding from 2022/23 <ul style="list-style-type: none"> <li>• Invoice Processing – Draft report issued to client.</li> </ul> |

|  |    |   |
|--|----|---|
|  |    | <ul style="list-style-type: none"> <li>• Arrears Prevention – Draft report issued to client and undertake 6 follow up exercises to reports issued in 2022/23.</li> </ul> <p>Provision for Persona 20 – plan now agreed with Persona:-</p> <ul style="list-style-type: none"> <li>• Debtors – Review in progress</li> <li>• Creditors – Draft report issued</li> <li>• Payroll – Review in progress</li> <li>• Property – Leasing and Building Maintenance – Allocated to Auditor, preparation work being undertaken</li> <li>• Also, act as a critical friend to support Persona as they review their own processes of Supported Living.</li> </ul> |
| <b>Post Implementation Reviews and Action Tracking</b> | 35 | <p>Following up limited assurance reviews in more depth – so increased provision from 22/23 to allow for additional testing.</p> <p><u>Follow ups completed quarter 1:-</u></p> <ul style="list-style-type: none"> <li>• Petty cash – Choices for Living Well</li> <li>• Leisure Centres Income review</li> <li>• Taxi Licencing</li> <li>• CCTV</li> <li>• Adoption Services</li> <li>• STH Fire Safety</li> <li>• Pooled budgets</li> </ul>   |

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|  |  | <p><u>Follow ups completed quarter 2:-</u></p> <ul style="list-style-type: none"><li>• Complaints Procedures – Childrens Services</li><li>• Contracts Register</li><li>• STH – Anti-Social Behaviour -since Oct</li><li>• Debtors Key Controls 21/22</li><li>• Housing Benefit Key Controls 21/22</li><li>• NNDR Key Controls 21/22</li><li>• STH – No Access</li><li>• Council Tax Key Controls 21/22</li><li>• Main Accounting Key Controls 21/22</li><li>• Transport Stores</li></ul> <p>Follow ups completed since October 2023 Committee</p> <ul style="list-style-type: none"><li>• STH Anti-Social Behaviour</li><li>• STH No Access</li><li>• Treasury Management Key Controls</li></ul> <p>Second follow ups completed since October 2023 Committee</p> <ul style="list-style-type: none"><li>• Complaints Procedures CYP</li><li>• Housing Benefits Key Controls 21/22</li><li>• Contracts Register</li></ul> <p><u>First Follow ups currently in progress:</u></p> <ul style="list-style-type: none"><li>• STH – Hoarders</li><li>• Cash and Bank Key Controls 21/22</li><li>• Creditors Key Controls 21/22</li></ul> |
|--|--|--|



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|---|----|--|
|   |    | <ul style="list-style-type: none"> <li>• STH – Procurement &amp; Delivery of Capital Programme</li> <li>• STH – Whistleblowing Allegations</li> <li>• CBRE</li> <li>• Housing Rents Key Controls (21/22)</li> <li>• Adoption Services</li> <li>• Payroll Key Controls (21/22)</li> <li>• Additional Hours and Overtime</li> <li>• Highways and Footway Maintenance</li> </ul> <p>Second follow ups currently in Progress</p> <ul style="list-style-type: none"> <li>• Transport Stores</li> <li>• Council Tax Key Controls 21/22</li> <li>• Main Accounting key controls</li> <li>• STH Anti-Social Behaviour</li> <li>• STH No Access</li> <li>• NNDR Key Controls 21/22</li> <li>• Debtors Key Controls 21/22</li> </ul> |
| <b>Contingency for GMCA Collaboration / reactive GM assurance work</b>  | 5  | PSIAS Reviews to be undertaken at two North West Councils.   |
| <b>Contingency for Investigations and supporting the council's counter fraud strategy, including revision of whistleblowing policy.</b> | 60 | Provision increased from 22/23.<br><br>Whistleblowing case investigated and report prepared.   |

|  |     |   |
|--|-----|---|
| <b>Contingency for reactive or unplanned work, management request, consultancy work</b>  | 64  | <ul style="list-style-type: none"> <li>• Starters and leavers and control of establishment</li> <li>• Assurance of Six Town Housing HR data to be transferred to the Council</li> </ul>   |
| <b>Audit Service Management and administration, including service development, assurance mapping, Quality Assurance and Improvement Programme, Internal Audit Charter and Strategy, (QAIP), anti-fraud and corruption strategy, audit planning and Committee's support</b> | 155 | <p><u>Quarter 1</u></p> <ul style="list-style-type: none"> <li>• Audit server cleansed</li> <li>• Audit working paper package reviewed</li> <li>• Audit timesheet monitoring reviewed and updated to enable easier monitoring of individual projects and reduced duplication of effort.</li> <li>• Developing a recommendation tracker using excel</li> <li>• Commenced review of Anti-fraud and corruption strategy</li> </ul> <p><u>Quarter 2</u></p> <ul style="list-style-type: none"> <li>• Audit server further cleansed and restructured.</li> <li>• Audit working paper package reviewed and a number of administrative processes reduced.</li> <li>• Developed a recommendation tracker using excel.</li> <li>• Introduced a formal file closure process.</li> <li>• Reviewed and amended the follow up process.</li> </ul> <p><u>Continuing work</u></p> <ul style="list-style-type: none"> <li>• Ongoing work to Registrars re destruction of spoilt certificates</li> </ul> |

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|--|------------|--|
|  |            |  |
| <b>Provisions for annual leave / training / sickness</b>                               | 284        | Increased from 2021.22 – to reflect appointments to vacant posts   |
| <b>Provision of ICT review – by Salford Computer Audit Services (System Licencing)</b> | 20         | Two reviews planned – to be undertaken September 2023 <ul style="list-style-type: none"> <li>IT Asset Management – engagement process starter – Auditors due on site in October 2023. <a href="#">Audit review has commenced, site visits planned for January 2024</a></li> <li>Software Licensing – planned for Q3 or early Q4</li> </ul> |
| Total:   | 714        |  |
| Combined Total:  | 1337       |  |
| Audit days to be delivered   | <b>898</b> | (Exclude 155+284)  |

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**Explanation of Opinion ratings:**

| Overall Opinion    | Explanation   |
|--------------------|---|
| <b>Full</b>        | The framework of governance, risk management and control is adequate and effective.   |
| <b>Substantial</b> | Some improvements are required to enhance the adequacy and effectiveness of governance, risk management and control.  |
| <b>Moderate</b>    | There are significant weaknesses in the framework of governance, risk, management and control such that it could be or could become inadequate and ineffective. |
| <b>Limited</b>     | There are fundamental weaknesses in the framework of governance, risk management and control such that it is inadequate and ineffective or is likely to fail.   |

**Explanation of Recommendation ratings:**

| Recommendation          | Explanation  |
|-------------------------|--|
| <b>Fundamental</b>      | Action required to address a fundamental breakdown of control and / or to prevent a serious financial loss.        |
| <b>Significant</b>      | Action required to address a significant control weakness and /or to significantly improve operational efficiency. |
| <b>Merits Attention</b> | Action required to enhance control and / or to improve operational efficiency.                                     |

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