

# Public Document Pack

# Blackpool Council

11 October 2023

To: Councillors Cartmell, Fenlon, Humphreys, Marshall, Roberts, Thomas and Warne  
Mr David Swift, Independent Co-Opted Member

The above members are requested to attend the:

## **AUDIT COMMITTEE**

Thursday, 19 October 2023 at 6.00 pm  
in Committee Room A, Town Hall, Blackpool

## **A G E N D A**

### **1 DECLARATIONS OF INTEREST**

Members are asked to declare any interests in the items under consideration and in doing so state:

(1) the type of interest concerned either a

- (a) personal interest
- (b) prejudicial interest
- (c) disclosable pecuniary interest (DPI)

and

(2) the nature of the interest concerned

If any member requires advice on declarations of interests, they are advised to contact the Head of Democratic Governance in advance of the meeting.

### **2 MINUTES OF THE LAST MEETING HELD ON 14 SEPTEMBER 2023** (Pages 1 - 6)

To agree the minutes of the last meeting of the Audit Committee held on 14 September 2023 as a true and correct record.

### **3 INTERNAL AUDIT FOLLOW-UP - ENERGY MANAGEMENT** (Pages 7 - 16)

To consider a progress report on the recommendations made in the internal audit

report relating to Energy Management issued on the 4 October 2022.

**4 STRATEGIC RISK REGISTER DEEP DIVE - PROJECT/PROGRAMME MANAGEMENT** (Pages 17 - 28)

To consider a progress report on individual risks identified in the Council's Strategic Risk Register in relation to Project/Programme Management.

**5 EXTERNAL AUDIT PLAN 2021/2022** (Pages 29 - 62)

To consider the External Audit Plan 2021-2022.

**6 COVERT SURVEILLANCE POLICY** (Pages 63 - 110)

To consider updates to the Council's Covert Surveillance Policy (formally known as the RIPA Policy) for approval.

**7 CIPFA POSITION STATEMENT ON AUDIT COMMITTEE** (Pages 111 - 120)

To consider the CIPFA Position Statement, which sets out the purpose, model, core functions and membership of the Audit Committee.

**8 AUDIT ACTION TRACKER** (Pages 121 - 122)

To note that the Committee's Action Tracker.

**9 DATE OF NEXT MEETING**

To note the date and time of the next meeting of the Committee as Thursday 23 November 2023, commencing at 6.00pm.

**Venue information:**

First floor meeting room (lift available), accessible toilets (ground floor), no-smoking building.

**Other information:**

For queries regarding this agenda please contact John Greenbank, Democratic Governance Senior Adviser, Tel: 01253 477229, e-mail [john.greenbank@blackpool.gov.uk](mailto:john.greenbank@blackpool.gov.uk)

Copies of agendas and minutes of Council and committee meetings are available on the Council's website at [www.blackpool.gov.uk](http://www.blackpool.gov.uk).

### **Present:**

Councillor Roberts (in the Chair)

Councillors

Cartmell	Humphreys	Thomas
Fenlon	Marshall	Warne

Mr David Swift, Independent Co-Opted Member

### **In Attendance:**

Councillor Paul Galley, Chair of the Scrutiny Leadership Board

Steve Thompson, Director of Resource

Tracy Greenhalgh, Head of Audit and Risk

Paul Jones, Head of Property Services

Vikki Piper, Head of Housing

Lynne Rowbottom, Transport Manager

John Greenbank, Democratic Governance Senior Adviser (Scrutiny)

### **1 DECLARATIONS OF INTEREST**

There were no declarations of interest made on this occasion.

### **2 MINUTES OF THE LAST MEETING HELD ON 27 JULY 2023**

The Committee considered the minutes from the 27 July 2023 meeting.

Mr Steve Thompson, Director of Resources, provided an update on progress to sign off the 2020/2021 Statement of Accounts, highlighted at Item 5 of the minutes. He advised that the clarification requested by the Committee had been undertaken and following further consultation with the Chair and External Auditor it was planned that the accounts would be signed off by the end of September 2023.

**Resolved:** That the minutes of the meeting held on 27 July 2023 be signed by the Chair as a true and correct record.

### **3 INTERNAL AUDIT FOLLOW UP - DRIVING AT WORK**

Ms Lynne Rowbottom, Transport Manager, presented a report on progress against the recommendations made in the internal audit report Driving at Work issued on 31 January 2023. She informed the Committee a number of the recommendations had been successfully completed and that others would be resolved following the launch of the Driving at Work app in October 2023. Ms Tracy Greenhalgh, Head of Audit and Risk, added

## MINUTES OF AUDIT COMMITTEE MEETING - THURSDAY, 14 SEPTEMBER 2023

that the app had been under development for approximately three years and although further a delay in its roll-out due to issues identified by internal audit had been experienced, it was expected that it would be launched on 10 October 2023.

The Committee discussed the Driving at Work handbook, noting that it was reviewed annual to ensure that it was up to date with the latest legal requirements. Ms Rowbottom added that the handbook had been designed to be user friendly and that it was a requirement for all staff who drove at work to be familiar with it. Drivers of the Council's HGVs were required to undergo annual training and testing on the handbook, which was supported by dedicated work books and training sessions.

Private staff vehicles driven as part of officers duties, known as the "grey fleet", remained an area of concern however. The Committee was informed that only 36.6% of staff within the grey fleet were compliant with the Driving at Work policy. Ms Greenhalgh recognised that this was not a good position but stated that the implementation of the new app would assist in improving compliance. Ms Rowbottom added that ensuring that driving documents were up to date was compulsory and that going forward she would be responsible for monitoring compliance and would hold line manager to account for any failings in staff providing documents.

Members highlighted that failure to ensure compliance with the Driving at Work policy represented a serious risk for the Council, noting that the Chief Executive and Council as a body would be legally liable in the event of a serious incident involving a vehicle in the grey fleet. The Committee therefore asked that a follow up report detailing progress against the recommendations made in the internal audit and the level of compliance within the grey fleet following the implementation of the Driving at Work App be provided to a meeting in six-months' time.

The Committee also discussed staff training to ensure compliance following the introduction of the new app. Ms Rowbottom explained that training would commence in the week starting 18 September with members of the Illuminations and Highways team. This training would then progress to ensure that every service within the Council had received Driving at Work training by the end of the 2023/2024 financial year. The training would focus on ensuring compliance with policy.

Ms Greenhalgh also added that the use of the app and sharepoint would allow better monitoring of compliance with policy, which would improve the overall position. However she recognised that the submission of the relevant documents required positive action from members of staff to ensure that their details were up to date.

It was noted that responsible officer for Recommendation 12, which recommended the ongoing review of the Transport Manager's six month review, was shown as the Transport Manager. It was therefore queried this meant that they would be reviewing themselves, Ms Rowbottom responded that Mr John-Paul Lovie, Head of Waste Services, would be responsible for conducting six-monthly reviews and their performance as Transport Manager.

## MINUTES OF AUDIT COMMITTEE MEETING - THURSDAY, 14 SEPTEMBER 2023

**Resolved:** That

1. The report on progress against the recommendations made by the Internal Audit of Driving at Work be noted; and
2. That a follow-up report on progress against outstanding internal audit recommendations and compliance with the driving at work policy within the grey fleet be brought to a meeting of the Committee in six-month's time.

**Ms Rowbottom left the meeting following this item.**

### **4 STRATEGIC RISK REGISTER DEEP DIVE - PROPERTY**

The Committee considered a deep dive into the Strategic Risk "Property" which included the sub-risks (a) Property Failure due to poor maintenance or lack of Inspection Regime and (b) Failure to meet statutory obligations as a significant housing landlord across the town.

#### a) Property Failure due to poor maintenance or lack of Inspection Regime

Mr Steve Thompson, Director of Resources, and Mr Paul Jones, Head of Property Services, presented an update in relation to sub-risk (a). Mr Thompson explained that the Council operated a complex property structure, noted responsibility for Council buildings, wholly-owned companies, schools and housing. He also added that responsibility for management of the sub-risk lay with himself and Mr Jones.

In order to mitigate against the sub-risk and ensure that the Council adhered to all relevant regulation Mr Jones explained that Property Services undertook regular compliance testing. This informed the Council's five-year Condition Plan, information from which was shared with wholly-owned companies (WOCs). While the Council held ultimate responsibility for property operated by WOCs, they maintained a day-to-day responsibility for monitoring compliance and condition. If any issues were identified they would then report back to the Council to ensure that a remedy could be applied.

Challenges in mitigating the sub-risk included increasing material costs making remedial work more expansive. It was recognised that this was national issue. A further challenge was also posed by the ongoing impacts of climate change and the aim to achieve net-zero carbon emissions by 2030, particularly in respect of improving properties energy efficiency. Mr Jones advised that addressing these challenges would require an exploration of new ways of working and new systems of ensuring compliance.

The Committee noted that the Equalities and Sustainability statements contained within the items covering report appeared to be similar and queried if any analysis of either of these areas had been undertaken as part of the deep dive. Ms Tracy Greenhalgh, Head of Audit and Risk, responded that the wording was standard for deep dive covering reports. She added that if Executive of Portfolio Holder decisions were required relating to property, however, analysis of the equalities impact and sustainability considerations would be undertaken and included in related reports and decisions notices. All of which would be available for Councillors to review.

## MINUTES OF AUDIT COMMITTEE MEETING - THURSDAY, 14 SEPTEMBER 2023

Assurance was sought regarding issues in insurance for WOCs with Mr Jones explaining that the Chartered Institute of Public Finance and Accountancy (CIPFA) would be undertaking a review of the Council's housing WOCs and that the outcome of this would influence the approach taken by the Council towards the other companies. He added that the details of the different Service Level Agreement in place with WOCs would also need to be taken into consideration as part of any future work. The Committee was informed that the work by CIPFA would begin in March 2024.

Members raised the national issue of failing Reinforced autoclaved aerated concrete (RAAC) and queried if the use of the material had impacted on the Council's property portfolio. In response Mr Jones reported that RAAC had only been identified in part of one of Blackpool's schools, which had subsequently been partially closed as a safety precaution. No other uses of RAAC had been identified within the Council's portfolio, however Mr Jones also advised that further investigations would take place to confirm that this was the case.

b) Failure to meet statutory obligations as a significant housing landlord across the town.

Ms Vikki Piper, Head of Housing, presented an update in relation to sub-risk (b). She advised that work had been undertaken to prepare Blackpool's social housing stock for the impact of new legislation being prepared by the Government. This work was in response to the publishing of the Social Housing White Paper by the Department of Levelling Up, Housing and Communities (DLUHC) in November 2020. Under the legislation the Council will be responsible as landlord for the housing stock of its WOCs, and be subject to inspections by DLUHC.

The white paper and legislation had been influenced in part due to the death of a child in social housing in Rochdale caused by damp and mould. The Council had therefore been asked to supply data on existing damp and mould cases within Blackpool and the work planned to address them. In addition to this the Council had also commissioned a stock condition survey and CIPFA to review WOCs regarding their compliance with regulations and advise on the level of oversight required by the Council as shareholder. The outcome of the review and CIPFA's recommendations would be present to the Shareholder Committee for consideration.

It was noted that the impact identified in the Net Risk Score for sub-risk (b) was shown as four while the same section for sub-risk (a) showed an impact score of five. Ms Piper explained that this was as a result of the Council being the landlord but not the operator of the property in sub-risk (b), unlike in sub-risk (a).

Members of the Committee highlighted that the new legislation required the Council to have individuals in place holding relevant housing qualifications and asked if the Council had this in place or if new staff would have to be recruited or trained. In response Ms Piper stated that the Council was looking at what existing staffing resources were in place, noting that Blackpool Coastal Housing Ltd had a number of members of staff with the relevant qualification.

## MINUTES OF AUDIT COMMITTEE MEETING - THURSDAY, 14 SEPTEMBER 2023

The impact of the work to ensure compliance with the new legislation was discussed with Ms Piper advising that there would be a cost to both the condition survey and review undertaken by CIPFA. In relation to CIPFA it was expected that this work would cost approximately £70k. She added that going forward there would also be additional costs for inspections to be undertaken.

**Resolved:** That the update be noted.

**Mr Jones and Ms Piper left the meeting following this item.**

### **5 EXTERNAL AUDITOR'S REPORT TO THOSE CHARGED WITH GOVERNANCE (ISA 260) MANAGEMENT RESPONSE 2020/2021**

Mr Steve Thompson, Director of Resources, presented the Management Response to External Auditor's Report to those charged with Governance (ISA 260) 2020/2021. He advised the Committee that the document outlined the Council's response to the issues raised in the External Auditor's, Deloitte, report. He provided assurance that the actions were in place to ensure that all of the issues highlighted at Appendix 5(a) would be addressed.

Although it was recognised that there were limited resources to undertake the work needed, Mr Thompson stated that the timelines for completion meant that undertaking the necessary actions was realistic.

With respect of the existence of separate minutes, taken by attendees, of Accrual Review meetings, Mr Thompson advised in response to the issue being raised by Members, that the need for clarity for Deloitte had been recognised.

The Committee also sought reassurance that the review recommended on the Valuation of Heritage Assets be undertaken by an independent party. In reply Mr Thompson confirmed that he had requested that this be the case.

The view taken by Deloitte that the Council's Pension is now an asset not a liability was raised in respect of the planned hand over of the external audit to KPMG for 2023/2024. It was recognised that KPMG could take a different view on the status of pensions impacting the overall accounts. Mr Thompson stated that although he could not confirm how KPMG would assess pensions, Deloitte's view was in part based on that of the Pension Fund's actuaries. Ms Nicola Wright, External Auditor, Deloitte, added that that was indeed the case and that it was unlikely that KPMG would seek to reopen previous years' accounts to reassess pension liability.

**Resolved:** That the Management Response to External Auditor's Report to those charged with Governance (ISA 260) 2020/2021 be noted.

### **6 ACTION TRACKER**

**Resolved:** That the Committee Action Tracker be noted.

## MINUTES OF AUDIT COMMITTEE MEETING - THURSDAY, 14 SEPTEMBER 2023

### 7 DATE OF NEXT MEETING

The date and time of the next meeting was noted as Thursday, 19 October 2023 at 6pm.

### Chairman

(The meeting ended at 6.56 pm)

Any queries regarding these minutes, please contact:  
John Greenbank, Democratic Governance Senior Adviser  
Tel: 01253 477229  
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<b>Report to:</b>	<b>AUDIT COMMITTEE</b>
<b>Relevant Officer:</b>	Cath Bagley, Head of Procurement and Exchequer
<b>Meeting</b>	19 October 2023

## INTERNAL AUDIT FOLLOW-UP - ENERGY MANAGEMENT

### 1.0 Purpose of the report:

1.1 To consider a progress report on the recommendations made in the internal audit report relating to Energy Management issued on the 4 October 2022.

### 2.0 Recommendation(s):

2.1 To consider the actions being implemented to address the audit recommendations relating to the Energy Management audit.

### 3.0 Reasons for recommendation(s):

3.1 To enable Audit Committee to consider an update and progress report on the audit recommendations.

3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.3 Is the recommendation in accordance with the Council's approved budget? Yes

### 4.0 Other alternative options to be considered:

4.1 None

### 5.0 Council priority:

5.1 This audit impacts on the Council's organisational resilience priority.

### 6.0 Background and Key Information

6.1 The Energy Management Team is responsible for administering energy supplies, including the validation and payment of invoices, to schools, academies, wholly owned companies and some private organisations that occupy Council owned buildings.

The previous energy management review in 2021/22 identified a number of recommendations which resulted in inadequate assurance being given. In order to ensure that the actions were

appropriately implemented a detailed follow-up of all recommendations was carried out in 2022/23.

6.2 The scope and assurance statement of the audit was as follows:

**Scope**

The scope of this audit was to assess whether the recommendations of last year's audit review have been appropriately addressed.

**Assurance Statement**

We consider that the controls in place remain inadequate given that there are still two outstanding priority one recommendations although we acknowledge that progress is being made to address these issues.

6.3 Does the information submitted include any exempt information? No

**7.0 List of Appendices:**

7.1 Appendix 3(a): Internal Audit Recommendations and Agreed Actions.

**8.0 Financial considerations:**

8.1 The controls being implemented will be done so within current budget constraints.

**9.0 Legal considerations:**

9.1 Risks need to be effectively managed in order to comply with relevant legislation.

**10.0 Risk management considerations:**

10.1 To enable the Audit Committee to gain assurance that risks are being effectively managed.

**11.0 Equalities considerations and the impact of this decision for our children and young People:**

11.1 Where equality analysis is appropriate these will have been undertaken whilst making decisions relating to the subject.

**12.0 Sustainability, climate change and environmental considerations:**

12.1 Any matters relating to sustainability, climate change and environmental considerations will be considered when making decisions relating to the subject.

**13.0 Internal/external consultation undertaken:**

13.1 The progress report has been prepared in conjunction with the relevant Head of Service and Chief Officer.

**14.0 Background papers:**

14.1 None.

**Appendix 3(a) - Agreed Action Plan**

	<i>Recommendation</i>	<i>Priority</i>	<i>Agreed Action</i>	<i>Responsible officer</i>	<i>Target Date</i>	<i>Revised Target Date for outstanding actions</i>	<i>Progress</i>
R1	The ongoing issues with Water Plus need to be resolved as soon as is reasonably practicable and advice sought from Legal Services where appropriate.	2	Agreed.	Service Manager	31 <sup>st</sup> March 2023	31 <sup>st</sup> March 2024	The Council’s water self-supply managing agent is supporting in reconciling the position with Water Plus. Progress has been made and final agreement now needs to be reached with Water Plus.

	<b>Recommendation</b>	<b>Priority</b>	<b>Agreed Action</b>	<b>Responsible officer</b>	<b>Target Date</b>	<b>Revised Target Date for outstanding actions</b>	<b>Progress</b>
R2	The Service Manager should conduct a review to quantify the work activity within the area, matched to the available resources to ascertain whether there is an acute resource issue or whether streamlined processes and smarter billing processes will rectify the situation.	1	A review of process and practice will be undertaken to understand as the potential driver to free up existing resource. Once this exercise has been completed the impact of this will be assessed.	Service Manager	30 <sup>th</sup> September 2023	N/a	<p>This recommendation has been implemented.</p> <p>A number of processes have been streamlined and modified including areas of direct billing which have reduced administrative and reconciliation work. In addition, some resource has been directed to support with ensuring billing is undertaken in a timely manner. Since the Audit was conducted the Council has implemented a new finance system (Technology One). An interface has been developed between the energy management system and Technology One streamlining the cost recharge process. Interfaces for Council Companies will be developed by March 2024 resulting in further efficiencies.</p>

	<b>Recommendation</b>	<b>Priority</b>	<b>Agreed Action</b>	<b>Responsible officer</b>	<b>Target Date</b>	<b>Revised Target Date for outstanding actions</b>	<b>Progress</b>
R3	The new billing arrangements should be monitored to ensure they free up sufficient resources. The Service Manager Energy and Sustainability should seek feedback from customers on the new billing arrangements and make adjustments where appropriate.	2	Agreed.	Service Manager	30 <sup>th</sup> September 2023	N/a	This recommendation has been implemented.  Regular meetings are scheduled with customers to ensure that satisfaction levels with the service and the billing arrangements are high. No significant issues have been reported.
R4	The Service Manager should continue to liaise with colleagues in Property Services and Growth and Prosperity to ensure the installation of BNOs is considered on all new developments.	2	Agreed.	Service Manager	31 <sup>st</sup> March 2023	N/a	This recommendation has been implemented.

	<b>Recommendation</b>	<b>Priority</b>	<b>Agreed Action</b>	<b>Responsible officer</b>	<b>Target Date</b>	<b>Revised Target Date for outstanding actions</b>	<b>Progress</b>
R5	SystemsLink should be reconciled to Efinancials at least on a quarterly basis but this needs to be guided by the frequency of re-charges. The reconciliation should include re-charges to the Academies and wholly owned companies up to the point they transfer to the new billing system.	2	Agreed.	Service Manager	30 <sup>th</sup> September 2023	N/a	<p>This recommendation has been implemented.</p> <p>Formal, regular communication is taking place with colleagues in accountancy to ensure that reconciliation of re-charges is up to date.</p>

	<b>Recommendation</b>	<b>Priority</b>	<b>Agreed Action</b>	<b>Responsible officer</b>	<b>Target Date</b>	<b>Revised Target Date for outstanding actions</b>	<b>Progress</b>
R6	In instances where billing has not been undertaken in a timely manner, discussions should take place with the Exchequer Services Manager to ascertain whether Efinancials has the functionality to include the invoice analysis usually sent to the customer under separate cover in the main body of the invoice.	2	Agreed.	Service Manager	31 <sup>st</sup> March 2023	N/a	This recommendation has been implemented.
R7	Steps should be taken to ensure all FDCs are captured and signed off by the Service Manager Energy and Sustainability at year end namely utilities due but not paid (Creditor FDC) and recharges due but not raised to the customer (Debtor FDC).	1	Agreed.	Service Manager	31 <sup>st</sup> March 2023	N/a	This recommendation has been implemented.  FDC end of year process is followed in line with finance guidance to ensure that all FDCs are captured in line with the associated deadlines.





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<b>Report to:</b>	<b>AUDIT COMMITTEE</b>
<b>Relevant Officer:</b>	Steve Thompson, Director of Resources Antony Lockley, Director of Strategy (Assistant Chief Executive) John Blackledge, Director of Community and Environmental Alan Cavill, Director of Communication and Regeneration
<b>Meeting</b>	19 October 2023

## STRATEGIC RISK REGISTER DEEP DIVE – PROJECT / PROGRAMME MANAGEMENT

### 1.0 Purpose of the report:

1.1 To consider a progress report on individual risks identified in the Council’s Strategic Risk Register in relation to Project/Programme Management.

### 2.0 Recommendation(s):

2.1 To consider the controls being implemented to manage the strategic risk relating to project / programme management.

### 3.0 Reasons for recommendation(s):

3.1 To enable the CLT and Audit Committee to consider an update and progress report in relation to an individual risk identified on the Strategic Risk Register.

3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.3 Is the recommendation in accordance with the Council’s approved budget? Yes

### 4.0 Other alternative options to be considered:

4.1 None.

### 5.0 Council priority:

5.1 The risk impacts on all of the Council’s priorities.

**6.0 Background and key information**

6.1 At its meeting in March 2023, the Audit Committee agreed to continue to invite Strategic Risk Owners to attend future meetings to provide updates and progress reports in relation to the individual risks identified on the Strategic Risk Register.

6.2 Does the information submitted include any exempt information? No

**7.0 List of Appendices:**

7.1 Appendix 4(a) - Strategic Risk Register Deep Dive – Project / Programme Management

**8.0 Financial considerations:**

8.1 The controls being implemented will be done so within current budget constraints.

**9.0 Legal considerations:**

9.1 Risks need to be effectively managed in order to comply with relevant legislation.

**10.0 Risk management considerations:**

10.1 To enable CLT and Audit Committee to gain assurance that strategic risks are being effectively managed.

**11.0 Equalities considerations and the impact of this decision for our children and young People::**

11.1 Equality analysis should have been undertaken, where necessary, when decisions were made in relation to the identification of the actions identified in this document. As this report presents monitoring against pre-agreed actions, no further equality analysis has been undertaken as part of this report.

**12.0 Sustainability, climate change and environmental considerations:**

12.1 Sustainability, climate change and environmental matters should have been considered, where necessary, when decisions were made in relation to the identification of the actions identified in this document. As this report presents monitoring against pre-agreed actions, no further analysis has been undertaken as part of this report.

**13.0 Internal/external consultation undertaken:**

13.1 The progress report has been prepared in conjunction with risk owners.

**14.0 Background papers:**

14.1 None.

## Appendix 4(a) - Risk Category: Project / Programme Management

**Risk Appetite: Open**

**Risk: a) The Council fails to reduce carbon emissions across its operations and the town.**

**Risk Owner: Director of Strategy (Assistant Chief Executive), Director of Resources, Director of Community and Environmental Services**

<b>Gross Risk Score</b>	<b>25</b>	Impact – 5	Likelihood – 5
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### What impact does this have?

- Blackpool exceeds its 'fair' contribution towards the Paris Climate Change Agreement target of 1.5 degrees warming.
- Reputational damage to the Council if it does not take robust action to reduce carbon.
- Loss of biodiversity.

### What opportunities does this create?

- Strong policies to cut emissions have associated health, wellbeing and economic benefits.
- Establish Blackpool as a leading player on sustainability and sustainable tourism.
- Preserve Blackpool's ecological and environmental heritage.

### What controls do we already have in place?

- Rollout of corporate processes to ensure the systematic consideration of potential change impact of each area of the Council's activities when at the planning stage.
- Delivery of renewable energy generation projects across the Council's estate and town including large venues such as the Winter Gardens, Airport and the Sandcastle.
- Participation in, and leadership of, Lancashire County Council county deal environment work stream.
- Establish approach to engaging and communicating with the public, visitors and local organisations.
- Working group on biodiversity and associated issues e.g. Motion for the Ocean.

<b>Net Risk Score</b>	<b>20</b>	Impact – 5	Likelihood – 4
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### What are we doing to further manage the risk?

**Deliver inter-related actions in the Climate Emergency Action Plan to deliver carbon reduction and sequestration projects.**

The council commissioned a Climate Assembly, made up of a representative cross-section of local people selected following a randomised invitation process. With participants spending around 12 hours in the process, the Assembly heard evidence from expert witnesses before deliberating on potential actions. The final report included a range of potential interventions which were then considered, with the majority of the actions subsequently being incorporated into the Council's Climate Emergency

Action Plan.

The Action Plan also considers a variety of other sources of evidence. Primary amongst these were four reports jointly commissioned with Lancashire County Council and Blackburn with Darwen Councils. These covered a potential pathway to Net Zero, which highlighted the key sources of emissions across the county and the balance of these in each borough; a review of the County's previous Environmental Action Plan; an overview of the potential capacity to generate renewable energy in Lancashire; and a report on Climate Resilience in Lancashire.

**Ensure that the Council's energy management arrangements are robust.**

A qualified Energy Management Team is in place with one member of the team, in particular, having a significant degree of in-depth technical expertise. The team have strong links with the energy sector and have regular meetings with the current providers.

An Energy Management System is in place which enables monitoring of the Council's energy usage at individual portfolio level and is used as a tool to alert any issues which may arise.

Whilst currently energy prices are heading in the right direction, there is still volatility in the market due to the issues surrounding Russia and also the fact that winter is on the horizon which sees an increase in demand for energy whilst compounding any supply issues. The Council has mitigated any impact of changing costs as far as possible by maintaining a level of flexibility in the prices it purchases energy for, balanced against locking in an element of its required supply, to ensure there is a risk based approach adopted.

An Energy and Utility Group is in place which is chaired by the Director of Resources and meets every two months. The Climate Emergency Steering Group reports to this group as part of the internal governance structure.

**Climate Emergency Steering Group and Climate Action Partnership established to regularly develop and assess further projects.**

The Director of Community and Environmental Services chairs the Climate Emergency Steering Group quarterly to discuss key projects, strategies and topics and to progress the climate action plan.

The Strategic Group, consisting of directors named in the action plan, also meet with the portfolio holder for climate change quarterly.

The Blackpool Climate Action Partnership met for a second time in December 2022 with some partners expressing a wish to continue discussions on specific projects outside formal meetings. The development of the partnership is an additional priority for the Climate Team later in 2023.

A Climate and Environmental Scrutiny is now in place which monitors the progress of climate related work.

**Economic Prosperity Board joint work across the Fylde Coast on mitigation and adaptation.**

The Council have worked to establish Green Growth as a new priority for the Blackpool, Fylde and Wyre

Economic Prosperity Board, and have delivered two workshops which have identified projects which can be progressed across Fylde Coast authorities.

**Develop links to other relevant groups concerning coastal management and nature.**

The Council is the Project Manager for the Dunes Project which is a natural flood risk management scheme. This has enabled the Council to network with all the core groups about the benefits of this scheme. In addition, the Wildlife Trust are supporting Wyre Borough Council on the development of schemes with their Innovation Resilience Fund and are following the Dune Project to learn from the scheme.

The Council are part of the Regional Coastal Flood Committee which has a levy of funding available for quick win projects. The Council has successfully bid for some of this money to implement small natural defence schemes such as placing a seeding roof on the new toilets at Stanley Park which runs into a lavender bed to improve the smell, and for improving flood risk management on a footpath in the Heron’s Reach area.

The Council also sit on the LGA Coastal Specialist Group which creates networking opportunities and shares best practice.

<b>Target Risk Score</b>	<b>10</b>	Impact – 5	Likelihood – 2
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**What will these additional actions achieve?**

The Council has already taken a number of actions in order to work towards the target with achievements including:

- Rolling out Blackpool Eco-Coaches programme after a successful programme on Grange Park Estate and Green Doctor town-wide initiative, supporting people to reduce energy costs and carbon emissions
- Retrofitting of Garstang Road West flats to improve thermal efficiency
- Delivery of 30 new council homes with Air Source Heat Pumps, solar panels and battery storage
- Successful trial of Electric Truck by Blackpool Illuminations
- Blackpool Airport Solar Farm at advanced planning stage

The primary commitments made in the Climate Emergency Declaration are to make the Council’s activities net-zero carbon by 2030, to achieve 100% clean energy across the Council’s full range of functions by the same date, ensure that all strategic decisions, budgets and approaches to planning decisions are in line with a shift to zero carbon by 2030, and to support and work with all other relevant agencies towards making the entire area net-zero carbon within the same timescale.

**What barriers do we face?**

Other than funding, and ensuring a balance between achieving the Council’s social and economic priorities whilst supporting the carbon reduction agenda, the primary internal challenge in delivering the agenda is staffing levels, recruitment and retention, and the capacity of other Directorates. After several attempts to recruit specialists with experience in the field proved unsuccessful, the approach shifted to recruit recent graduates and provide wrap-around career development experience and internal opportunities for progression. This has proved successful in attracting candidates, but demand

in the sector has created highly-paid and flexible opportunities elsewhere which are a constant drain on our talent, with significant amounts of working time lost as a result. One consequence of this is that we do not currently have a recent organisational carbon footprint and the whole-organisation approach we wish to take has been less extensive than planned.

**Do these actions contribute to the sustainability of the Council?**

The Council's Climate Emergency Declaration notes the impacts of climate breakdown around the world, and highlights the Authority has a duty to take action to address these issues, both for the health of the planet and given that the reductions of emissions are also associated with positive health, wellbeing and economic benefits.

**Do these actions impact on the Council's finances?**

It is estimated that it would cost approximately £1.5bn for Blackpool to achieve net zero and therefore work is needed to explore how the Council could bring in private funding to complement grants and the Authorities' own investment.

Tackling the climate emergency across Blackpool within the timeframe established in the action plan would require investment that is significantly beyond our means. Internally, a Climate Action Fund has been established to deliver key activity and fund supporting work.

Some external funding is available from the government and private sector, and work to prepare suitable projects aligned to the requirements of the funders continues.

Following the conclusion of the ERDF-funded project on Grange Park to support the de-carbonisation of @thegrange and the construction of low carbon homes, significant investment is being sought or planned to be sought via the Social Housing Decarbonisation Fund, Green Heat Networks Fund, and the Public Sector Decarbonisation Fund.

Blackpool is also leading across Lancashire on the delivery of the Home Upgrade Grant, with aims to deliver around 2000 air source heat pumps to households at high risk of fuel poverty across the County via the Cosy Homes In Lancashire scheme.

The government's Shared Prosperity Fund (SPF) is also being used to invest in the creation of an Eco Hub at Palatine Library, the town-wide extension of the successful Eco-Coaches project run by Groundwork on Grange Park, and a community flood risk reduction scheme to distribute water butts, reducing the impact on areas from heavy rainfall events. Further SPF funding will be used to reduce emissions from the scheme to provide new office space for emerging businesses in the centre of Blackpool ("The Edge") and support packages for local businesses to de-carbonise their operation.

In addition, most other external funding increasingly comes with a requirement to engage with sustainability issues, with the most prominent response to this being the Multiversity project. Funded through Town Deal and Levelling-Up Funding, the scheme is being designed to be carbon neutral in operation.

**How does this contribute to the Council Plan?**

The Council declared a Climate Emergency in June 2019 with the aim to make the Council's activities net-zero carbon by 2030.



**Any links to other strategic risks?**

Strategy, Finance, Property, Commercial

**Any additional changes to this strategic risk?**

New technology has the unintended consequence of creating other risks such as impact on insurance premiums and therefore ongoing work with the Council's insurers is important to ensure that innovations are safe by design and reduce risk and liability as much as possible.

**Risk: b) Climate breakdown causes an increase in sea levels and severe adverse weather events.****Risk Owner: Director of Community and Environmental Services**

<b>Gross Risk Score</b>	<b>25</b>	Impact – 5	Likelihood – 5
-------------------------	-----------	------------	----------------

**What impact does this have?**

- Increased threat to human life from flooding, high winds and extreme heat.
- Rising sea levels threaten the adequacy of Blackpool's coastal defences.
- Blackpool's built infrastructure is unable to cope with more regular severe weather.

**What opportunities does this create?**

- Average temperature rise potentially raises interest in winter tourist economy.
- Lobbying to change the basis of the financial calculations on which funding for defences is awarded.
- Preserve Blackpool's built environment, heritage, and infrastructure.
- Work within planning legislation to strengthen adaptation of new buildings to climate breakdown.

**What controls do we already have in place?**

- Lead Local Flood Authority nominated person in place.
- Local Flood Risk Management Strategy in place.
- Multi Agency Flood Plans in place to respond to a major incident.
- Coast Protection Strategy in place.

<b>Net Risk Score</b>	<b>20</b>	Impact – 5	Likelihood – 4
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**What are we doing to further manage the risk?****Work with other organisations to raise awareness and lobby for funding and behaviour change.**

Whilst the Climate Action plan primarily concentrates on actions to address climate mitigation i.e. reducing carbon-based emissions, the second major priority for the team this year is to establish a robust approach across the Council to climate adaptation. With the 1.5 degree Celsius target for peak global warming set by the Paris Agreement in 2015 increasingly at high risk of being breached, and the consequent increase in the frequency of extreme weather events, the Council needs to focus on short,

medium and long-term actions to fundamentally shift how we plan and build our town. As a result, we will present for approval Blackpool Council's first detailed Climate Adaptation Action Plan later this year which will seek to minimise the vulnerability of our services. This will be followed by a town-wide Adaptation Plan where we will link to other major stakeholders, and with other initiatives being undertaken at a county level.

The Council is an active member of the Lancashire Resilience Forum which look to develop plans to deal with major incidents which can include severe weather events which may increase as a result of climate change.

**Work with the community to help residents prepare for potential flooding events.**

A Flood Action Group is being established in Anchorsholme due to issues with flooding in the past. The purpose of this group is to help residents in the area better prepare for managing flooding to their property and in their area.

No other Flood Action Groups have been established at this stage however if a need was established and the local communities wanted to get involved then the Council is in a better position to engage and react to the creation of new groups.

<b>Target Risk Score</b>	<b>10</b>	Impact – 5	Likelihood – 2
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**What will these additional actions achieve?**

The aims of these actions helps to increase the resilience of the local community to deal with adverse weather whilst also ensuring that the Council continues to invest in core assets to help mitigate the risk. Key achievements to date include:

- Successful bids for further funding to support sea defence and coastal protection work.
- Development of Council Adaptation Plan with approval planned for late 2023.

**What barriers do we face?**

Resource is the key barrier given the scale of the programme.

**Do these actions contribute to the sustainability of the Council?**

All climate mitigation work undertaken helps to minimise the risk faced by the Council and its community due to climate change.

**Do these actions impact on the Council's finances?**

The Council has been successful in winning bids for external funding for key projects in the town. The Environment Agency have committed c£150 million for coastal protection work during the period of 2022 to 2027. This includes the beach nourishment scheme which relates to the retention of sand at the base of the sea defences to continue to provide protection for residential properties and the economic infrastructure.

**How does this contribute to the Council Plan?**

The delivery of these actions contribute to community and the economy.

**Any links to other strategic risks?**

Strategy, Reputational

**Any additional changes to this strategic risk?**

The focus is on ensuring that delivery of the core programme is a success and not diverting resources into other areas unless adequate employees are recruited to deliver and the work is of benefit to Blackpool.

A Scrutiny of Coastal Defences and Beach Nourishment took place in September and through this process there may be other considerations which need to be factored into future planning and risk management.

**Risk: c) Failure to modernise transport network**

**Risk Owner: Director of Communications and Regeneration**

<b>Gross Risk Score</b>	20	Impact – 4	Likelihood – 5
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**What impact does this have?**

- Unable to meet the requirements of the climate emergency.
- Loss of trade, reputation and confidence from residents.

**What opportunities does this create?**

- Improve the economy, accessibility and the environment.
- Improve transport infrastructure for the benefit of residents, businesses and visitors.
- Good parking infrastructure is part of the customer experience.

**What controls do we already have in place?**

- Road Asset Management Strategy in place which sets out budget requirements based on whole life costs following the Department for Transport Code of Practice.
- Highways Investment Group in place to review network capacity and regeneration of the town.
- A Parking Strategy for the town is in place.
- Significant investment has taken place in Highways with upgrading works including upgrading of bridges, Yeadon Way and Quality Corridors.
- Two wholly owned companies in place which support transport including Blackpool Transport Services and Blackpool Airport Operations Limited.
- Transport Policy team in place in the Communications and Regeneration Directorate with a delivery team in the Community and Environmental Services Directorate.

<b>Net Risk Score</b>	16	Impact – 4	Likelihood – 4
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**What are we doing to further manage the risk?**

**Complete the tram extension at Blackpool North Station and start delivering a service up the new**

**track.**

It is planned to start operating the new tram service to Blackpool North Station by Spring 2024.

**Deliver the programme of road works around the Enterprise Zone to improve access to the area.**

The first stage highway works at the Division Lane Junction were completed in June 2023.

Planning consent for the main highway is in place with Early Contractor Involvement (ECI) underway and a contract being let this Autumn with a forecasted January 2024 start date on a 12 month build.

A planning application has been submitted to Fylde Borough Council for the Airport East highway in August 2023.

**Delivery of additional car parking to commence in line with the Parking Strategy and taking account of the need for EV charging points.**

The Council is currently acquiring sites in order to facilitate the additional car parking requirements that have been identified in the Parking Strategy around Talbot Gateway. EV charging points are being provided in the new parking areas, where feasible, following consultation between departments including the Climate Action team in the Council's Corporate Delivery Unit and in line with the EV charging strategy.

The council adopted an Electric Vehicle Strategy in February 2023, covering the period until 2028. Delivery of the strategy is reliant on accessing LEVI funding, which is divided into "capability" (revenue) funding and capital funding. A total allocation of £360k of capability funding has been spread over three years, until 2024/25. This is intended to ensure sufficient staffing resource is available for the project. The Council has been notified that it is in Tranche 1 for LEVI Capital funding, which requires the submission of an application form by November 30th 2023. £1.7million has been pre-allocated which is expected to leverage in additional private sector investment. The Council's preferred model for delivery is to use Residential Charging Sites (RCS). These "hubs" would be primarily sited on existing Council car parks across the borough, including those associated with sites providing specific services. Arrangements would be made for the charging to be accessible 24 hours with additional provision for adequate lighting and security measures such as CCTV.

**Assess findings for South Fylde Line and Fleetwood to Poulton Line with partners and seek to secure funding for construction once schemes agreed.**

This review has been formally held pending further announcements from the Department for Transport.

**Deliver the ZEBRA project which will see significant works at the depot and the introduction of a carbon neutral bus fleet.**

BTS carried out a re-appraisal of the submitted business plan and found that due to significant cost increases, it was not viable. Therefore, changes to the original plans are being proposed and BTS is considering its response to the situation to ensure that a financially viable solution is found.

Work is ongoing at Rigby Road depot to reorganize the layout of the depot. The depot site is now being reconfigured and contractors are on site. A shortage of steel delayed things, but this has now been resolved.

Further work is required to ensure that there is a sufficient electricity capacity at the depot and then to commission, install and maintain the charging infrastructure and this has yet to go out to tender.

A tender exercise is currently underway to procure the electric buses. It is likely to be November 2024 for the first buses to be on the street.

<b>Target Risk Score</b>	<b>8</b>	Impact – 4	Likelihood – 2
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**What will these additional actions achieve?**

Further improve the transport infrastructure to the benefits of residents, businesses and visitors.

**What barriers do we face?**

Reliance on other stakeholders and access to further funding are the key barriers to implementation. In addition, the current economic climate with rising inflation resulting in cost increases creating difficulty in delivering schemes on budget.

Current ownership and usage levels of EV's in Blackpool are unlikely to support the delivery of a viable business model for charging in the short term, meaning that the policy objective of minimising the cost of public charging to residents is more difficult to achieve.

**Do these actions contribute to the sustainability of the Council?**

Where possible environmental modes of transport are being encouraged through better public transport options and also the provision of EV charging points to increase the network available for electric vehicles. The EV charging model will assist in the decarbonisation of staff travel via the availability of public chargers at our sites across the borough.

The transfer of jobs into Talbot Gateway, which includes the transport hub, will also increase sustainability in terms of economic growth and increased use of public transport.

**Do these actions impact on the Council's finances?**

Each of the developments come at a cost and therefore it is important that the Council continues to access external funding sources where available.

**How does this contribute to the Council Plan?**

The delivery of these actions contributes to both community and economy.

**Any links to other strategic risks?**

Strategy, Governance, Commercial

**Any additional changes to this strategic risk?**

Not at this stage however the challenges with EV and other environmentally friendly modes of transport is an evolving area.



<b>Report to:</b>	<b>AUDIT COMMITTEE</b>
<b>Relevant Officer:</b>	Ms Nicola Wright, External Auditor, Deloitte Mr Stuart Kenny, External Auditor, Deloitte
<b>Date of meeting:</b>	19 October 2023

## EXTENAL AUDIT PLAN 2021/2022

### 1.0 Purpose of the report

1.1 To consider the External Audit Plan 2021-2022

### 2.0 Recommendation(s)

2.1 To note the plan and make any recommendations considered appropriate.

### 3.0 Reason for recommendation(s)

3.1 To ensure overview of the Council's External Audit Plan.

3.2 Is the recommendation contrary to a plan or strategy approved by the Council? No

3.3 Is the recommendation in accordance with the Council's approved budget? Yes

### 4.0 Other alternative options to be considered

4.1 None.

### 5.0 Council priority

5.1 The relevant Council priority is:

- 'Communities: Creating stronger communities and increasing resilience'

### 6.0 Background and key information

6.1 The Council's external auditors are required to review and report on the Council's:

- Financial statements (including the Annual Governance Statement), providing an opinion on the accounts; and

- Use of Resources, concluding on the arrangements in place for securing economy, efficiency and effectiveness in the use of resources (value for money).

6.2 The audit planning process and risk assessment is an ongoing process and the assessment and fees in the plan will be kept under review and updated where required.

6.3 Does the information submitted include any exempt information? Yes / No

**7.0 List of appendices**

7.1 Appendix 5(a) – External Audit Plan 2021-2022

**8.0 Financial considerations**

8.1 See Appendix 5(a).

**9.0 Legal considerations**

9.1 None.

**10.0 Risk management considerations**

10.1 See Appendix 5(a).

**11.0 Equalities considerations and the impact of this decision for our children and young people**

11.1 None.

**12.0 Sustainability, climate change and environmental considerations**

12.1 None.

**13.0 Internal/external consultation undertaken**

13.1 None.

**14.0 Background papers**

14.1 None.





## Planning report to the Audit Committee for the year ending 31 March 2022

Issued on 10 October 2023 for the Audit Committee on 19 October 2023

# Contents

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# Introduction

## The key messages in this report:

Audit quality is our number one priority. We plan our audit to focus on audit quality and have set the following audit quality objectives for this audit:

- A robust challenge of the key judgements taken in the preparation of the financial statements.
- A strong understanding of your internal control environment.
- A well planned and delivered audit that raises findings early with those charged with governance.

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We have pleasure in presenting our planning report to the Audit Committee for the year ending 31 March 2022 audit. We would like to draw your attention to the key messages of this audit plan:

### **Audit Plan**

We have updated our understanding of the Council informed by discussions with management and review of relevant documentation from across the Council.

Based on these procedures, we have developed this plan to ensure that we provide an effective audit service that meets your expectations and focuses on the most significant areas of importance and risk to the Council.

### **Key Risks**

We have taken an initial view as to the significant audit risks the Council faces. These are presented as a summary dashboard on page 12. The significant risks identified for 2021/22 are the same as those for 2020/21, except for the risk of fraud in revenue recognition which is now an area of audit focus. We have lowered the risk in the current year as no issues were identified in the prior year with the accounting for revenue including grants with terms and conditions and Covid-19 grants.

Our risk assessment has been informed by our knowledge from the audit of the 2020/21 financial statements.

During the prior year audit we identified a number of misstatements in the financial statements. We have not deemed the quality of the financial statements to be a significant risk. However, we would expect a detailed review of the Statement of Accounts to be undertaken by senior members of the finance team before the Statement of Accounts are presented for audit.

### **Value for Money**

Our VfM planning procedures are ongoing. However, based on our work completed so far, specific areas that we expect to focus on include the Council's longer term planning for financial sustainability and the actions taken by the Council in relation to the Ofsted inspection report in November 2018 which included an "inadequate" rating in relation to children's services.

### **Our Commitment to Quality**

We are committed to providing the highest quality audit, with input from our market leading specialists, sophisticated data analytics and our wealth of experience.

**Nicola Wright**  
Audit Partner

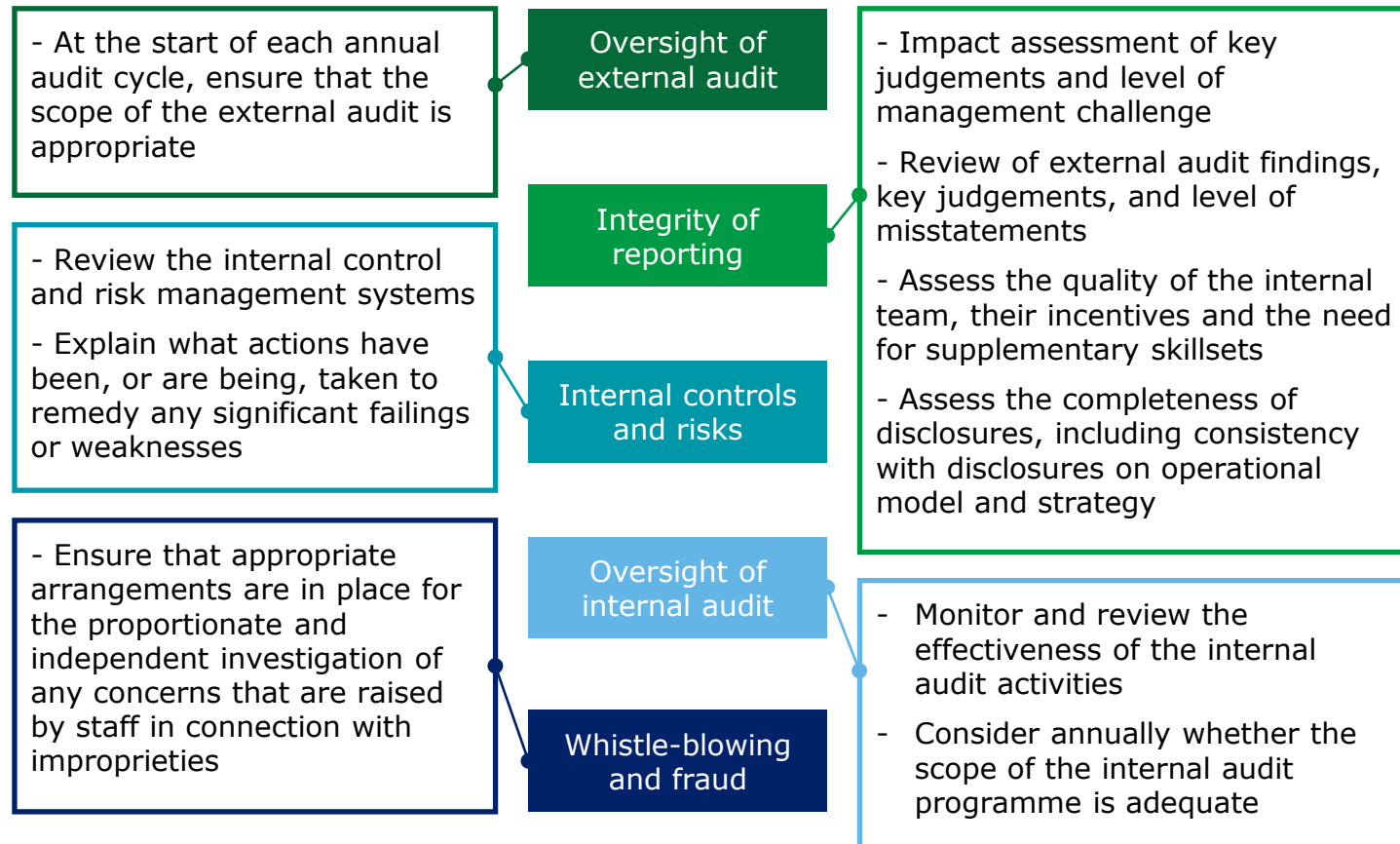
# Responsibilities of the Audit Committee

## Helping you fulfil your responsibilities

Why do we interact with the Audit Committee?

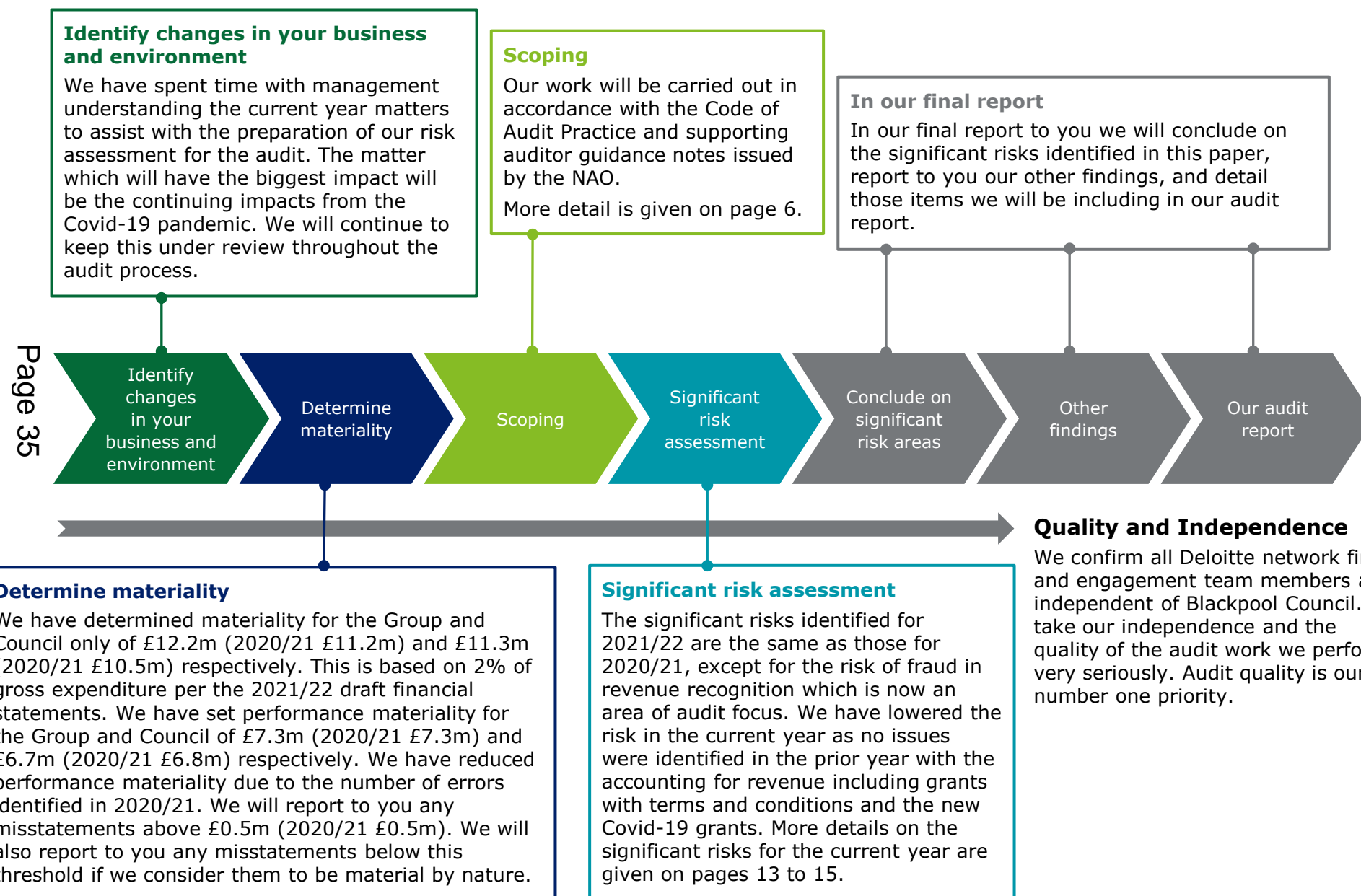
As a result of regulatory change in recent years, the role of the Audit Committee has significantly expanded. We set out here a summary of the core areas of Audit Committee responsibility to provide a reference in respect of these broader responsibilities.

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# Our audit explained

We tailor our audit to your business and your strategy



# Scope of work and approach

## Our approach

### Financial statements

We will conduct our audit in accordance with the Code of Audit Practice and supporting guidance issued by the National Audit Office ('NAO') and International Standards on Auditing (UK) ('ISAs (UK)') as adopted by the UK Auditing Practices Board ('APB'). The Council will prepare its accounts under the Code of Practice on Local Authority Accounting ('the Code') issued by CIPFA and LASAAC.

We report on whether the financial statements:

- Give a true and fair view of the financial position and income and expenditure; and

Are prepared in line with the Code of Practice on Local Authority Accounting ('the Code').

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### Value for Money conclusion

We are required to consider the Council's arrangements for securing economy, efficiency and effectiveness in its use of resources. If we identify any significant weaknesses, we are required to make recommendations, and to provide a narrative commentary on arrangements.

To perform this work, we are required to:

- Obtain an understanding of the Council's arrangements sufficient to support our risk assessment and commentary;
- Assess whether there are risks of a significant weakness in the Council's arrangements and perform additional procedures if a risk is identified. If a significant weakness is identified, we report this and an accompanying recommendation;
- Report in our audit opinion if we have reported any significant weaknesses; and
- Issue a narrative commentary in our Annual Auditor's Report on the arrangements in place.

### Annual Governance Statement

We are required to report on whether other information published with the audited financial statements is consistent with the financial statements.

Other information includes information included in the Statement of Accounts, in particular the Narrative Report. It also includes the Annual Governance Statement which the Council is required to publish alongside the Statement of Accounts.

In reading the information given with financial statements, we take into account our knowledge of the Council, including that gained through work in relation to the Council's arrangements for securing value for money through economy, efficiency and effectiveness in its use of resources.

### Liaison with Internal Audit

The Auditing Standards Board's version of ISA (UK) 610 "Using the work of internal auditors" prohibits use of Internal Audit to provide "direct assistance" to the audit. Our approach to the use of the work of Internal Audit has been designed to be compatible with these requirements.

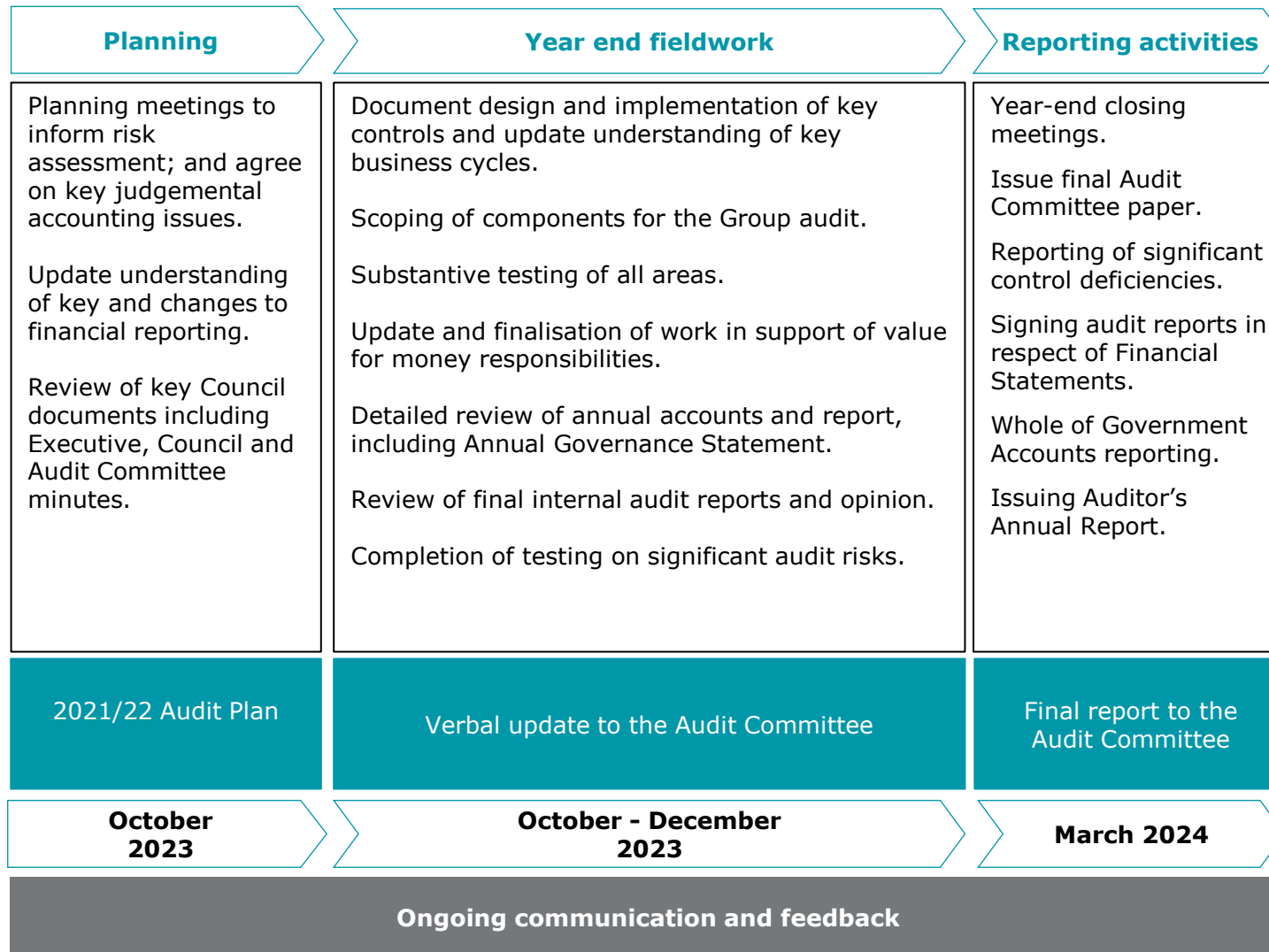
We have reviewed the Internal Audit reports and the Head of Internal Audit Opinion for 2021/22 which rated the overall control environment as 'adequate'. We met with the team to discuss their work and we have discussed the work plan for Internal Audit. Where they have identified specific material deficiencies in the control environment, we will consider adjusting our testing so that the audit risk is covered by our work.

Using these discussions to inform our risk assessment, we can work together with Internal Audit to develop an approach that avoids inefficiencies and overlaps, therefore avoiding any unnecessary duplication of audit requirements on the Council's staff.

# Continuous communication and reporting

## Planned timing of the audit

As the audit plan is executed throughout the year, the results will be analysed continuously and conclusions (preliminary and otherwise) will be drawn. The following sets out the expected timing of our reporting to and communication with you. The ability to meet this timeline is based on the receipt of a fully reviewed draft statement of accounts that are of appropriate quality.



# Materiality

## Our approach to materiality

### Basis of our materiality benchmark

- We have determined materiality for the Group and Council only of £12.2m (2020/21 £11.2m) and £11.3m (2020/21 £10.5m) respectively, based on professional judgement, the requirements of auditing standards and the financial measures most relevant to users of the financial statements.
- We have used 2% of gross expenditure based on the draft 2021/22 accounts as the benchmark for determining our preliminary materiality.

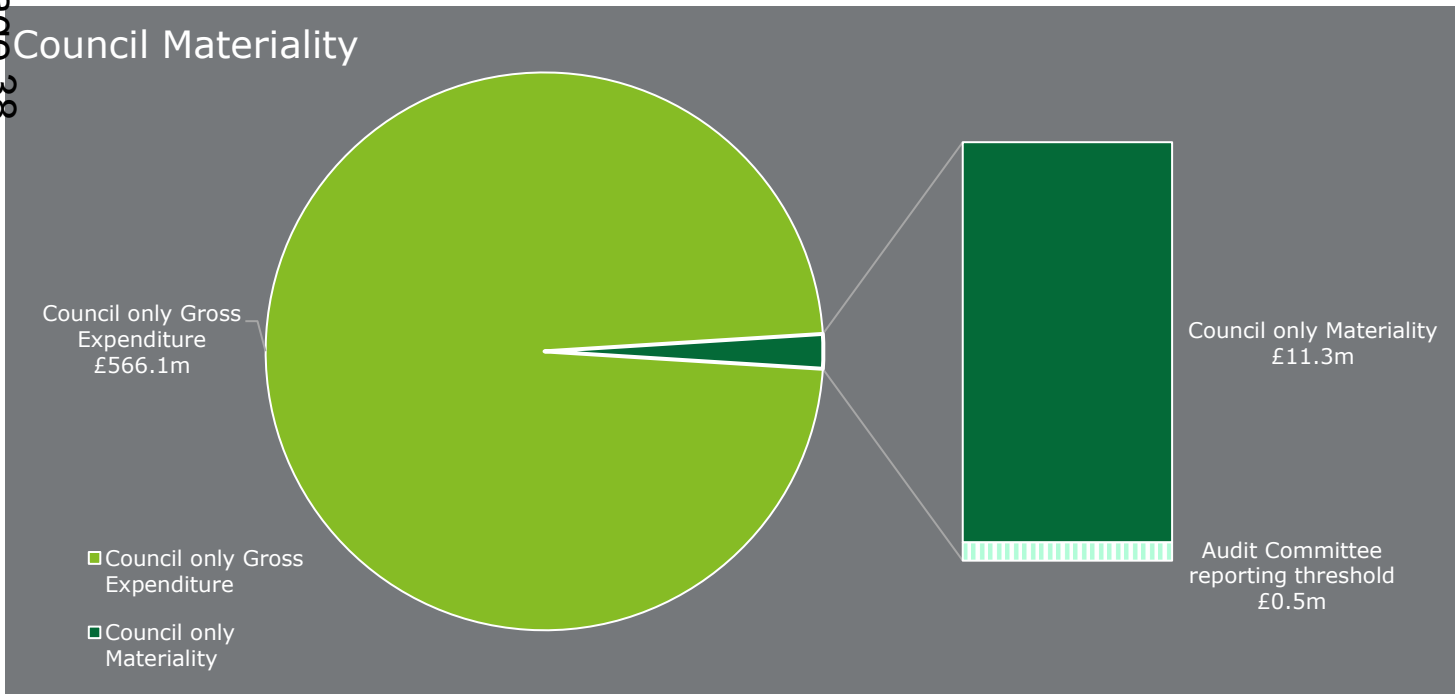
### Reporting to those charged with governance

- We will report to you all misstatements found in excess of £0.5m (2020/21 £0.5m).
- We will report to you misstatements below this threshold if we consider them to be material by nature.

### Reporting on Group Accounts

- Based on our assessment of the draft year end position we have identified that we will need to undertake detailed testing on the subsidiary balances which are material to the Group financial statements.

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Although materiality is the judgement of the audit partner, the Audit Committee must satisfy themselves that the level of materiality chosen is appropriate for the scope of the audit.



# Covid-19 impact on annual report and financial statements

Impact on property, plant and equipment	<p>The Royal Institute of Chartered Surveyors issued a practice alert in March 2020, as a result of which valuers identified a material valuation uncertainty at 31 March 2020 for most types of property valuation, resulting in disclosure in financial statements and “emphasis of matter” paragraphs in audit reports. By September 2020, RICS considered that there was no longer material uncertainty over valuations from that date, and therefore valuations at 31 March 2022 are not expected to be affected by material valuation uncertainties. We have confirmed that there are no valuations that have been reported with a material valuation uncertainty at the 31 March 2022.</p> <p>The Council needs to consider its approach to the measurement of property, plant and equipment (PPE). Where property held at current value is based on market valuations the Council should consider with their valuers the impact that Covid-19 has had on current value. The Council will also need to consider whether there are any indications of impairment of assets requiring adjustment at 31 March 2022.</p>
Valuation of commercial or investment properties	<p>Following the Covid-19 pandemic, the fair value measurements for financial instruments and investment properties held by the Council needs to be reviewed against the conditions and assumptions at the measurement date. Although at 31 March 2022, volatility was lower than during the early stages of the pandemic, we are aware of significant movements in 2021/22 and would therefore expect these to be taken into consideration.</p>
Impact on pension fund investment measurement	<p>As a result of the Covid-19 pandemic, pension fund investments have been subject to volatility. It is important to engage with custodians and fund managers to not only gather information for year-end measurements but to also understand any estimation techniques and any changes to those techniques that may be needed to measure the financial instruments. Where such volatility exists it may mean that the inputs used in the fair value measurement may change and may require a change of measurement technique, and consideration of the level of uncertainty in valuations where there is significantly more estimation. There was a triennial valuation as at the 31 March 2022 which resulted in updated year end membership data being available. As a result of this the Council have been required to obtain an updated IAS19 report to reflect the updated membership information.</p>
Expected credit losses	<p>Although the impact of the pandemic reduced in 2021/22, there has been a significant downturn in economic activity, with many businesses and individuals significantly impacted. The Council will need to consider the provision for credit losses for receivables, including for expected credit losses for assets accounted for under IFRS 9.</p>
Recoverability of long term debtors	<p>The Council has provided loans to a number of its subsidiaries and also, under the Business Loan Fund, to private companies. Due to the impact of Covid-19 on a wide range of companies within the economy, there is an increased risk over the recoverability of these loans. The Council will need to perform a detailed assessment of the recoverability of the outstanding loans.</p>

## Covid-19 impact on annual report and financial statements (continued)

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Financial risk disclosures	The Council needs to report on the impact of financial pressures and its financial sustainability in the Narrative Report and the relevant liquidity reporting requirements under the Code's adoption of IFRS 7 Financial Instruments: Disclosures.
Narrative and other reporting issues	<p>The following areas will need to be considered by local authorities as having being impacted on by the Covid-19 pandemic.</p> <ul style="list-style-type: none"><li>• Narrative reporting as well as the usual reporting requirements will need to cover the effects of the pandemic on services, operations, performance, strategic direction, resources and financial sustainability.</li><li>• Reporting judgements and estimation uncertainty, the Council will need to report the impact on material transactions including decisions made on the measurements of assets and liabilities</li></ul>
Events after the reporting period	The Council will need to consider the events after the reporting period and whether these events will be adjusting or non-adjusting and make decisions on a transaction by transaction basis. The nature of the Covid-19 pandemic will mean that the Council will need to continue to review and update these assessments up to the date the accounts are authorised for issue.

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# Significant risks

## Our risk assessment process

We consider a number of factors when deciding on the significant audit risks. These factors include:

- the significant risks and uncertainties previously reported in the Narrative Report and financial statements;
- the IAS 1 critical accounting estimates previously reported in the Narrative Report and financial statements;
- our assessment of materiality; and
- the changes that have occurred in the business and the environment it operates in since the last Narrative Report and financial statements.

### **Deloitte view**

Management must carefully consider the principal risks, uncertainties and accounting estimates of the Council.

Page 12 summarises the significant risks that we will focus on during our audit.

### **Principal risk and uncertainties**

- Resource management
- Information governance
- Ability to secure commercial opportunities
- Underachievement of savings
- Health & Safety

### **Changes in your business and environment**

- Impacts of Covid-19
- Continued overspends in Children & Young People's Services
- Overspend in Health and Adult Services
- Increasing income generation from more commercial activities

### **IAS 1 Critical accounting estimates**

- Future funding levels
- Property valuations
- Recognition of schools' fixed assets
- Pension liabilities
- Valuation of investment properties
- Recognition of PFI assets

### **NAO – Auditor Guidance Note 06**










The National Audit Office identified Dedicated Schools Grant – negative reserve and pension guarantees to other entities as key issues in their Local Government Audit Planning guidance issued in November 2022.

We reviewed the approach being taken by the Council in response to these in the prior year audit and will refresh our understanding for the current year.

We do not believe any of these matters represent a significant audit risk but we will carefully review the approach being taken by the Council to address these issues.

# Significant risks

## Significant risk dashboard

Risk	Material	Fraud risk	Planned approach to controls	Level of management judgement/ estimate	Slide no.
Completeness of Accrued Expenditure			D+I		13
Management Override of Controls			D+I		14
Property Valuations			D+I		15

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D+I: Assessing the design and implementation of key controls



Low level of management judgement/ estimate



Moderate level of management judgement/ estimate



High level of management judgement/ estimate

# Significant risks

## Risk 1 – Completeness of Accrued Expenditure

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**Risk identified**

Under ISA 240, there is a presumed risk that revenue may be misstated due to improper revenue recognition. In the public sector, this requirement is modified by Practice Note 10 issued by the Financial Reporting Council, which states that auditors should also consider the risk that material misstatements may occur by the manipulation of expenditure recognition. In the current year, we have identified the risk as relating specifically to year end accruals.

There is an inherent fraud risk associated with the under recording of expenditure in order for the Council to report a more favourable year-end position. For Blackpool Council, there is therefore an inherent risk that it may materially misstate its expenditure through the understatement of accruals in an attempt to report a more favourable year end position.

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**Our response**

Our work in this area will include the following:

- Assessing the design and implementation of the key controls in place in relation to the recording of accruals;
- Testing a sample of accruals to supporting documentation to check whether they are valid liabilities, that the amount accrued is appropriately supported, and that the liability was incurred as at 31 March 2022; and
- Testing a sample of post year end payments made in April and May 2022, per the Council's bank statements, in order to ensure that the associated expenditure has been included in the correct period.

# Significant risks

## Risk 2 – Management Override of Controls

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**Risk identified**

In accordance with ISA 240 (UK), management override of controls is a significant risk due to fraud for all entities. This risk area includes the potential for management to use their judgement to influence the financial statements as well as the potential to override the Council's controls for specific transactions.

The key judgements in the financial statements include those which we have selected to be the significant audit risks, (completeness of accrued expenditure and the Council's property valuations) and any one-off and unusual transactions where management could show bias. These are inherently the areas in which management has the potential to use their judgment to influence the financial statements.

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**Our response**

In considering the risk of management override, we plan to perform the following audit procedures that directly address this risk:

- We will consider the overall control environment and 'tone at the top';
  - We will test the design and implementation of controls relating to journals and accounting estimates;
  - We will make inquiries of individuals involved in the financial reporting process about inappropriate or unusual activity relating to the processing of journal entries and other adjustments;
  - We will test the appropriateness of journals and adjustments made in the preparation of the financial statements. We will use Spotlight data analytics tools to select journals for testing, based upon identification of items of potential audit interest;
  - We will review accounting estimates for biases that could result in material misstatements due to fraud and perform testing on key accounting estimates as discussed above; and
  - We will obtain an understanding of the business rationale of significant transactions that we become aware of that are outside of the normal course of business for the entity, or that otherwise appear to be unusual, given our understanding of the entity and its environment.
-

# Significant risks

## Risk 3 – Property Valuations

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**Risk identified** The value of land and buildings and investment properties represent significant balances in the Council's financial statements and are subject to valuation changes, impairment reviews and depreciation charges. Management is required to make material judgements in respect of key assumptions and apply estimation techniques to calculate the year-end balances recorded in the balance sheet.

The Council has adopted a rolling revaluation model which sees all land and buildings revalued over a four year cycle. As a result of this, however, individual assets may not be revalued for three years and any changes to the factors used in the valuation process could materially affect the value of the Council's assets as at year end.

There is therefore a risk that the value of property assets materially differ from the year end fair value, particularly given that valuations are inherently judgemental and include a number of assumptions. We have associated the significant risk to assets that are valued on a market basis as there is greater risk of movement in the valuations and an increased level of judgement required. As a result of the Covid-19 pandemic there has been significant market movements during the year which will impact on the valuations of the investment properties held by the Council. This increases the level of judgment required in valuing the assets.

Page  
15  
our  
response

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Our work in this area will include the following:

- We will review the design and implementation of the controls in place in relation to property valuations;
  - We will consider the work performed by the Council's valuer, including the adequacy of the scope of the work performed, their professional capabilities and the results of their work;
  - We will engage our valuation specialists, Deloitte Real Asset Advisory, to review and challenge the appropriateness of the assumptions used in the valuation of the Council's property assets;
  - We will sample test key asset information used by the Council's valuers in performing their valuation, such as gross internal areas, back to supporting documentation;
  - We will review assets not subject to valuation in 2021/22 and challenge if its reasonable that there is no material movement or need to revalue the assets;
  - We will consider the impact of Covid-19 on the valuation of property assets and ensure, where necessary, the Council has reflected the impact in their valuations; and
  - We will review the presentation of revaluation movements, and the disclosures included in the Statement of Accounts.
-

## Other areas of audit focus

Other accounting judgments and areas of focus which have not currently been identified as significant audit risks are as follows

Risk identified	Our response
<p><b>Pension liability valuation</b></p> <p>The net pension liability is a material element of the Council's balance sheet. The valuation of the Scheme relies on a number of assumptions, including actuarial assumptions, and actuarial methodology which results in the Council's overall valuation. Furthermore there are financial and demographic assumptions used in the calculation of the Council's valuation – e.g. the discount rate, inflation rates, mortality rates. These assumptions should also reflect the profile of the Council's employees, and should be based on appropriate data. There is a risk that the assumptions and methodology used in the valuation of the Council's pension obligation are not reasonable. This could have a material impact to the net pension liability accounted for in the financial statements. There was a triennial valuation as at the 31 March 2022 which resulted in updated year end membership data being available. As a result of this the Council have been required to obtain an updated IAS19 report to reflect the updated membership information.</p>	<p>Our work in this area will include the following:</p> <ul style="list-style-type: none"><li>• Agreeing the actuarial report for the Council produced by Mercers, the scheme actuary, to the Statement of Accounts pension disclosures;</li><li>• Reviewing the disclosures made in the Statement of Accounts against the requirements of the Code;</li><li>• We will liaise with the audit team of Lancashire County Pension Fund to obtain assurances over the information supplied to the actuary in relation to the Council;</li><li>• Assessing the independence and expertise of the actuary supporting the basis of reliance upon their work;</li><li>• Using our internal actuarial specialists to review and challenge the assumptions made by Mercers; and</li><li>• Assessing the reasonableness of the Council's share of the total assets of the scheme by reference to the Pension Fund financial statements.</li></ul>
<p><b>Long term debtor recoverability</b></p> <p>At 31 March 2022, the Council had provided loans totalling £86m to a number of its subsidiaries and private companies. Due to the impact of Covid-19 on a wide range of companies within the economy, we believe there is a risk that some of these entities may not be able to repay the loans provided by the Council, and as a result the value of the loans at 31 March 2022, may need to be impaired.</p>	<p>Our work in this area will include the following:</p> <ul style="list-style-type: none"><li>• We will obtain and review management's assessment of the recoverability of the loans.</li><li>• We will obtain loan agreements from the Council for a sample of loans. We will review the terms and conditions included in the agreements, with a particular focus on any collateral that is included in the agreements and where appropriate we will involve our internal hospitality and leisure specialists to review the collateral to understand the potential recoverability; and</li><li>• We will review and assess the current operational status of each company in our sample, including reviewing the latest set of audited financial statements for the company, in order to identify any potential risks to the recoverability of the loan<sup>16</sup> provided by the Council.</li></ul>



## Other areas of audit focus

Other accounting judgments and areas of focus which have not currently been identified as significant audit risks are as follows

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### Risk identified

#### Recognition of grants with terms and conditions

Under ISA 240, there is a presumed risk that revenue may be misstated due to improper revenue recognition. We have rebutted this as a significant risk and instead concluded this as an area of audit focus. We have lowered the risk in the current year as no issues were identified in the prior year with the accounting for revenue including grants with terms and conditions and the new Covid-19 grants. Our judgement is that the risk at the Council relates to the recognition of grants with terms and conditions attached, including the grants received in year relating to Covid-19 where terms and conditions may be less clear. There is a risk that the Council will recognise the income before the terms and conditions have been met. There are also a number of grants relating to Covid-19, such as the business rates relief, where management need to determine if they are acting in the capacity of an Agent or Principal.

### Our response

Our work in this area will include the following:

- Reviewing management's assessment of the accounting treatment of each significant grant claim, with a particular emphasis on Covid-19 related grants, including consideration of the treatment of agent or principal, and challenged the appropriateness of the approach adopted; and
- Testing a sample of grants with terms and conditions attached, including the new Covid-19 related grants, to ensure that where management judgements have been made relating to the recognition of the income, all terms and conditions have been achieved.

# Value for Money

## Areas of focus

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We are required to consider the Trust's arrangements for securing economy, efficiency and effectiveness in the use of resources. In accordance with Code of Audit Practice 2020 and related Auditor Guidance Note 03, we are required to:

- Perform work to understand the Trust's arrangements to secure economy, efficiency and effectiveness in the use of resources against each of the three reporting criteria (financial sustainability, governance, and improving economy, efficiency and effectiveness);
- Undertake a risk assessment to identify whether there are any risks of significant weaknesses in arrangements;
- If any risks of significant weaknesses are identified, perform procedures to determine whether there is in fact a significant weakness in arrangements, and if so to make recommendations for improvement;
- Issue a narrative commentary in the Auditor's Annual Report, setting out the work undertaken in respect of the reporting criteria and our findings, including any explanation needed in respect of judgements or local context for findings. If significant weaknesses are identified, the weaknesses and recommendations will be included in the reporting, together with follow-up of previous recommendations and whether they have been implemented. Where relevant, we may include reporting on any other matters arising we consider relevant to VfM arrangements, which might include emerging risks or issues.

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Where significant weaknesses are identified, report this by exception within our financial statement audit opinion.

AGN03 requires auditors to set out the results of their risk assessment as part of the audit planning report. Specific areas that we expect to focus on in understanding the Council's arrangements include the Council's longer term planning for financial sustainability and the 2018 Ofsted findings in relation to children's services.

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# Value for Money

## Areas of focus (continued)

Risk identified	Our response
<p><b>Ofsted findings</b></p> <p>In November and December 2018, Ofsted conducted an inspection of children’s social care services. Following this inspection, the Children’s Services were given an overall rating in the report (January 2019) of ‘Inadequate’.</p>	<p>Our work in this area will involve:</p> <ul style="list-style-type: none"><li>• Review of any subsequent correspondence with Ofsted;</li><li>• Consideration of the findings and conclusions made in the Ofsted report, including review of the Council’s progress to date in delivering actions to address the findings; and</li><li>• Review of management progress in developing an action plan and the arrangements put in place by the Council to deliver improvement</li></ul>
<p><b>Financial Sustainability</b></p> <p>The Council, like most of the local government sector, faces significant challenges over the short and medium term due to the ongoing cuts in funding and increased demand for services. Covid-19 presents a significant financial challenge for the Council in 2021/22 and beyond. We are aware of a number of s114 notices having been issued by other authorities. Within the Local Government Finance Act 1988, Section 114 (3) dictates that: “The chief finance officer of a relevant authority shall make a report under this section if it appears to him that the expenditure of the authority incurred (including expenditure it proposes to incur) in a financial year is likely to exceed the resources (including sums borrowed) available to it to meet that expenditure”.</p>	<p>Our work in this area will involve:</p> <ul style="list-style-type: none"><li>• Obtaining an understanding of the Council’s Medium Term Financial Plan, budget for 2022/23 and transformation programmes;</li><li>• Discussions with the Director of Resources, and senior operational staff;</li><li>• Review of the Council’s draft Narrative Report, Annual Governance Statement and Council papers and minutes;</li><li>• Consideration of issues identified in our financial statements audit work;</li><li>• Consideration of the Council’s financial results, including delivery of savings, and the Council’s plan;</li><li>• Review of any reports from regulators issued in the year; and</li><li>• Consider the arrangements the Council has in place and if there is any risk of a s114 notice being required.</li></ul>

# Purpose of our report and responsibility statement

## Our report is designed to help you meet your governance duties

### What we report

Our report is designed to establish our respective responsibilities in relation to the financial statements audit, to agree our audit plan and to take the opportunity to ask you questions at the planning stage of our audit. Our audit plan, includes our consideration of key audit judgements and our planned scope.

### Use of this report

This report has been prepared for the Audit Committee on behalf of the Council, as a body, and we therefore accept responsibility to you alone for its contents. We accept no duty, responsibility or liability to any other parties, since this report has not been prepared, and is not intended, for any other purpose. Except where required by law or regulation, it should not be made available to any other parties without our prior written consent.

We welcome the opportunity to discuss our report with you and receive your feedback.

### What we don't report

As you will be aware, our audit is not designed to identify all matters that may be relevant to the Council.

Also, there will be further information you need to discharge your governance responsibilities, such as matters reported on by management or by other specialist advisers.

Finally, the views on internal controls and business risk assessment in our final report should not be taken as comprehensive or as an opinion on effectiveness since they will be based solely on the audit procedures performed in the audit of the financial statements and the other procedures performed in fulfilling our audit plan.

### Other relevant communications

We will update you if there are any significant changes to the audit plan.

In the prior year, we communicated audit findings and control recommendations to management, and these will be followed up as part of our audit visits to assess how these have been addressed in the current year.



**Deloitte LLP**

Newcastle upon Tyne | 10 October 2023

# Appendices

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# Audit adjustments

## Prior year unadjusted misstatements

The following uncorrected misstatements were raised as part of the prior year audit. These uncorrected misstatements decreased the surplus by £3.2 million, decreased net assets by £4.2 million and decreased OCI by £1 million.

		Debit/ (credit) Comprehensive Income and Expenditure Statement £m	Debit/ (credit) OCI £m	Debit/(credit) Net Assets £m	Debit/ (credit) General Fund £m	Debit/ (credit) Unusable Reserves £m
<b>Misstatements identified in current year</b>						
Assets not depreciated in first year of use	[1]	1.0	-	(1.0)	-	-
Valuation of Council owned car parks	[2]	3.6	-	(3.6)	-	-
Valuation of Houndshill Shopping Centre	[3]	(1.4)	-	1.4	-	-
Impact of Goodwin pension ruling	[4]	-	1.0	(1.0)	-	-
<b>Total</b>		<b>3.2</b>	<b>1.0</b>	<b>(4.2)</b>	<b>-</b>	<b>-</b>

[1] Judgemental misstatement due to the Council not depreciating assets in the first year of acquisition.

[2] Errors identified in the valuations of car parks.

[3] Error due to the draft valuation for Houndshill Shopping Centre used in the production of the financial statements.

[4] Judgemental misstatement in relation to the impact of the Goodwin ruling on the pension liability.

# Audit adjustments

## Prior year disclosures

### Disclosure misstatements

The following uncorrected disclosure misstatements were identified as part of the prior year audit.

Disclosure	Finding
<b>Note 14. Property, Plant and Equipment – Houndshill Shopping Centre depreciation</b>	Our testing identified that the Houndshill Shopping Centre was not depreciated in 2020/21. The depreciation charge for the year should have been £0.8m. However, as the Shopping Centre has been fully revalued at the year end, there is no impact on the CIES of not including this depreciation charge, as this charge would be written out of the CIES at 31 March 2021. As a result, we have included this a disclosure only finding as the charge should be reflected in note 14.
<b>Note 19. Financial Instruments</b>	As part of our accruals testing, we identified that the Council had accrued for several invoices that were received pre year end. We would normally expect these to be included in trade creditors at the year end rather than being accrued for. Accruals have been correctly excluded by the Council from note 19, as they do not meet the definition of a financial instrument. However, as the Council has actually received the invoices for these accruals, we believe they should not have been excluded. As we have only tested a sample we have calculated an expected error, which totals £1m. Therefore based on this calculation we would expect the creditors value in note 19 to increase by £1m.

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# Our other responsibilities explained

## Fraud responsibilities

We will make the following inquiries regarding fraud and non-compliance with laws and regulations:



### **Management and other personnel:**

- Management's assessment of the risk that the financial statements may be materially misstated due to fraud, including the nature, extent and frequency of such assessments.
- Management's process for identifying and responding to risks of fraud.
- Management's communication, if any, to those charged with governance regarding its processes for identifying and responding to the risks of fraud.
- Management's communication, if any, to employees regarding its views on business practices and ethical behaviour.
- Whether management has knowledge of any actual, suspected or alleged fraud affecting the entity.
- We plan to involve management from outside the finance function in our inquiries
- We will also make inquiries of personnel who are expected to deal with allegations of fraud raised by employees or other parties.

### **Internal audit**



- Whether internal audit has knowledge of any actual, suspected or alleged fraud affecting the entity, and to obtain its views about the risks of fraud.

### **Those charged with governance**



- How those charged with governance exercise oversight of management's processes for identifying and responding to the risks of fraud in the entity and the internal control that management has established to mitigate these risks.
- Whether those charged with governance have knowledge of any actual, suspected or alleged fraud affecting the entity.
- The views of those charged with governance on the most significant fraud risk factors affecting the entity, including those specific to the sector.



# Our other responsibilities explained

## Fraud responsibilities



### **Your Responsibilities:**

The primary responsibility for the prevention and detection of fraud rests with management and those charged with governance, including establishing and maintaining internal controls over the reliability of financial reporting, effectiveness and efficiency of operations and compliance with applicable laws and regulations.



### **Our responsibilities:**

- We are required to obtain representations from your management regarding internal controls, assessment of risk and any known or suspected fraud or misstatement.
- As auditors, we obtain reasonable, but not absolute, assurance that the financial statements as a whole are free from material misstatement, whether caused by fraud or error.
- As set out in the significant risks section of this document, we have identified risks of material misstatement due to fraud in accrued expenditure, and management override of controls.
- We will explain in our audit report how we considered the audit capable of detecting irregularities, including fraud. In doing so, we will describe the procedures we performed in understanding the legal and regulatory framework and assessing compliance with relevant laws and regulations.
- We will communicate to you any other matters related to fraud that are, in our judgment, relevant to your responsibilities. In doing so, we shall consider the matters, if any, regarding management's process for identifying and responding to the risks of fraud and our assessment of the risks of material misstatement due to fraud.



### **Fraud Characteristics:**

- Misstatements in the financial statements can arise from either fraud or error. The distinguishing factor between fraud and error is whether the underlying action that results in the misstatement of the financial statements is intentional or unintentional.
- Two types of intentional misstatements are relevant to us as auditors – misstatements resulting from fraudulent financial reporting and misstatements resulting from misappropriation of assets.

# Independence and fees

As part of our obligations under International Standards on Auditing (UK), we are required to report to you on the matters listed below:

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<b>Independence confirmation</b>	We confirm the audit engagement team, and others in the firm as appropriate, Deloitte LLP and, where applicable, all Deloitte network firms are independent of the Council and will reconfirm our independence and objectivity to the Audit Committee for the year ending 31 March 2022 in our final report to the Audit Committee.
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<b>Fees</b>	There are no non-audit fees for 2021/22 outside of those noted in the table on the following page.
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<b>Non-audit services</b>	We continue to review our independence and ensure that appropriate safeguards are in place including, but not limited to, the rotation of senior partners and professional staff and the involvement of additional partners and professional staff to carry out reviews of the work performed and to otherwise advise as necessary.
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<b>Relationships</b>	We have no other relationships with the Council, its directors, senior managers and affiliates, and have not supplied any services to other known connected parties.
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## Independence and fees (continued)

The professional fees expected to be charged by Deloitte in the period from 1 April 2021 to 31 March 2022 are as follows:

	Current year £	Prior year £
Financial statement audit including Whole of Government	84,818	84,818
Additional fee for prior year audit [1]*	-	TBC
Additional fee for changes in the current year [2]*	TBC	-
<b>Total audit</b>	<b>84,818</b>	<b>TBC</b>
Audit related assurance services – Teachers pension return	TBC	4,000
Audit related assurance services – Pooling of Housing Capital Receipts	TBC	5,000
<b>Total assurance services</b>	<b>TBC</b>	<b>9,000</b>
<b>Total fees</b>	<b>TBC</b>	<b>TBC</b>

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[1] During the 2020/21 audit we have been required to complete additional procedures that are not taken into account in the scale fee of £84,818 above. Following the completion of the audit we will discuss the fee implications with the Director of Resources and present our fee proposal back to the Audit Committee.

[2] Fee for additional audit work to be agreed once the audit has been concluded. We expect there to be additional procedures for areas such as Covid-19 grant work, value for money work and any other one-off transactions. The fee is also based on receipt of audit information on a timely basis and the draft accounts being of good quality.

\* All additional fees are subject to agreement with PSAA.

# Our approach to quality

## FRC 2022/23 Audit Quality Inspection and Supervision report

Audit quality is at the heart of everything we do. We are committed to acting with the highest levels of integrity in the public interest to deliver confidence and trust in business.

In July 2023, the Financial Reporting Council (“FRC”) issued individual reports on each of the seven largest firms, including Deloitte on Audit Quality Inspection and Supervision, providing a summary of the findings of its Audit Quality Review (“AQR”) team for the 2022/23 cycle of reviews.

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We greatly value the FRC reviews of our audit engagements and firm wide quality control systems, a key aspect of evaluating our audit quality.

In that context, our inspection results for our audits selected by the FRC as part of the 2022/23 inspection cycle remain consistent year-on-year, with 82% of all inspections in the cycle assessed as good or needing limited improvement. This reflects the ongoing investment we continue to make in audit quality, with a relentless focus on continuous improvement. Our audit culture and the audit quality environment we create are critical to our resilience and reputation as a business and we remain committed to our role in protecting the public interest and creating pride in our profession.

We value the observations raised by both the FRC AQR and Supervision teams, both in identifying areas for improvement and also the increasing focus on sharing good practice to drive further and continuous improvement.

We are pleased to see the positive impact of actions taken over the last 12-18 months to address findings raised by the FRC in the prior year relating to EQCR, Independence & Ethics and Group Audits, with none of these areas identified as key findings in this year’s engagement inspection cycle. The reduction in findings in this area reflects the ongoing effectiveness of the actions taken, particularly the successful rollout of our group audit coaching programme. Our EQCR transformation programme, which commenced in the second half of 2021, has served to further enhance the effectiveness of our EQCR process and led to improved evidence on our audit files demonstrating the EQCR challenge.

We welcome the breadth and depth of good practice points raised by the FRC, particularly in respect of effective group oversight and effective procedures for impairments, where we have made sustained efforts and investment to drive consistency and high-quality execution.

All the AQR public reports are available on the FRC's website:

[Audit Firm Specific Reports - Tier 1 audit firms | Financial Reporting Council \(frc.org.uk\)](#)

# Our approach to quality

## FRC 2022/23 Audit Quality Inspection and Supervision report

### **The AQR's 2022/23 Audit Quality Inspection and Supervision Report on Deloitte LLP**

"In the 2021/22 public report, we concluded that the firm had continued to show improvement in relation to its audit execution and firm-wide procedures.

82% of audits inspected were found to require no more than limited improvements. None of the audits we inspected this year were found to require significant improvements and 82% required no more than limited improvements, the same as last year. This was the case for 78% of FTSE 350 audits (91% last year). The firm has maintained its focus on audit quality on individual audits, with consistent FRC inspection results.

The areas of the audit that contributed most to the audits assessed as requiring improvements were revenue and margin recognition, and provisions. There continues to be findings related to the audit of provisions, which was a key finding last year, although in different areas of provisioning. At the same time, we identified a range of good practice in these and other areas."

### **Inspection results: review of the firm's quality control procedures**

"This year, our firm-wide work focused primarily on evaluating the firm's: actions to implement the FRC's Revised Ethical Standard; partner and staff matters; acceptance, continuance, and resignation procedures; and audit methodology relating to settlement and clearing processes.

Our key findings related to compliance with the FRC's Revised Ethical Standard, timely continuance procedures, and audit methodology relating to settlement and clearing processes.

We identified good practice points in the areas of compliance with the FRC's Revised Ethical Standard, partner and staff matters, and acceptance, continuance and resignation procedures."

# Value for Money deadline extension

## Letter to the Audit Committee highlighting Value for Money deadline extension

Dear Audit Committee

The National Audit Office issued guidance to auditors on 16 April 2021 setting out a revised timetable for completion of work on arrangements to secure value for money. This revised timetable reflected the impact of the ongoing pandemic on preparers and auditors of accounts. That guidance, established that the Auditor's Annual Report should be published within three months of the signing of the Audit Opinion. Therefore we have not yet issued our Auditor's Annual Report. Under the 2020 Code of Audit Practice, we are required to provide this letter setting out the reasons for the Auditor's Annual Report not being issued by 30 November 2022.

Yours faithfully

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Msola Wright  
Audit Partner



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<b>Report to:</b>	<b>AUDIT COMMITTEE</b>
<b>Relevant Officer:</b>	Mark Towers, Director of Governance and Partnerships
<b>Date of Meeting</b>	19 October 2023

## COVERT SURVEILLANCE POLICY

### 1.0 Purpose of the report:

1.1 To consider updates to the Council's Covert Surveillance Policy (formally known as the RIPA Policy) for approval.

### 2.0 Recommendation(s):

2.1 To approve the updated Covert Surveillance Policy and authorise the Director of Governance and Partnerships to make any minor amendments as required.

2.2 That should the policy require further significant updating following the November inspection, then it be brought back to this Committee at a future meeting

### 3.0 Reasons for recommendation(s):

3.1 To bring the policy up to date to reflect current good practice and to recognise and record that some covert surveillance activity undertaken by the Council falls outside of the Regulation of Investigatory Powers Act (2000). The main updates have been in connection with future proofing the document rather than changing the substance and meaning/ interpretation of the policy. The changes are shown in colour. Any proposed deletions have a ~~striketrough~~ change.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

N/a

### 4.0 Council Priority:

4.1 The use of covert surveillance supports the achievement of all Council priorities.

## 5.0 Background and Key Information

5.1 The Regulation of Investigatory Powers Act 2000 regulates covert investigations by various bodies, including local authorities. It was introduced to ensure that individuals' rights are protected whilst ensuring that law enforcement and security agencies have the powers they need to do their job effectively. The Act provides a framework within which activities, which it covers, can be carried out in a manner consistent with the individuals Human Rights. It also provides statutory protection for the authority concerned if its provisions are adhered to.

5.2 The Council has an agreed policy in place and this was last approved by the Audit Committee on 14<sup>th</sup> November 2019. The purpose of the policy is to:

- Explain the scope of the 2000 Act and where it applies.
- Provide guidance on the internal authorisation procedures to be followed.
- Provide guidance on applications for judicial approval.

The 2000 Act requires that when the Council undertakes 'directed surveillance' or uses a 'covert human intelligence source' these activities must only be authorised by an officer with delegated powers when the relevant statutory criteria is satisfied.

5.3 Authorisation and judicial approval under the 2000 Act gives lawful authority to carry out surveillance and the use of a human intelligence source. Obtaining authorisation and judicial approval protects the Council and its officers from complaints of interference with the rights protected by Article 8 (1) of the European Convention on Human Rights enshrined in English law through the Human Rights Act 1998. Provided activities undertaken are also "reasonable and proportionate", they will not be in contravention of Human Rights legislation.

5.4 The Council has a Corporate RIPA Group which meets two or three times per year to keep an overview of surveillance activities across the Council. The Group is chaired by the Director of Governance and Partnerships and includes those responsible for governance, policy, authorisation and monitoring of covert surveillance activities across the Council.

5.5 The Group has oversight of the policy and identified a number of changes which needed to be made to help ensure that the policy continues to keep the Council legally compliant whilst also reflecting working practices which have been developed such as the use of social media and the non-RIPA authorisation process.

- 5.6 The Council is externally inspected on its use of covert surveillance approximately every three years. The next inspection visit is on the 9<sup>th</sup> November 2023. Should there be any minor drafting changes required following the inspection then authority is sought for the Director of Governance and Partnerships to make these. If anything significant or new is required following the inspection then a further report will be submitted to this committee.

Does the information submitted include any exempt information? No

**List of Appendices:**

Appendix 6(a) - Covert Surveillance Policy and Guidance

**6.0 Financial considerations:**

- 6.1 The covert surveillance process is already embedded into the Council's investigatory activities and therefore will not result in an additional cost.

**7.0 Legal considerations:**

- 7.1 Non-adherence to the Policy could result the Council contravening the Human Rights Act and may prevent the successful prosecution of those identified as committing criminal activities.

**8.0 Risk management considerations:**

- 8.1 There is a risk that the Council is subject to legal action due to non-compliance with the RIPA legislation due to a breach of the Human Rights Act.
- 8.2 Staff involved in the process are offered the opportunity to attend training on the procedures which need to be followed when planning to undertake covert surveillance.

**9.0 Equalities considerations and the impact of this decision for our children and young people:**

- 9.1 The Covert Surveillance Policy does not discriminate or adversely impact protected groups in any way. More detailed reflection on how specific covert surveillance could affect people differently because of shared protected characteristics as defined in the Equality Act will be considered on a case by case basis.

**10.0 Sustainability, climate change and environmental considerations**

- 10.1 None.

**11.0 Internal/ External Consultation undertaken:**

11.1 The Covert Surveillance Policy has been prepared in consultation with the Corporate RIPA Group.

**12.0 Background papers:**

12.1 Regulation of Investigatory Powers Act (2000)

# Covert Surveillance Policy and Guidance

Regulation of Investigatory  
Powers Act 2000  
(RIPA)

**Section 1 – Current Roles**

Senior Responsible Officer (SRO)

Mark Towers                      Director of Governance and Partnerships

Central Records Officer

Lee Scott                          Legal Practice Manager

Authorising Officers

Lynn Barugh	Employee Relations Manager
Tracy Greenhalgh	Head of Audit and Risk
Tracy Hargreaves	Business Support Services Manager
Hilary Wood	Head of School Finance and Funding
Amanda Jones	Admin and Quality Manager
Steve Thompson	Director of Resources
Neil Jack	Chief Executive

Gatekeepers

Jennifer Clayton	Head of Public Protection and Enforcement
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## **PART A Introduction and RIPA General**

### **1. Introduction**

- 1.1 The performance of certain investigatory functions of Local Authorities may require the surveillance of individuals or the use of undercover officers and informants. Such actions may intrude on the privacy of individuals and can result in private information being obtained and as such, should not be undertaken without full and proper consideration. The Regulation of Investigatory Powers Act 2000 (RIPA) governs these activities and provides a means of ensuring that they are carried out in accordance with law and subject to safeguards against abuse.
- 1.2 All surveillance activity can pose a risk to the Council from challenges under the Human Rights Act (HRA) or other processes. Therefore, it must be stressed that all staff involved in the process must take their responsibilities seriously which will assist with the integrity of the Council's processes, procedures and oversight responsibilities.
- 1.3 In preparing this policy the Council has followed the RIPA Codes of Practice (August 2018). ~~Office of Surveillance Commissioners (OSC) Procedures and Guidance 2016 (still current).~~
- 1.4 If having read this document you are unclear about any aspect of the process, seek the advice from the Council's Head of Legal or nominated representative.

### **2. Scope of Policy**

- 2.1 The purpose of this Policy is to ensure there is a consistent approach to the authorisation and undertaking of surveillance activity that is carried out by the Council and its wholly owned companies. This includes the use of undercover officers and informants, known as Covert Human Intelligence Sources (CHIS). This will ensure that the Council and its companies comply with the Regulation of Investigatory Powers Act 2000 (RIPA).
- 2.2 This document provides guidance on the authorisation processes and the roles of the respective staff involved.
- 2.3 The policy also provides guidance on surveillance which is necessary to be undertaken by the authority but cannot be authorised under the RIPA legislation. This type of surveillance will have to be compliant with the Human Rights Act. (See section 3).
- 2.4 The policy also identifies the cross over with other policies and legislation, particularly with the Human Rights Act, Data Protection Act and the Criminal Procedures Act.
- 2.5 All RIPA covert activity will have to be authorised and conducted in accordance with this policy, the RIPA legislation and Codes of Practice. Therefore, all officers involved

in the process will have regard to this document and the statutory RIPA Codes of Practice issued under section 71 RIPA (current version issued in August 2018) for both Directed Surveillance and the use of Covert Human Intelligence Sources (CHIS). The Codes of Practice are available from <https://www.gov.uk/government/collections/ripa-codes#current-codes-of-practice>

### 3. Background to RIPA and Lawful Criteria

- 3.1 On 2 October 2000, the Human Rights Act 1998 (HRA) came into force making it potentially unlawful for a Local Authority to breach any article of the European Convention on Human Rights (ECHR).
- 3.2 Article 8 of the European Convention on Human Rights states that:
- 1) Everyone has the right of respect for his private and family life, his home and his correspondence.
  - 2) There shall be no interference by a Public Authority with the exercise of this right except such as in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health and morals or for the protection of the rights and freedoms of others.
- 3.3 The right under Article 8 is a qualified right and Public Authorities can interfere with this right for the reasons given in 3.2 (2) above if it is necessary and proportionate to do so.
- 3.4 Those who undertake Directed Surveillance or CHIS activity on behalf of a Local Authority may breach an individual's Human Rights, unless such surveillance is **lawful**, consistent with Article 8 of the ECHR and is both **necessary** (see section 42) and **proportionate** (see section 43) to the matter being investigated.
- 3.5 RIPA provides the legal framework for lawful interference to ensure that any activity undertaken, together with the information obtained, is HRA compatible.
- 3.6 However, under RIPA, Local Authorities can now only authorise Directed Surveillance for the purpose of preventing or detecting conduct which constitutes a criminal offence which is punishable (whether on summary conviction or indictment) by a maximum term of at least six months imprisonment; (serious crime criteria) or involves the sale of alcohol or tobacco to children. (See section 14)
- 3.7 The **lawful criteria for CHIS** authorisation is **prevention and detection of crime and prevention of disorder** and the offence does not have to have a sentence of 6 months imprisonment.

- 3.8 Furthermore, the Council's authorisation can only take effect once an Order approving the authorisation has been granted by a Justice of the Peace (JP).
- 3.9 RIPA ensures that any surveillance which is undertaken following a correct authorisation and approval from a Justice of the Peace is lawful. Therefore, it protects the authority from legal challenge. It also renders evidence obtained lawful for all purposes.

#### **4. Consequences of Not Following RIPA**

4.1 Although not obtaining authorisation does not make the authorisation unlawful per se, it does have some consequences:

- Evidence that is gathered may be inadmissible in court;
- The subjects of surveillance can bring their own claim on Human Rights grounds i.e. the Council has infringed their rights under Article 8;
- If a challenge under Article 8 is successful, the Council would receive reputational damage and could face a claim for financial compensation;
- The Government has also introduced a system of tribunal to deal with complaints. Any person who believes that their rights have been breached can have their complaint dealt with by the Investigatory Powers Tribunal (IPTC) (See Complaints section 66); and
- It is likely that the activity could be construed as an error and therefore have to be investigated and a report submitted by the Senior Responsible Officer to the Investigatory Powers Commissioner's Office (IPCO). (See Section 65 Errors)

#### **5. Independent Oversight**

- 5.1 RIPA was overseen by the Office of Surveillance Commissioners (OSC). However, from 1 September 2017 oversight is now provided by the Investigatory Powers Commissioner's Office (IPCO). They are the independent inspection office whose remit includes providing comprehensive oversight of the use of the powers to which the RIPA code applies and adherence to the practices and processes described in it. They also provide guidance to be followed, which is separate to the codes.
- 5.2 They have unfettered access to all locations, documentation and information systems as is necessary to carry out their full functions and duties and they will periodically inspect the records and procedures of the Council to ensure the appropriate authorisations have been given, reviewed, cancelled, and recorded properly.

- 5.3 It is the duty of any person who uses these powers to comply with any request made by a Commissioner to disclose or provide any information they require for the purpose of enabling them to carry out their functions. Therefore, it is important that the Council can show it complies with this Policy and with the provisions of RIPA.

## **PART B Surveillance, Types and Criteria**

### **6. Introduction**

- 6.1 It is important to understand the definition of surveillance; what activities are classed as surveillance and the different types of surveillance covered by RIPA and the HRA. Surveillance can be both overt and covert and depending on their nature, are either allowed to be authorised under RIPA or not. There are also different degrees of authorisation depending on the circumstances.

### **7. Surveillance Definition**

#### **7.1 Surveillance is:**

- Monitoring, observing or listening to persons, their movements, their conversations or their other activities or communications.
- Recording anything monitored, observed or listened to in the course of surveillance, with or without the assistance of a device.

### **8. Overt Surveillance**

- 8.1 Overt surveillance is where the subject of surveillance is aware that it is taking place, either by way of signage such as in the use of CCTV or because the person subject of the surveillance has been informed of the activity. Overt surveillance is outside the scope of RIPA and therefore does not require authorisation. However, it still must take account of privacy under the Human Rights Act and be necessary and proportionate. Any personal data obtained will also be subject of the [UK](#) General Data Protection Regulation and Data Protection Act.

### **9. Covert Surveillance**

- 9.1 Covert Surveillance is defined as “surveillance which is carried out in a manner calculated to ensure that the persons subject to the surveillance are unaware that it is or may be taking place” and is covered by RIPA. Covert surveillance is categorised as either **intrusive** or **directed**.

- 9.2 There are three categories of covert surveillance regulated by RIPA:

- 1) **Intrusive surveillance** (Local Authorities are not permitted to carry out intrusive surveillance).

2) **Directed Surveillance;**

3) **Covert Human Intelligence Sources (CHIS);**

## **10. Intrusive Surveillance**

10.1 Blackpool Council has no authority in law to carry out Intrusive Surveillance. It is only the Police and other law enforcement agencies that can lawfully carry out intrusive surveillance.

10.2 Intrusive surveillance is defined in section 26(3) of the 2000 Act as covert surveillance that:

- Is carried out in relation to anything taking place on any residential premises or in any private vehicle; and
- Involves the presence of an individual on the premises or in the vehicle or is carried out by means of a surveillance device.

10.3 Where surveillance is carried out in relation to anything taking place on any residential premises or in any private vehicle by means of a device, without that device being present on the premises, or in the vehicle, it is not intrusive unless the device consistently provides information of the same quality and detail as might be expected to be obtained from a device actually present on the premises or in the vehicle. Thus, an observation post outside premises, which provides a limited view and no sound of what is happening inside the premises, would not be considered as intrusive surveillance.

10.4 A risk assessment of the capability of equipment being used for surveillance on residential premises and private vehicles, such as high-powered zoom lenses, should be carried out to ensure that its use does not meet the criteria of Intrusive Surveillance.

## **11. Directed Surveillance Definition**

11.1 The Council can lawfully carry out Directed Surveillance. Surveillance is Directed Surveillance if the following are all true:

- It is covert, but not intrusive surveillance;
- It is conducted for the purposes of a specific investigation or operation;
- It is likely to result in the obtaining of private information (see private information below) about a person (whether or not one specifically identified for the purposes of the investigation or operation);

- It is conducted otherwise than by way of an immediate response to events or circumstances the nature of which is such that it would not be reasonably practicable for an authorisation to be sought.

## 12. Private information

- 12.1 By its very nature, surveillance may involve invading an individual's right to privacy. The level of privacy which individuals can expect depends upon the nature of the environment they are in at the time. For example, within an individual's own home or private vehicle, an individual can expect the highest level of privacy. The level of expectation of privacy may reduce if the individual transfers out into public areas.
- 12.2 The Codes of Practice provides guidance on what is private information (page 15). They state private information includes any information relating to a person's private or family life. As a result, private information is capable of including any aspect of a person's private or personal relationship with others, such as family and professional or business relationships.
- 12.3 Whilst a person may have a reduced expectation of privacy when in a public place, covert surveillance of that person's activities in public may still result in the obtaining of private information. This is likely to be the case where that person has a reasonable expectation of privacy even though acting in public and where a record is being made by a Public Authority of that person's activities for future consideration or analysis. Surveillance of publicly accessible areas of the internet should be treated in a similar way, recognising that there may be an expectation of privacy over information which is on the internet, particularly where accessing information on social media websites.
- 12.4 Private life considerations are particularly likely to arise if several records are to be analysed together in order to establish, for example, a pattern of behaviour, or if one or more pieces of information (whether or not available in the public domain) are covertly (or in some cases overtly) obtained for the purpose of making a permanent record about a person or for subsequent data processing to generate further information. In such circumstances, the totality of information gleaned may constitute private information even if individual records do not. Where such conduct includes covert surveillance, a Directed Surveillance authorisation may be considered appropriate.
- 12.5 Private information may include personal data, such as names, telephone numbers and address details. Where such information is acquired by means of covert surveillance of a person having a reasonable expectation of privacy, a Directed Surveillance authorisation is appropriate.
- 12.6 Information which is non-private may include publicly available information such as, books, newspapers, journals, TV and radio broadcasts, newswires, websites, mapping imagery, academic articles, conference proceedings, business reports, and more. Such information may also include commercially available data where a fee

may be charged, and any data which is available on request or made available at a meeting to a member of the public.

- 12.7 There is also an assessment to be made regarding the risk of obtaining collateral intrusion which is private information about persons who are not subjects of the surveillance (see section 47).

### **13. Confidential or Privileged Material**

- 13.1 Particular consideration should be given in cases where the subject of the investigation or operation might reasonably assume a high degree of confidentiality. This includes where the material contains information that is legally privileged, confidential journalistic material or where material identifies a journalist's source, where material contains confidential personal information or communications between a Member of Parliament and another person on constituency business. Directed Surveillance likely or intended to result in the acquisition of knowledge of confidential or privileged material must be authorised by the Chief Executive or nominated Deputy.

- 13.2 **Advice should be sought from the Head of Legal or nominated representative if there is a likelihood of obtaining this type of material.**

### **14. Lawful Grounds**

- 14.1 As mentioned earlier the Lawful Grounds for Directed Surveillance is a higher threshold for Local Authorities and cannot be granted unless it is to be carried out for the purpose of preventing or detecting a criminal offence(s) and it meets the serious crime test i.e. that the criminal offence(s) which is sought to be prevented or detected is:

- 1) Punishable, whether on summary conviction or on indictment, by a maximum term **of at least 6 months of imprisonment**, or,
- 2) Would constitute an offence under sections 146, 147 or 147A of the Licensing Act 2003 or section 7 of the Children and Young Persons Act 1933 (see 1.4 above). This is the only ground available to the Council and hence the only justification.

- 14.2 Preventing or detecting crime goes beyond the prosecution of offenders and includes actions taken to avert, end or disrupt the commission of criminal offences

### **15. Test Purchases**

- 15.1 Test purchase activity does not in general require authorisation as a CHIS under RIPA as vendor-purchaser activity does not normally constitute a relationship as the contact is likely to be so limited. However, if a number of visits are undertaken at the same establishment to encourage familiarity, a relationship may be established

and authorisation as a CHIS should be considered. If the test purchaser is wearing recording equipment and is not authorised as a CHIS, or an adult is observing, consideration should be given to granting a Directed Surveillance authorisation.

- 15.2 When conducting covert test purchase operations at more than one establishment, it is not necessary to construct an authorisation for each premise to be visited, but the intelligence must be sufficient to prevent “fishing trips”. Premises may be combined within a single authorisation provided that each is identified at the outset. Necessity, proportionality, and collateral intrusion must be carefully addressed in relation to each of the premises. It is unlikely that authorisations will be considered proportionate without demonstration that overt methods have been considered or attempted and failed. (~~Sec 245 OSC Procedures & Guidance 2016~~)

**16. Urgent cases**

- 16.1 ~~As from 1 November 2012,~~ there is no provision to authorise urgent oral authorisations under RIPA for urgent cases as all authorisations have to be approved by a Justice of Peace (JP). If surveillance was required to be carried out in an urgent situation or as an immediate response, this would still have to be justified as necessary and proportionate under HRA. This type of surveillance is surveillance outside of RIPA, but still requires retrospective authorisation. (See Section 21 below).

**17. Surveillance for Preventing Disorder**

- 17.1 Authorisation for the purpose of preventing disorder can only be granted if it involves a criminal offence(s) punishable (whether on summary conviction or indictment) by a maximum term of at least 6 months' imprisonment. Surveillance for disorder not meeting these criteria would need to be carried out as surveillance outside of RIPA. (See Section 21 below)

**18. CCTV**

- 18.1 CCTV is now known as a Surveillance Camera Systems Section 29(6) Protection of Freedoms Act 2012. “Surveillance camera systems” is taken to include:

(a) closed circuit television (CCTV) or automatic number plate recognition (ANPR) systems;

(b) any other systems for recording or viewing visual images for surveillance purposes;

This includes:

- CCTV;
- Body Worn Video (BWV)
- Automatic Number Plate Recognition;
- Deployable mobile overt mobile camera systems.



- Any other system for recording or viewing visual images for surveillance purposes;
  - Any systems for storing, receiving, transmitting, processing or checking images or information obtained by those systems; and
  - Any other systems associated with, or otherwise connected with those systems.
- 18.2 The use of the conventional town centre CCTV systems operated by the Council do not normally fall under the RIPA regulations. However, it does fall under the [UK General Data Protection Regulation and Data Protection Act 2018](#), the [Surveillance Camera Code 2013 Update to Surveillance Camera Code of Practice - GOV.UK \(www.gov.uk\)](#), Information Commissioner's Office (ICO) 'In the picture: a data protection code of practice for surveillance cameras and personal information' and the Council's CCTV camera code of practice. However, should there be a requirement for the CCTV cameras to be used for a specific purpose to conduct surveillance it is likely that the activity will fall under Directed Surveillance and therefore require an authorisation.
- 18.3 Operators of the Council's CCTV system need to be aware of the RIPA issues associated with using CCTV and that continued, prolonged systematic surveillance of an individual may require an authorisation.
- 18.4 On the occasions when the CCTV cameras are to be used in a Directed Surveillance situation either by enforcement officers from relevant departments within the Council or outside Law Enforcement Agencies such as the Police, Blackpool Council's CCTV camera code of practice should be followed where relevant as well as the RIPA Codes of Practice.
- 18.5 The CCTV staff are to have a copy of the authorisation form in a redacted format, or a copy of the authorisation page. If it is an urgent oral authority from the Police, a copy of the applicant's notes are to be retained or at least some other document in writing which confirms the authorisation and exactly what has been authorised. It is important that the staff check the authority and only carry out what is authorised. A copy of the application or notes is also to be forwarded to the central register for filing. This will assist the Council to evaluate the authorisations and assist with oversight.
- 18.6 The Surveillance Camera Code of Practice ~~2013~~ defines a 'surveillance camera system' as:
- any other systems for recording or viewing visual images for surveillance purposes;
  - any systems for storing, receiving, transmitting, processing or checking the images or information obtained.

18.7 This definition will include body worn video (BWV) and overt cameras deployed to detect waste offences such as fly-tipping. This definition has far reaching implications as the use of any cameras that meet the requirement will have to be used in a manner that complies with the codes of practice mentioned above and the [UK General Data Protection Regulation and Data Protection Act 2018](#).

## **19. Automatic Number Plate Recognition (ANPR)**

19.1 Automated Number Plate Recognition (ANPR) does not engage RIPA if it is used for the purpose it is registered for, such as traffic flow management or safety and enforcement within car parks. However, it is capable of being a surveillance device if used in a pre-planned way to carry out surveillance by monitoring a particular vehicle by plotting its locations, e.g. in connection with illegally depositing waste (fly-tipping).

19.2 Should it be necessary to use any ANPR systems to monitor vehicles, the same RIPA principles apply where a Directed Surveillance Authorisation should be sought.

## **20 Internet and Social Media Investigations**

20.1 Online open source research is widely regarded as the collection, evaluation and analysis of material from online sources available to the public, whether by payment or otherwise to use as intelligence and evidence.

20.2 The use of online open source internet and social media research techniques has become a productive method of obtaining information to assist the Council with its regulatory and enforcement functions. It can also assist with service delivery issues and debt recovery. However, the use of the internet and social media is constantly evolving and with it the risks associated with these types of enquiries, particularly regarding breaches of privacy under Article 8 Human Rights Act (HRA) and other operational risks.

20.3 The internet is another method of carrying out surveillance (See definition section 7) and a computer is a surveillance device. Repeat viewing of individual 'open source' sites for the purpose of intelligence gathering and data collation may constitute Directed Surveillance. Activities of monitoring through, for example, a Facebook profile for a period of time and a record of the information is kept for later analysis or evidential purposes is likely to require a RIPA authorisation. Where covert contact is made with another person on the internet a CHIS authority may be required.

20.4 Where this is the case, the application process and the contents of this policy is to be followed.

20.5 Where the activity falls within the criteria of surveillance or CHIS outside of RIPA, again this will require authorising on a non RIPA form which will be authorised internally.

## 21. Surveillance Outside of RIPA (Non RIPA)

- 21.1 As already explained, for Directed Surveillance the criminal offence must carry a **6-month prison sentence** (Directed Surveillance crime threshold) or relate to the sale of alcohol or tobacco to children. This means that there are scenarios within an investigation that do not meet this threshold, however it is necessary to undertake surveillance. This will fall outside of RIPA. Examples include:
- Surveillance for anti-social behaviour disorder which do not attract a maximum custodial sentence of at least six months imprisonment.
  - Planning enforcement prior to the serving of a notice or to establish whether a notice has been breached.
  - Most licensing breaches.
  - Safeguarding vulnerable people.
  - Civil matters.
  - Disciplinary surveillance (see below).
- 21.2 In the above scenarios they are likely to be a targeted surveillance, which are likely to breach someone's article 8 rights to privacy. Therefore, the activity should be conducted in way which is HRA compliant, which will include necessary and proportionate.
- 21.3 Non RIPA surveillance also includes **staff disciplinary surveillance** in serious disciplinary investigations. Guidance dictates that this type of surveillance must be compliant with the Monitoring at Work Guidance issued by the Information Commissioner. This is to ensure that it complies with the HRA.
- 21.4 Should the investigation also involve a criminal offence which meet the RIPA criteria such as fraud, the option to carry out the surveillance under RIPA should be considered. However, it must be a genuine criminal investigation with a view to prosecuting the offender.
- 21.5 Should it be necessary to undertake disciplinary surveillance advice should be sought from the Head of Legal or nominated representative in conjunction with the Senior Responsible Officer (SRO).
- 21.6 As part of the process of formally recording and monitoring non RIPA surveillance, a non RIPA surveillance application form should be completed and authorised by an Authorising Officer (see Authorisation Flow Chart). A copy of the non RIPA surveillance application form can be obtained from [the Covert Surveillance Practitioners Team site](#). ~~The Hub~~.

21.7 The SRO will therefore maintain an oversight of non RIPA surveillance to ensure that such use is compliant with Human Rights legislation. The Central Records Officer will maintain a central record of non RIPA surveillance.

21.8 The RIPA codes also provide guidance that authorisation under RIPA is not required for the following types of activity; General observations ~~as per section 3.33~~ in the codes of practice that do not involve the systematic surveillance of an individual or a group of people and should an incident be witnessed the officer will overtly respond to the situation:

- Use of overt CCTV and Automatic Number Plate Recognition systems.
- Surveillance where no private information is likely to be obtained.
- Surveillance undertaken as an immediate response to a situation.
- The use of a recording device by a CHIS in respect of whom an appropriate use or conduct authorisation has been granted permitting them to record any information in their presence.

21.9 The Council still requires non RIPA documentation forms to be completed where:

- Covert surveillance not relating to criminal offence which carries a maximum sentence of 6 months imprisonment or relate to the sale of alcohol or tobacco to children (this is likely to be surveillance outside of RIPA).
- The covert recording of noise where the recording is of decibels only or constitutes non-verbal noise (such as music, machinery or an alarm), or the recording of verbal content is made at a level which does not exceed that which can be heard from the street outside or adjoining property with the naked ear. In the latter circumstance, the perpetrator would normally be regarded as having forfeited any claim to privacy. In either circumstance this is outside of RIPA.

## 22. Joint Agency Surveillance

22.1 In cases where one agency is acting on behalf of another, it is usually for the tasking agency to obtain or provide the authorisation. For example, where surveillance is carried out by Council employees on behalf of the Police, authorisation would be sought by the Police. If it is a joint operation involving both agencies, the lead agency should seek authorisation.

22.2 Council staff involved with joint agency surveillance are to ensure that all parties taking part are authorised on the authorisation form to carry out the activity. When staff are operating on another organisation's authorisation they are to ensure they see what activity they are authorised to carry out and make a written record. They must also provide a copy of the authorisation to the Central Records Officer. This

will assist with oversight of the use of Council staff carrying out these types of operations. Line Managers should be made aware if their staff are involved in this type of surveillance.

### **23. Use of Third-Party Surveillance**

- 23.1 In some circumstances it may be appropriate or necessary for Blackpool Council to work with third parties who are not themselves a Public Authority (such as an individual, company or non-governmental organisation) to assist with an investigation. Where that third party is acting in partnership with or under the direction of the Council, then they are acting as our agent and any activities that the third party conducts which meet the RIPA definitions of Directed Surveillance should be authorised. This is because the agent will be subject to RIPA in the same way as any employee of the Council would be. The Authorising Officer should ensure that the agents are qualified or have the necessary skills to achieve the objectives. They should also ensure that they understand their obligations under RIPA. If advice is required, [advice must be sought from](#) ~~please contact~~ the Head of Legal, or nominated representative.
- 23.2 Similarly, a surveillance authorisation should also be considered where the Council is aware that a third party (that is not a Public Authority) is independently conducting surveillance and the Council intends to make use of any suitable material obtained by the third party for the purposes of a specific investigation.

### **24. Surveillance Equipment**

- 24.1 The Council will maintain a central register of all surveillance equipment such as cameras ~~and~~, noise monitoring devices [and video recording doorbells](#). This will require a description, serial number and an explanation of its capabilities.
- 24.2 The register will be held [on the Corporate RIPA Group Team site](#). ~~and maintained by Central Records Officer~~. This equipment is available for all departments use.
- 24.3 All equipment capable of being used for Directed Surveillance such as cameras etc. should be fit for purpose for which they are intended.
- 24.4 When completing an Authorisation, the applicant must provide the Authorising Officer with details of any equipment to be used and its technical capabilities. The Authorising Officer will have to take this into account when considering the intrusion issues, proportionality and whether the equipment is fit for the required purpose. The Authorising Officer must make it clear on the Authorisation exactly what equipment if any they are authorising and in what circumstances.

## **PART C Covert Human Intelligence Sources (CHIS)**

## 25. Introduction

- 25.1 RIPA covers the activities of Covert Human Intelligence Sources (CHIS) which relates not only to sources commonly known as informants (members of the public providing the Council with information), but also the activities of undercover officers. It matters not whether they are employees of the Council, agents or members of the public engaged by the Council to establish or maintain a covert relationship with someone to obtain information.
- 25.2 Not all human source activity will meet the definition of a CHIS. For example, a source may be a public volunteer or someone who discloses information out of professional or statutory duty or has been tasked to obtain information other than by way of a covert relationship. However, Officers must be aware that such information may have been obtained in the course of an ongoing relationship with a family member, friend or business associate. The Council has a duty of care to all members of the public who provide information to us and appropriate measures must be taken to protect that source. How the information was obtained should be established to determine the best course of action. The source and information should also be managed correctly in line with CPIA and the disclosure provisions.
- 25.3 Recognising when a source becomes a CHIS is therefore important as this type of activity may need authorisation. Should a CHIS authority be required, all of the staff involved in the process should make themselves fully aware of the contents of this Policy and the CHIS codes of Practice.
- 25.4 A CHIS, their conduct and the use to which they are put is defined within Section 26(7) and (8) of RIPA [Regulation of Investigatory Powers Act 2000 \(RIPA\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/legislation/regulation-of-investigatory-powers-act-2000). Chapter 2 of the relevant Code provides examples of where this regime may apply.
- 25.5 Legal advice should always be sought where consideration is given to the use of CHIS.

## 26. Definition of CHIS

- 26.1 Individuals act as a covert human intelligence sources (CHIS) if they:
- i) establish or maintain a covert relationship with another person to obtain information.
  - ii) covertly give access to information to another person, or
  - iii) disclose information covertly which they have obtained using the relationship or they have obtained because the relationship exists.
- 26.2 A relationship is established, maintained or used for a covert purpose if and only if it is conducted in a manner that is calculated to ensure that one of the parties to the relationship is unaware of the purpose. This does not mean the relationship with the Council Officer and the person providing the information, as this is not covert. It

relates to how the information was either obtained or will be obtained. Was it or will it be obtained from a third party without them knowing it was being passed on to the Council? This would amount to a covert relationship.

- 26.3 It is possible, that a person will become engaged in the conduct of a CHIS without a public authority inducing, asking or assisting the person to engage in that conduct. An authorisation should be considered, for example, where a public authority is aware that a third party is independently maintaining a relationship (i.e. “self-tasking”) in order to obtain evidence of criminal activity, and the public authority intends to make use of that material for its own investigative purposes. (Section 2.26 Codes of CHIS Codes of Practice)

## 27. Vulnerable and Juvenile CHIS

- 27.1 Special consideration must be given to the use of a Vulnerable Individual as a CHIS. A ‘Vulnerable Individual’ is a person who is or may be in need of community care services by reason of mental or other disability, age or illness and who is or may be unable to take care of himself, or unable to protect himself against significant harm or exploitation. Any individual of this description, or a Juvenile as defined below, should only be authorised to act as a source in the most exceptional circumstances and only then when authorised by the Chief Executive or, in their absence, the nominated Deputy.
- 27.2 Special safeguards also apply to the use or conduct of Juvenile Sources; that is sources under the age of 18 years. On no occasion should the use or conduct of a source under 16 years of age be authorised to give information against his parents or any person who has parental responsibility for him.
- 27.3 If the use of a Vulnerable Individual or a Juvenile is being considered as a CHIS you must consult with the Head of Legal or nominated representative before authorisation is sought as authorisations should not be granted in respect of a Juvenile CHIS unless the special provisions contained within the Regulation of Investigatory Powers (Juveniles) Order 2000; SI No. 2793 are satisfied [The Regulation of Investigatory Powers \(Juveniles\) Order 2000 \(legislation.gov.uk\)](https://www.legislation.gov.uk/uksi/2000/2793).

## 28. Lawful Criteria

- 28.1 The lawful criteria for CHIS authorisation is **prevention and detection of crime and prevention of disorder**. The serious crime criteria of the offence carrying a 6-month sentence etc. does not apply to CHIS.
- 28.2 Authorisations for Juvenile Sources must be authorised by the Chief or, in their absence, the nominated Deputy.

## 29. Conduct and Use of a Source

- 29.1 The way the Council use a CHIS for covert activities is known as ‘the use and conduct’ of a source.
- 29.2 The use of a CHIS involves any action on behalf of a Public Authority to induce, ask or assist a person to engage in the conduct of a CHIS, or to obtain information by means of the conduct of a CHIS.
- 29.3 The conduct of a CHIS is establishing or maintaining a personal or other relationship with another person for the covert purpose of:
- a. Using such a relationship to obtain information, or to provide access to information to another person, or
  - b. Disclosing information obtained by the use of such a relationship or as a consequence of such a relationship or
  - c. Is incidental to anything falling within a) and b) above.
- 29.4 In other words, an authorisation for conduct will authorise steps taken by the CHIS on behalf, or at the request, of a Public Authority.
- 29.5 The use of a source is what the Authority does in connection with the source, such as tasking (see section 32), and the conduct is what a source does to fulfil whatever tasks are given to them or which is incidental to it. The Use and Conduct require separate consideration before authorisation. However, they are normally authorised within the same authorisation.
- 29.6 The same authorisation form is used for both use and conduct. A Handler and Controller must also be designated, as part of the authorisation process, and the application can only be authorised if necessary and proportionate. Detailed records of the use, conduct and tasking of the source also have to be maintained (see section 36).
- 29.7 Care should be taken to ensure that the CHIS is clear on what is or is not authorised at any given time, and that all the CHIS's activities are properly risk assessed. Care should also be taken to ensure that relevant applications, reviews, renewals and cancellations are correctly performed. [Covert Human Intelligence Sources code of practice 2022 - GOV.UK \(www.gov.uk\)](#) (~~Section 210 CHIS Codes of Practice~~)
- 29.8 Careful consideration must be given to any particular sensitivities in the local community where the CHIS is being used and of similar activities being undertaken by other public authorities which could have an impact on the deployment of the CHIS. Consideration should also be given to any adverse impact on community confidence or safety that may result from the use or conduct of a CHIS or use of information obtained from that CHIS [Covert Human Intelligence Sources code of practice 2022 - GOV.UK \(www.gov.uk\)](#). (~~Section 3.18 CHIS Codes of Practice~~)
- 30. Handler and Controller**



30.1 Covert Human Intelligence Sources may only be authorised if the following arrangements are in place:

- That there will at all times be an officer (the **Handler**) within the Council who will have day to day responsibility for dealing with the source on behalf of the authority, and for the source's security. The Handler is likely to be the investigating officer.
- That there will at all times be another officer within the Council who will have general oversight of the use made of the source; (**Controller**) i.e. the line manager.
- That there will at all times be an officer within the Council who has responsibility for maintaining a record of the use made of the source. See CHIS record keeping ~~(see section 36)~~. [Covert Human Intelligence Sources code of practice 2022 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/covert-human-intelligence-sources-code-of-practice-2022)

30.2 The **Handler** will have day to day responsibility for:

- Dealing with the source on behalf of the Local Authority concerned;
- Risk assessments
- Directing the day to day activities of the source;
- Recording the information supplied by the source; and
- Monitoring the source's security and welfare.
- Informing the Controller of concerns about the personal circumstances of the CHIS that might effect the validity of the risk assessment or conduct of the CHIS

30.3 The **Controller** will be responsible for:

- The management and supervision of the "Handler" and
- General oversight of the use of the CHIS;
- Maintaining an audit of case work sufficient to ensure that the use or conduct of the CHIS remains within the parameters of the extant authorisation.

### 31. Undercover Officers

31.1 Oversight and management arrangements for **undercover operatives**, while following the principles of the Act, will differ, in order to reflect the specific role of such individuals as members of the Council. The role of the handler will be

undertaken by a person referred to as a 'cover officer'. [Covert Human Intelligence Sources code of practice 2022 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/108422/Covert_Human_Intelligence_Sources_code_of_practice_2022_-_GOV.UK_(www.gov.uk).pdf) (Section 6.9 CHIS Codes of Practice). The Head of Legal, or nominated representative should be consulted before Undercover Officers are considered for deployment.

### **32. Tasking**

- 32.1 Tasking is the assignment given to the source by the Handler or Controller such as by asking them to obtain information, to provide access to information or to otherwise act, incidentally, for the benefit of the relevant Local Authority. Authorisation for the use or conduct of a source is required prior to any tasking where such tasking requires the source to establish or maintain a personal or other relationship for a covert purpose.
- 32.2 In some instances, the tasking given to a person will not require the source to establish a personal or other relationship for a covert purpose. For example, a member of the public is asked to maintain a record of all vehicles arriving and leaving a specific location or to record the details of visitors to a neighbouring house. A relationship has not been established or maintained in order to gather the information and a CHIS authorisation is therefore not available. Other authorisations under the Act, for example, Directed Surveillance, may need to be considered where there is a possible interference with the Article 8 rights of an individual.
- 32.3 Authorisations should not be drawn so narrowly that a separate authorisation is required each time the CHIS is tasked. Rather, an authorisation might cover, in broad terms, the nature of the source's task.

### **33. Risk Assessments**

- 33.1 The Council has a responsibility for the safety and welfare of the source and for the consequences to others of any tasks given to the source. It is a requirement of the codes that a risk assessment is carried out. This should be submitted with the authorisation request. The risk assessment should provide details of how the CHIS is going to be handled. It should also take into account the safety and welfare of the CHIS in relation to the activity and should consider the likely consequences should the role of the CHIS become known. The ongoing security and welfare of the CHIS after the cancellation of the authorisation should also be considered at the outset.

### **34. Use of Equipment by a CHIS**

- 34.1 If a CHIS is required to wear or carrying a surveillance device such as a covert camera it does not need a separate intrusive or Directed Surveillance authorisation, provided the device will only be used in the presence of the CHIS. It should be authorised as part of the conduct of the CHIS.
- 34.2 CHIS, whether or not wearing or carrying a surveillance device, in residential premises or a private vehicle, does not require additional authorisation to record any

activity taking place inside those premises or that vehicle which takes place in their presence. This also applies to the recording of telephone conversations. This should have been identified at the planning stage.

### **35. CHIS Management**

35.1 The operation will require managing by the Handler and Controller which will include ensuring that the activities of the source and the operation remain focused and there is no status drift. It is important that the intrusion is assessed to ensure the operation remains proportionate. The security and welfare of the source will also be monitored. The Authorising Officer should maintain general oversight of these functions.

35.2 During CHIS activity, there may be occasions when unforeseen actions or undertakings occur. Such incidences should be recorded as soon as practicable after the event and if the existing authorisation is insufficient, it should either be dealt with by way of a review and re-authorised (for minor amendments only) or it should be cancelled, and a new authorisation obtained before any further action is carried out. Similarly, where it is intended to task a CHIS in a new significantly different way than previously identified, the proposed tasking should be referred to the Authorising Officer, who should consider whether a separate authorisation is required. This should be done in advance of any tasking and details of such referrals must be recorded.

### **36. CHIS Record Keeping**

#### **36.1 Centrally Retrievable Record of Authorisations**

36.2 A centrally retrievable record of all authorisations is held by the Central Records Officer. This record contains the relevant information to comply with the Codes of Practice. These records are updated whenever an authorisation is granted, renewed or cancelled and are available to the Investigatory Powers Commissioner (IPCO) upon request.

36.3 The records are retained for five years from the ending of the authorisation.

#### **36.4 Individual Source Records of Authorisation and Use of CHIS**

36.5 Detailed records must be kept of the authorisation and the use made of a CHIS. An authorising officer must not grant an authorisation for the use or conduct of a CHIS unless they believe that there are arrangements in place for ensuring that there is at all times a person with the responsibility for maintaining a record of the use made of the CHIS. The Regulation of Investigatory Powers (Source Records) Regulations 2000; SI No: 2725 details the particulars that must be included in these records [The Regulation of Investigatory Powers \(Source Records\) Regulations 2000 \(legislation.gov.uk\)](https://www.legislation.gov.uk).

36.6 The particulars to be contained within the records are:

- a. The identity of the source;
- b. The identity, where known, used by the source;
- c. Any relevant investigating authority other than the authority maintaining the records;
- d. The means by which the source is referred to within each relevant investigating authority;
- e. Any other significant information connected with the security and welfare of the source;
- f. Any confirmation made by a person granting or renewing an authorisation for the conduct or use of a source that the information in paragraph (d) has been considered and that any identified risks to the security and welfare of the source have where appropriate been properly explained to and understood by the source;
- g. The date when, and the circumstances in which the source was recruited;
- h. Identity of the Handler and Controller (and details of any changes)
- i. The periods during which those persons have discharged those responsibilities;
- j. The tasks given to the source and the demands made of him in relation to his activities as a source;
- k. All contacts or communications between the source and a person acting on behalf of any relevant investigating authority;
- l. The information obtained by each relevant investigating authority by the conduct or use of the source;
- m. Any dissemination by that authority of information obtained in that way; and
- n. In the case of a source who is not an undercover operative, every payment, benefit or reward and every offer of a payment, benefit or reward that is made or provided by or on behalf of any relevant investigating authority in respect of the source's activities for the benefit of that or any other relevant investigating authority.

36.7 The person maintaining these records is the Central Records Officer.

### 36.8 Further Documentation

36.9 In addition to the above, when appropriate records or copies of the following, as are retained by Blackpool Council for five years:

- A copy of the authorisation together with any supplementary documentation and notification of the approval given by the authorising officer;
- A copy of any renewal of an authorisation, together with the supporting documentation submitted when the renewal was requested;
- The reason why the person renewing an authorisation considered it necessary to do so;
- Any authorisation which was granted or renewed orally (in an urgent case) and the reason why the case was considered urgent;
- Any risk assessment made in relation to the CHIS;
- The circumstances in which tasks were given to the CHIS;
- The value of the CHIS to the investigating authority;
- A record of the results of any reviews of the authorisation;
- The reasons, if any, for not renewing an authorisation;
- The reasons for cancelling an authorisation; and
- The date and time when any instruction was given by the authorising officer that the conduct or use of a CHIS must cease.
- A copy of the decision by a Judicial Commissioner on the renewal of an authorisation beyond 12 months (where applicable).

36.10 The records kept by the Council should be maintained in such a way as to preserve the confidentiality, or prevent disclosure of the identity of the CHIS, and the information provided by that CHIS. [Covert Human Intelligence Sources Code of Practice](#) (~~Sec 7.7 CHIS Codes of Practice~~)

36.11 The relevant application forms are available on [the Covert Surveillance Practitioners Team site](#). ~~The Hub~~. References in these forms to the 'Code' are to the [Covert Human Intelligence Sources Code of Practice](#), which should be consulted for further guidance.

## PART D RIPA Roles and Responsibilities

**37. The Senior Responsible Officer (SRO)**

37.1 The nominated Senior Responsible Officer ~~is the Director of Governance and Partnerships. The SRO with~~ has responsibilities for:

- The integrity of the process in place within Blackpool Council to authorise Directed Surveillance;
- Compliance with the relevant sections of RIPA and the Codes of Practice;
- Oversight of the reporting of errors to the Investigatory Powers Commissioner (IPC) and the identification of both the cause(s) of errors and the implementation of processes to minimise repetition of errors;
- Engagement with the Investigatory Powers Commissioner Office (IPCO) and the inspectors who support the Commissioner when they conduct their inspections;
- Where necessary, overseeing the implementation of any recommended post-inspection action plans and
- Ensuring that all Authorising Officers are of an appropriate standard, addressing any recommendations and concerns in the inspection reports prepared by the Investigatory Powers Commissioner.
- Provide training and further guidance and awareness of RIPA and the provisions of this Policy; and review the contents of this Policy.

**38. RIPA Co-Ordinator is known in Blackpool as the Central Records Officer.**

38.1 The Central Records Officer ~~is a Democratic Governance Senior Advisor who is~~ responsible for storing all the original authorisations, reviews, renewals and cancellation forms and the signed approval or refusal documentation from the Justice of Peace (JP). This will include any authorisations that have not been authorised by the Authorising Officer or refused by a JP.

38.2 The Central Records Officer will:

- Keep the copies of the forms for a period of at least five years;
- Keep the Central Register (a requirement of the Codes of Practice) of all of the authorisations, renewals and cancellations; and Issue the unique reference number.
- Keep a spreadsheet for identifying and monitoring expiry dates and renewal dates.

- Along with, Directors, Heads of Service, Service Managers, Authorising Officers and the Investigating Officers must ensure that any electronic and paper records relating to a RIPA investigation are used, retained or destroyed in line with the Councils Information Management policies, departmental retention schedules and UK General Data Protection Regulation and the Data Protection Act 2018. (DPA)
- Provide administrative support and guidance on the processes involved.
- Monitor the authorisations, renewals and cancellations with a view to ensuring consistency throughout the Council;
- Monitor each department's compliance and act on any cases of non-compliance;

### **39. Managers Responsibility and Management of the Activity**

- 39.1 Line Managers within each department of the Council and those of wholly-owned companies and maintained schools are responsible for ensuring that in all cases where surveillance is required, due consideration is given to the need for covert surveillance before application is made for authorisation. That includes the consideration of using overt action, routine enquiries or inspections which are less intrusive.
- 39.2 If authorised it is important that all those involved in undertaking Directed Surveillance activities, including Line managers, are fully aware of the extent and limits of the authorisation. There should be an ongoing assessment for the need for the activity to continue including ongoing assessments of the intrusion. All material obtained, including evidence, should be stored in line with relevant legislation and procedures to safeguard its integrity and reduce a risk of challenge. (See use of material as evidence section 60)
- 39.3 Line Managers should also ensure that the relevant reviews (see section 52), renewals (see section 53) and cancellations (see section 54) are completed by the applicant in accordance with the codes and the dates set throughout the process.

### **40. Investigating Officers/ Applicant**

- 40.1 The applicant is normally an investigating officer who completes the application section of the RIPA form. Investigating Officers should think about the need to undertake Directed Surveillance or the use of a CHIS before they seek authorisation and discuss it with their Line manager. Investigating Officers need to consider whether they can obtain the information or achieve their objective by using techniques other than covert surveillance.

- 40.2 The applicant or some other person ~~must~~ [are expected to](#) carry out a feasibility study as this should be seen by the Authorising Officer. The person seeking the authorisation should then complete the application form having regard to the guidance given in this Policy and the statutory Codes of Practice. There should not be any real delay between the feasibility study and the completion of the application form to ensure that the details within the application are accurate and will not have changed. The form should then be submitted to the Authorising Officer for authorisation.
- 40.3 The applicant is likely to attend court to seek the approval of a JP and if approved and involved in the covert activity they must only carry out what is authorised and approved. They, or some other person will also be responsible for the submission of any reviews, renewals and cancellations.

#### **41. Authorising Officers**

- 41.1 ~~The Regulation of Investigatory Powers (Directed Surveillance and Covert Human Intelligence Sources) Order 2010 prescribes that for Local Authorities the Authorising Officer shall be a Director, Head of Service, Service Manager or equivalent as distinct from the officer responsible for the conduct of an investigation.~~
- 41.2 There is a list, available [at section 1 of this document on The Hub](#), showing the Authorising Officers within the Council who can grant authorisations.
- 41.3 The role of the Authorising Officers is to consider whether to authorise, review, or renew an authorisation. They must also officially cancel the RIPA covert activity. Authorising Officers must have been trained to an appropriate level so as to have an understanding of the requirements in the Codes of Practice and that must be satisfied before an authorisation can be granted.
- 41.4 Authorising Officers should not be responsible for authorising investigations or operations in which they are directly involved. Where an Authorising Officer authorises such an investigation or operation, the central record of authorisations should highlight this, and it should be brought to the attention of a Commissioner or Inspector during their next inspection.
- 41.5 Authorisations must be given in writing by the Authorising Officer by completing the relevant section on the authorisation form. When completing an authorisation, the case should be presented in a fair and balanced way. In particular, all reasonable efforts should be made to take into account information which weakens the case for the authorisation.
- 41.6 Authorising Officers must explain why they believe the activity is both necessary (see section 42) and proportionate (see section 43), having regard to the collateral intrusion. They must also consider any similar activity which may be taking place, or sensitivities in the area.



- 41.7 They also need to explain exactly what they are authorising, against who, in what circumstances, where etc. and that the level of the surveillance is appropriate to achieve the objectives. It is important that this is made clear on the authorisation as the surveillance operatives are only allowed to carry out what is authorised. This will assist with avoiding errors.
- 41.8 If any equipment such as covert cameras are to be used, the Authorising Officer should know the capability of the equipment before authorising its use. This will have an impact on collateral intrusion, necessity and proportionality. They should not rubber-stamp a request. It is important that they consider all the facts to justify their decision. They may be required to justify their actions in a court of law or some other tribunal.
- 41.9 The Authorising Officer may be required to attend court to explain what has been authorised and why.
- 41.10 Authorised Officers must acquaint themselves with the relevant Codes of Practice issued by the Home Office regarding RIPA and the current Procedures and Guidance issued by the Commissioner. This document also details the latest operational guidance to be followed. It is recommended that Authorising Officers hold their own copy of this document. This can be obtained from [the Covert Surveillance Practitioners Team site](#). ~~The Hub~~.
- 41.11 [There is a gatekeeper procedure within Public Protection where the gatekeeper will check content and relevant process within the application prior to being sent onto the relevant Authorising Officer by the gatekeeper for review and authorisation the gatekeeper will liaise with the Authorising Officer where and when required. There is a list, available at section 1 of this document, showing the gatekeepers](#)

## **42. Necessity**

- 42.1 Obtaining an authorisation under RIPA will only ensure that there is a justifiable interference with an individual's Article 8 rights if it is necessary and proportionate for these activities to take place.
- 42.2 The Act first requires that the person granting an authorisation believe that the authorisation is necessary in the circumstances of the particular case for one or more of the statutory grounds which for Local Authority Directed Surveillance is the prevention and detection of crime and that the crime attracts a custodial sentence of a maximum of 6 months or more, or for the purpose of preventing or detecting specified criminal offences relating to the underage sale of alcohol and tobacco.
- 42.3 The lawful criteria for CHIS is prevention and detection of crime and prevention of disorder and the offence does not have to have a sentence of 6 months imprisonment.

42.4 The applicant and Authorising Officers must also be able to demonstrate why it is necessary to carry out the covert activity to achieve the objectives and that there were no other means of obtaining the same information in a less intrusive method. This is a part of the authorisation form.

### **43. Proportionality**

43.1 If the activities are deemed necessary, the Authorising Officer must also believe that they are proportionate to what is sought to be achieved by carrying them out. This involves balancing the seriousness of the intrusion into the privacy of the subject of the operation (or any other person who may be affected) against the need for the activity in investigative and operational terms.

43.2 The authorisation will not be proportionate if it is excessive in the overall circumstances of the case. Each action authorised should bring an expected benefit to the investigation or operation and should not be disproportionate or arbitrary. The fact that a suspected offence may be serious will not alone render the proposed actions proportionate. Similarly, an offence may be so minor that any deployment of covert techniques would be disproportionate. No activity should be considered proportionate if the information which is sought could reasonably be obtained by other less intrusive means.

43.3 When explaining proportionality, the Authorising Officer should explain why the methods and tactics to be adopted during the surveillance is not disproportionate.

43.4 The codes provide guidance relating to proportionality which should be considered by both applicants and Authorising Officers:

- Balancing the size and scope of the proposed activity against the gravity and extent of the perceived crime or offence;
- Explaining how and why the methods to be adopted will cause the least possible intrusion on the subject and others;
- Considering whether the activity is an appropriate use of the legislation and a reasonable way, having considered all reasonable alternatives, of obtaining the necessary result;
- Evidencing, as far as reasonably practicable, what other methods had been considered and why they were not implemented.

### **44. Collateral Intrusion**

44.1 Before authorising applications for Directed Surveillance, the Authorising Officer should also take into account the risk of obtaining collateral intrusion which is private information about persons who are not subjects of the surveillance.

44.2 Staff should take measures, wherever practicable, to avoid or minimise unnecessary intrusion into the privacy of those who are not the intended subjects of the

surveillance. Where such collateral intrusion is unavoidable, the activities may still be authorised, provided this intrusion is considered proportionate to what is sought to be achieved. The same proportionality tests apply to anticipated collateral intrusion as to intrusion into the privacy of the intended subject of the surveillance.

- 44.3 All applications must therefore include an assessment of the risk of collateral intrusion and detail the measures taken to limit this to enable the Authorising Officer fully to consider the proportionality of the proposed actions. This is detailed in a section within the authorisation form.
- 44.4 In order to give proper consideration to collateral intrusion, an Authorising Officer should be given full information regarding the potential scope of the anticipated surveillance, including the likelihood that any equipment deployed may cause intrusion on persons or property other than the subject(s) of the application. If an automated system such as an online search engine is used to obtain the information, the Authorising Officer should be made aware of its potential extent and limitations. Material which is not necessary or proportionate to the aims of the operation or investigation should be discarded or securely retained separately where it may be required for future evidential purposes. It may also need retaining under CPIA. The Authorising Officer should ensure appropriate safeguards for the handling, retention or destruction of such material, as well as compliance with [UK](#) General Data Protection Regulation and Data Protection Act 2018 requirements.
- 44.5 Where it is proposed to conduct surveillance activity specifically against individuals who are not suspected of direct or culpable involvement in the overall matter being investigated, interference with the privacy of such individuals should not be considered as collateral intrusion but rather as intended intrusion.
- 44.6 In the event that authorised surveillance unexpectedly and unintentionally interferes with the privacy of any individual other than the intended subject, the authorising officer should be informed by submitting a review form. Consideration should be given in any such case to the need for any separate or additional authorisation.
- 44.7 Where a Public Authority intends to access a social media or other online account to which they have been given access with the consent of the owner, the authority will still need to consider whether the account(s) may contain information about others who have not given their consent. If there is a likelihood of obtaining private information about others, the need for a Directed Surveillance authorisation should be considered, particularly (though not exclusively) where it is intended to monitor the account going forward.

## **PART E The Application and Authorisation Process**

### **45. Relevant Forms**

- 45.1 For both Directed Surveillance and CHIS authorisations there are 4 forms within the process. They are:

- Authorisation
- Review
- Renewal
- Cancellation

45.2 All the forms can be obtained from [the Covert Surveillance Practitioners Team site](https://www.gov.uk/government/collections/ripa-forms-2).  
 The Hub. <https://www.gov.uk/government/collections/ripa-forms-2>

#### 46. Duration of Authorisations

46.1 Authorisations must be given for the maximum duration from the date approved by the JP/Magistrate but reviewed on a regular basis and formally cancelled when no longer needed. They do not expire, they must be cancelled when the surveillance is no longer proportionate or necessary. Therefore, a Directed Surveillance authorisation will cease to have effect after three months from the date of approval by the Magistrate unless renewed or cancelled. Durations detailed below:

<b>Directed Surveillance</b>	3 months
<b>Renewal</b>	3 months
<b>Covert Human Intelligence Source</b>	12 months
<b>Renewal</b>	12 months
<b>Juvenile Sources</b>	4 months
<b>Renewal</b>	4 months

46.2 It is the responsibility of the Investigating Officer to make sure that the authorisation is still valid when they undertake surveillance.

#### 47. Applications/Authorisation

47.1 The applicant or some other person must carry out a feasibility study and intrusion assessment as this may be required by the Authorising Officer. The person seeking the authorisation should then complete the application form having regard to the guidance given in this Policy and the statutory Codes of Practice. There should not be any real delay between the feasibility study and the completion of the application form to ensure that the details within the application are accurate and will not have changed. The form should then be submitted to the Authorising Officer for authorisation.

47.2 When completing an application for authorisation, the applicant must ensure that the case for the authorisation is presented in the application in a fair and balanced way. In particular, all reasonable efforts should be made to take into account information which weakens the case for the warrant or authorisation. This is a requirement of the codes.

- 47.3 All the relevant sections must be completed with sufficient information to ensure that applications are sufficiently detailed for the Authorising Officer to consider Necessity, Proportionality having taken into account the Collateral Intrusion issues ~~Cutting and pasting or using template entries should not take place as this would leave the process open to challenge.~~
- 47.4 If it is intended to undertake both Directed Surveillance and the use of a CHIS on the same surveillance subject, the respective authorisation should be completed and the respective procedures followed. Both activities should be considered separately on their own merits.
- 47.5 All applications will be submitted to the Authorising Officer via the Line Manager of the appropriate enforcement team in order that they are aware of the application and activities being undertaken by the staff. The Line Manager will perform an initial quality check of the application. However, they should not be involved in the sanctioning of the authorisation. The form should then be submitted to the Authorising Officer.
- 47.6 Applications whether authorised or refused will be issued with a unique number (allocated by the Central Records Officer). The number will be taken from the next available number in the central record of authorisations which is held by the Central Records Officer.
- 47.7 If not authorised, feedback will be provided to the applicant and the application will be forwarded to the Central Records Officer for recording and filing. If having received the feedback, the applicant feels it is appropriate to re submit the application, they can do so and it will then be considered again.
- 47.8 Following authorisation, the applicant will then complete the relevant section of the judicial application/order form. Although this form requires the applicant to provide a brief summary of the circumstances of the case, this is supplementary to and does not replace the need to supply a copy and the original RIPA authorisation as well.

#### **48. Arranging the Court Hearing**

- 48.1 It will be necessary within office hours to contact the administration at the Magistrates' Court to arrange a hearing. The hearing will be in private and heard by a single Justice of the Peace (JP). The application to the JP will be on oath.
- 48.2 Officers who may present the application at these proceedings will need to be formally designated by the Council under section 223 of the Local Government Act 1972 to appear, be sworn in and present evidence or information as required by the JP. If in doubt as to whether you are able to present the application seek advice from the Head of Legal, or nominated representative.

#### **49. Attending the Hearing**

- 49.1 The applicant will attend the hearing; however, the Authorising Officer should also attend the hearing if required, as the applicant cannot answer questions directed for the Authorising Officer. Upon attending the hearing, the officer must present to the JP the partially completed judicial application/order form, the original and a copy of the RIPA application/authorisation form, together with any supporting documents setting out the case. The original RIPA authorisation should be shown to the JP but will be retained by the Council so that it is available for inspection by IPCO, and in the event of any legal challenge or investigations by the Investigatory Powers Tribunal (IPT).
- 49.2 The JP will read and consider the RIPA authorisation and the judicial application/order form. They may have questions to clarify points or require additional reassurance on particular matters. These questions are supplementary to the content of the application form. However, the forms and supporting papers must by themselves make the case. It is not sufficient for the Council to provide oral evidence where this is not reflected or supported in the papers provided.
- 49.3 The JP will consider whether they are satisfied that at the time the authorisation was granted or renewed, there were reasonable grounds for believing that the authorisation was necessary and proportionate. In addition, they must be satisfied that the person who granted the authorisation was an appropriate Designated Person within the Council to authorise the activity and the authorisation was made in accordance with any applicable legal restrictions, for example, the crime threshold for Directed Surveillance.

## 50. Decision of the Justice of the Peace (JP)

- 50.1 The JP has a number of options which are:
- 50.2 **Approve or renew an authorisation.** If approved by the JP, the date of the approval becomes the commencement date for the duration of the three months and the officers are now allowed to undertake the activity.
- 50.3 **Refuse to approve or renew an authorisation.** The RIPA authorisation will not take effect and the Council may **not** use the technique in that case.
- 50.4 Where an application has been refused, the applicant may wish to consider the reasons for that refusal. If more information was required by the JP to determine whether the authorisation has met the tests, and this is the reason for refusal, the officer should consider whether they can reapply. For example, if there was information to support the application which was available to the Council, but not included in the papers provided at the hearing.
- 50.5 For, a technical error (as defined by the JP), the form may be remedied without going through the internal authorisation process again. The officer may then wish to reapply for judicial approval once those steps have been taken.

- 50.6 **Refuse to approve or renew and quash the authorisation.** This applies where the JP refuses to approve or renew the authorisation and decides to quash the original authorisation. However, the court must not exercise its power to quash the authorisation unless the applicant has had at least two business days from the date of the refusal in which to make representations. If this is the case, the officer will inform the Legal who will consider whether to make any representations.
- 50.7 The JP will record their decision on the order section of the judicial application/order form. The court administration will retain a copy of the Council's RIPA application and authorisation form and the judicial application/order form. The officer will retain the original authorisation and a copy of the judicial application/order form.
- 50.8 The Council may only appeal a JP decision on a point of law by judicial review. If such a concern arises, Legal will decide what action if any should be taken.

## **51. Post Court Procedure**

- 51.1 It will be necessary to work out the cancellation date from the date of approval and ensure that the applicant and the Authorising Officer is aware. The original application and the copy of the judicial application/order form should be forwarded to the Central Records Officer. A copy will be retained by the applicant and if necessary by the Authorising Officer. The central register will be updated with the relevant information to comply with the Codes of Practice and the original documents filed and stored securely.
- 51.2 Where dates are set within the process such as reviews, they must be adhered to. This will help with demonstrating that the process has been managed correctly in line with the Codes of Practice and reduce the risk of errors.

## **52. Reviews**

- 52.1 When an application has been authorised and approved by a JP, regular reviews must be undertaken by the Authorising Officer to assess the need for the surveillance to continue.
- 52.2 In each case the Authorising Officer should determine how often a review should take place at the outset. This should be as frequently as is considered necessary and practicable. Particular attention is drawn to the need to review authorisations frequently where the surveillance provides a high level of intrusion into private life or significant collateral intrusion, or confidential information. They will record when they are to take place on the application form. This decision will be based on the circumstances of each application. However, reviews will be conducted on a monthly or less basis to ensure that the activity is managed. It will be important for the Authorising Officer to be aware of when reviews are required to ensure that the applicants submit the review form on time.

- 52.3 Applicants should submit a review form by the review date set by the Authorising Officer. They should also use a review form for changes in circumstances to the original application which would include a change to the level of intrusion so that the need to continue the activity can be re-assessed. However, if the circumstances or the objectives have changed considerably, or the techniques to be used are now different, a new application form should be submitted, and it will be necessary to follow the process again and be approved by a JP. The applicant does not have to wait until the review date if it is being submitted for a change in circumstances.
- 52.4 Line managers of applicants should also make themselves aware of when the reviews are required to ensure that the relevant forms are completed on time.
- 52.5 The reviews are dealt with internally by submitting the review form to the Authorising Officer. There is no requirement for a review form to be submitted to a JP.
- 52.6 The results of a review should be recorded on the central record of authorisations.

**53. Renewal**

- 53.1 A renewal form is to be completed by the applicant when the original authorisation period is about to expire but Directed Surveillance or the use of a CHIS is still required.
- 53.2 Should it be necessary to renew an authorisation for Directed Surveillance or CHIS, this must be approved by a JP.
- 53.3 Applications for renewals should not be made until shortly before the original authorisation period is due to expire. However, they must take account of factors which may delay the renewal process (e.g. intervening weekends or the availability of the relevant Authorising Officer and a JP to consider the application).
- 53.4 The applicant should complete all the sections within the renewal form and submit the form to the Authorising Officer for consideration.
- 53.5 Authorising Officers should examine the circumstances with regard to Necessity, Proportionality and the Collateral Intrusions issues before making a decision to renew the activity. A CHIS application should not be renewed unless a thorough review has been carried out covering the use made of the source, the tasks given to them and information obtained. The Authorising Officer must consider the results of the review when deciding whether to renew or not. The review and the consideration must be documented.
- 53.6 If the Authorising Officer refuses to renew the application, the cancellation process should be completed. If the Authorising Officer authorises the renewal of the activity, the same process is to be followed as mentioned earlier for the initial application whereby approval must be sought from a JP.



53.7 A renewal takes effect on the day on which the authorisation would have ceased and lasts for a further period of three months.

**54. Cancellation**

54.1 The cancellation form is to be submitted by the applicant or another investigator in their absence. The Authorising Officer who granted or last renewed the authorisation must cancel it if they are satisfied that the Directed Surveillance no longer meets the criteria upon which it was authorised. Where the Authorising Officer is no longer available, this duty will fall on the person who has taken over the role of Authorising Officer or the person who is acting as Authorising Officer.

54.2 As soon as the decision is taken that Directed Surveillance should be discontinued, the applicant or other investigating officer involved in the investigation should inform the Authorising Officer. The Authorising Officer will formally instruct the investigating officer to cease the surveillance, noting the time and date of their decision. This will be required for the cancellation form. The date and time when such an instruction was given should also be recorded in the central record of authorisations.

54.3 The Investigating Officer submitting the cancellation should complete in detail the relevant sections of the form and include the period of surveillance and detail if any images were obtained, particularly any images containing innocent third parties. The Authorising Officer should then take this into account and issues instructions regarding the management and disposal of the images etc. See sections 58 to 65 Safeguarding and the Use of Surveillance Material below.

54.4 The cancellation process should also be used to evaluate whether the objectives have been achieved and whether the applicant carried out what was authorised. This check will form part of the oversight function. Where issues are identified including errors (see section 65), they will be brought to the attention of the Line Manager and the Senior Responsible Officer (SRO). This will assist with future audits and oversight and comply with the Codes of Practice.

54.5 When cancelling a CHIS authorisation, an assessment of the welfare and safety of the source should also be assessed, and any issues identified.

54.6 All cancellations must be submitted to the Central Records Officer for inclusion in the central Record and storing securely with the other associated forms.

54.7 Do not wait until the three month period is up to cancel. Cancel it at the earliest opportunity when no longer necessary and proportionate. Line Managers should be aware of when the activity needs cancelling and ensure that staff comply with the procedure.

**Part F Central Record and Safeguarding the Material**

**55. Introduction**

55.1 Authorising Officers, applicants and Line Managers of relevant enforcement departments may keep whatever records they see fit to administer and manage the RIPA application process. This includes the legal obligations under the Criminal Procedures and Investigations Act. However, this will not replace the requirements under the Codes of Practice, which includes the fact that the Council must hold a centrally held and retrievable record.

**56. Central Record**

56.1 The centrally retrievable record of all authorisations will be held and maintained by Central Records Officer. It will be regularly updated whenever an authorisation is applied for, refused, granted, renewed or cancelled. The record will be made available to the relevant Commissioner or an Inspector from IPCO, upon request.

56.2 All original authorisations and copies of judicial applications/order forms whether authorised or refused, together with review, renewal and cancellation documents, must be sent within 24 hours to Central Records Officer who will be responsible for maintaining the central record of authorisations. They will ensure that all records are held securely with no unauthorised access. If in paper format, they must be forwarded in a sealed envelope marked confidential.

56.3 The documents contained in the centrally held register should be retained for at least five years from the ending of the authorisation or for the period stipulated by the Council's document retention policy, whichever is greater. The centrally held register contains the following information:

- If refused, (the application was not authorised by the AO) a brief explanation of the reason why. The refused application should be retained as part of the central record of authorisation;
- If granted, the type of authorisation and the date the authorisation was given;
- Details of attendances at the magistrates' court to include the date of attendances at court, the determining magistrate, the decision of the court and the time and date of that decision;
- Name and rank/grade of the authorising officer;
- The unique reference number (URN) of the investigation or operation;
- The title of the investigation or operation, including a brief description and names of subjects, if known;
- Frequency and the result of each review of the authorisation;

- If the authorisation is renewed, when it was renewed and who authorised the renewal, including the name and rank/grade of the authorising officer and the date renewed by the JP;
- Whether the investigation or operation is likely to result in obtaining confidential information as defined in this code of practice;
- The date the authorisation was cancelled;
- Authorisations by an Authorising Officer where they are directly involved in the investigation or operation. If this has taken place it must be brought to the attention of a Commissioner or Inspector during their next RIPA inspection.

56.4 As well as the central record the Central Records Officer will also retain:

- The original of each application, review, renewal and cancellation, copy of the judicial application/order form, together with any supplementary documentation of the approval given by the Authorising Officer;
- The frequency and result of reviews prescribed by the Authorising Officer;
- The date and time when any instruction to cease surveillance was given;
- The date and time when any other instruction was given by the Authorising Officer;
- A record of the period over which the surveillance has taken place. This should have been included within the cancellation form.

56.5 These documents will also be retained for five years from the ending of the authorisation.

### **57. Safeguarding and the Use of Surveillance Material**

57.1 This section provides guidance on the procedures and safeguards to be applied in relation to the handling of any material obtained through Directed Surveillance or CHIS activity. This material may include private, confidential or legal privilege information. It will also show the link to other relevant legislation.

57.2 The Council should ensure that their actions when handling information obtained by means of covert surveillance or CHIS activity comply with relevant legal frameworks and the Codes of Practice, so that any interference with privacy is justified in accordance with Article 8(2) of the European Convention on Human Rights. Compliance with these legal frameworks, including Data Protection requirements, will ensure that the handling of private information obtained continues to be lawful, justified and strictly controlled, and is subject to robust and effective safeguards. The material will also be subject to the Criminal Procedures Investigations Act (CPIA)

### **58. Authorised Purpose**

58.1 Dissemination, copying and retention of material must be limited to the minimum necessary for authorised purposes. For the purposes of the RIPA codes, something is necessary for the authorised purposes if the material:

- Is, or is likely to become, necessary for any of the statutory purposes set out in the RIPA Act in relation to covert surveillance or CHIS activity;
- Is necessary for facilitating the carrying out of the functions of public authorities under RIPA;
- Is necessary for facilitating the carrying out of any functions of the Commissioner or the Investigatory Powers Tribunal;
- Is necessary for the purposes of legal proceedings; or
- Is necessary for the performance of the functions of any person by or under any enactment.

## 59. Handling and Retention of Material

59.1 As mentioned above, all material associated and obtained with an application will be subject of the provisions of the [UK General Data Protection Regulation and Data Protection Act \(DPA\) 2018](#) and CPIA Codes of Practice [Criminal Procedure and Investigations Act Code of Practice - GOV.UK \(www.gov.uk\)](#). All officers involved within this process should make themselves aware of the provisions within this legislation and how it impacts on the whole RIPA process. Material obtained, together with relevant associated paperwork should be held securely. Extra care needs to be taken if the application and material relates to a CHIS.

59.2 Material required to be retained under CPIA should be retained until a decision is taken whether to institute proceedings against a person for an offence or if proceedings have been instituted, at least until the accused is acquitted or convicted or the prosecutor decides not to proceed with the case.

59.3 Where the accused is convicted, all material which may be relevant must be retained at least until the convicted person is released from custody, or six months from the date of conviction, in all other cases.

59.4 If the court imposes a custodial sentence and the convicted person is released from custody earlier than six months from the date of conviction, all material which may be relevant must be retained at least until six months from the date of conviction.

59.5 If an appeal against conviction is in progress when released, or at the end of the period of six months, all material which may be relevant must be retained until the appeal is determined.

59.6 If retention is beyond these periods it must be justified under DPA. Each relevant service within the Council may have its own provisions under their Data Retention Policy which will also need to be consulted to ensure that the data is retained lawfully and for as long as is necessary.

**60. Use of Material as Evidence**

- 60.1 Material obtained through Directed Surveillance, may be used as evidence in criminal proceedings. The admissibility of evidence is governed primarily by the common law, the Criminal Procedure and Investigations Act 1996 (CPIA) [Criminal Procedure and Investigations Act Code of Practice - GOV.UK \(www.gov.uk\)](http://www.gov.uk), [Criminal Justice Act 2003 Criminal Justice Act 2003 \(legislation.gov.uk\)](http://legislation.gov.uk), the Criminal Procedure Rules [The Criminal Procedure Rules 2020 \(legislation.gov.uk\)](http://legislation.gov.uk), ~~section 78 of the Police and Criminal Evidence Act-1996~~ [Police Act 1996 \(legislation.gov.uk\)](http://legislation.gov.uk), [the Criminal Justice Act 2003 Criminal Justice Act 2003 \(legislation.gov.uk\)](http://legislation.gov.uk) [the Police and Criminal Evidence Act 1984 Police and Criminal Evidence Act 1984 \(legislation.gov.uk\)](http://legislation.gov.uk) and the Human Rights Act 1998 [Human Rights Act 1998 \(legislation.gov.uk\)](http://legislation.gov.uk).
- 60.2 Ensuring the continuity and integrity of evidence is critical to every prosecution. Accordingly, considerations as to evidential integrity are an important part of the disclosure regime under the CPIA and these considerations will apply to any material acquired through covert surveillance that is used in evidence. When information obtained under a covert surveillance authorisation is used evidentially, the Council will be able to demonstrate how the evidence has been obtained, to the extent required by the relevant rules of evidence and disclosure.
- 60.3 Where the product of surveillance could be relevant to pending or future criminal or civil proceedings, it should be retained in accordance with established disclosure requirements. In a criminal case the codes issued under CPIA will apply. They require that the investigator record and retain all relevant material obtained in an investigation and later disclose relevant material to the Prosecuting Solicitor. They in turn will decide what is disclosed to the Defence Solicitors.
- 60.4 There is nothing in RIPA which prevents material obtained under Directed Surveillance authorisations from being used to further other investigations

**61. Dissemination of Information**

- 61.1 It may be necessary to disseminate material acquired through the RIPA covert activity within the Council or shared with other Councils or agencies, including the Police. The number of persons to whom any of the information is disclosed, and the extent of disclosure, should be limited to the minimum necessary. It must also be in connection with an authorised purpose as set out in Section 58. It will be necessary to consider exactly what and how much information should be disclosed. Only so much of the material may be disclosed as the recipient needs; for example, if a summary of the material will suffice, no more than that should be disclosed.
- 61.2 The obligations apply not just to the Council as the original authority acquiring the information, but also to anyone to whom the material is subsequently disclosed. In some cases, this will be achieved by requiring the latter to obtain permission from Blackpool Council before disclosing the material further. It is important that the

Officer in Charge (OIC) of the enquiry considers these implications at the point of dissemination to ensure that safeguards are applied to the data.

- 61.3 A record will be maintained justifying any dissemination of material. If in doubt, seek advice.

**62. Storage**

- 62.1 Material obtained through covert surveillance and CHIS authorisations, and all copies, extracts and summaries of it, must be handled and stored securely, so as to minimise the risk of loss. It must be held so as to be inaccessible to persons who are not required to see the material (where applicable). This requirement to store such material securely applies to all those who are responsible for the handling of the material. It will be necessary to ensure that both physical and IT security and an appropriate security clearance regime is in place to safeguard the material.

**63. Copying**

- 63.1 Material obtained through covert surveillance may only be copied to the extent necessary for the authorised purposes set out above. Copies include not only direct copies of the whole of the material, but also extracts and summaries which identify themselves as the product of covert surveillance, and any record which refers to the covert surveillance and the identities of the persons to whom the material relates.
- 63.2 In the course of an investigation, the Council must not act on or further disseminate legally privileged items unless it has first informed the Investigatory Powers Commissioner that the items have been obtained.

**64. Destruction**

- 64.1 Information obtained through covert surveillance, and all copies, extracts and summaries which contain such material, should be scheduled for deletion or destruction and securely destroyed as soon as they are no longer needed for the authorised purpose(s) set out above. If such information is retained, it should be reviewed at appropriate intervals to confirm that the justification for its retention is still valid. In this context, destroying material means taking such steps as might be necessary to make access to the data impossible.

**Part G Errors and Complaints**

**65. Errors**

- 65.1 Errors can have very significant consequences on an affected individual's rights. Proper application of the surveillance and CHIS provisions in the RIPA codes and this Policy should reduce the scope for making errors.
- 65.2. There are two types of errors within the codes of practice which are:

- Relevant error and
- Serious error.

### 65.3 Relevant Error

65.4 An error must be reported if it is a “**relevant error**”. A relevant error is any error by a Public Authority in complying with any requirements that are imposed on it by any enactment which are subject to review by a Judicial Commissioner. This would include compliance by public authorities with Part II of the 2000 Act (RIPA). This would include with the content of the Codes of Practice.

65.5 Examples of relevant errors occurring would include circumstances where:

- Surveillance activity has taken place without lawful authorisation.
- There has been a failure to adhere to the safeguards set out in the relevant statutory provisions and Chapter 9 of the Surveillance Codes of Practice relating to the safeguards of the material.

65.6 All relevant errors made by Public Authorities must be reported to the Investigatory Powers Commissioner by the Council as soon as reasonably practicable and a full report no later than ten working days. The report should include information on the cause of the error; the amount of surveillance conducted, and material obtained or disclosed; any unintended collateral intrusion; any analysis or action taken; whether any material has been retained or destroyed; and a summary of the steps taken to prevent recurrence.

### 65.7 Serious Errors

65.8 The Investigatory Powers Commissioner must inform a person of any relevant error relating to that person if the Commissioner considers that the error is a serious error and that it is in the public interest for the person concerned to be informed of the error. The Commissioner may not decide that an error is a serious error unless they consider that the error has caused significant prejudice or harm to the person concerned. The fact that there has been a breach of a person’s Convention rights (within the meaning of the Human Rights Act 1998) is not sufficient by itself for an error to be a serious error.

65.9 It is important that all staff involved in the RIPA process report any issues, so they can be assessed as to whether it constitutes an error which requires reporting.

## 66. Complaints

66.1 Any person who reasonably believes they have been adversely affected by surveillance activity by or on behalf of the Council may complain to the Head of Legal who will investigate the complaint. A complaint can also be made to the official body

which is the Investigatory Powers Tribunal (IPT). They have jurisdiction to investigate and determine complaints against any Public Authority's use of RIPA powers, including those covered by this Policy.

66.2 ~~Complaints should be addressed to:~~

~~The Investigatory Powers Tribunal  
PO Box 33220  
London  
SW1H 9ZQ~~

Please click link herewith for complaints process, [The process - The Investigatory Powers Tribunal](#)



<b>Report to:</b>	<b>AUDIT COMMITTEE</b>
<b>Relevant Officer:</b>	Mark Towers, Director of Governance and Partnerships Tracy Greenhalgh, Head of Audit and Risk
<b>Meeting</b>	19 October 2023

## CIPFA POSITION STATEMENT ON AUDIT COMMITTEE

### 1.0 Purpose of the report:

- 1.1 The Chartered Institute of Public Finance and Accountancy (CIPFA) Position Statement (2022) includes all principal local authorities in the UK, corporate joint committees in Wales, the audit committees for PCCs and chief constables in England and Wales, PCCFRAs and the audit committees of fire and rescue authorities in England and Wales.
- 1.2 The statement sets out the purpose, model, core functions and membership of the Audit Committee.
- 1.3 The statement represents CIPFA's view on the audit committee practice and principles that local government bodies in the UK should adopt.
- 1.4 CIPFA expects that all local government bodies should make their best efforts to adopt the principles, aiming for effective Audit Committee arrangements. This will enable those bodies to meet their statutory responsibilities for governance and internal control arrangements, financial management, financial reporting and internal audit.
- 1.5 A requirement of the Position Statement is that Council's report annually on how the Audit Committee has complied with the Position Statement, discharged its responsibilities, and include an assessment of its performance. The report should be available to the public. This report aims to address this requirement.

### 2.0 Recommendation(s):

- 2.1 Audit Committee are asked to approve the compliance statement against the CIPFA Position Statement (2022).

### 3.0 Reasons for recommendation(s):

- 3.1 To meet the requirements of the CIPFA Position Statement (2022).

3.2 Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.3 Is the recommendation in accordance with the Council’s approved budget? Yes

**4.0 Other alternative options to be considered:**

4.1 N/a

**5.0 Council priority:**

5.1 The work of the Audit Committee contributes to the achievement of all of the Council’s priorities.

**6.0 Background and key information**

6.1 The Position Statement sets out the purpose of an Audit Committee which is:

*“Audit Committees are a key component of an authority’s governance framework. Their purpose is to provide an independent and high-level focus on the adequacy of governance, risk and control arrangements.*

*The committee’s role in ensuring that there is sufficient assurance over governance, risk and control gives greater confidence to all those charged with governance that those arrangements are effective. In a local authority the Full Council is the body charged with governance.*

*The Audit Committee may be delegated some governance responsibilities but will be accountable to Full Council. The committee has oversight of both internal and external audit together with the financial and governance reports, helping to ensure that there are adequate arrangements in place for both internal challenge and public accountability”*

In order to deliver its purpose CIPFA set out a number of criteria which Audit Committees should deliver. The assessment of Blackpool Council’s Audit Committee performance against the core functions in the Position Statement is set out in the following table:

CIPFA Position Statement	Blackpool Council Position
<b>Maintenance of governance, risk and control arrangements:</b>	
Support a comprehensive understanding of governance across the organisation and among all those charged with governance, fulfilling the principles of good governance.	<p><b>Complies</b></p> <p>The Committee receives relevant governance policies such as the Governance Framework and Partnership Governance Framework and recommends these to Full Council for adoption.</p>

<p>Consider the effectiveness of the authority's risk management arrangements. It should understand the risk profile of the organisation and seek assurances that active arrangements are in place on risk-related issues, for both the body and its collaborative arrangements.</p>	<p><b>Complies</b> The Committee receives and approves the Council's Risk Management Framework. In addition, it considers the Strategic Risk Register on an annual basis and undertakes a deep dive of individual risk categories at each meeting.</p>
<p>Monitor the effectiveness of the system of internal control, including arrangements for financial management, ensuring value for money, supporting standards and ethics and managing the authority's exposure to the risks of fraud and corruption.</p>	<p><b>Complies</b> The Committee receives the Audit and Risk Quarterly Report and considers the assurance statements for internal audit work completed each quarter.</p> <p>A sample of audit reports are also presented to Committee so that the relevant Heads of Service can provide an update in terms of the completion of audit recommendations.</p> <p>The Head of Audit and Risk's Annual Opinion on the control environment is considered by the Committee.</p> <p>In addition, updates are provided in relation to proactive and reactive fraud and error activity. The Committee also approves the annual Fraud and Error Prevention Charter which sets out the Council's zero tolerance approach to fraud, bribery and corruption.</p>
<b>Financial and governance reporting</b>	
<p>Be satisfied that the authority's accountability statements, including the annual governance statement, properly reflect the risk environment, and any actions required to improve it, and demonstrate how governance supports the achievement of the authority's objectives.</p>	<p><b>Complies</b> The Committee receives and approves the Annual Governance Statement each year. In addition it receives a mid-term progress update providing assurances that the actions identified in the Annual Governance Statement are being addressed.</p>

<p>Support the maintenance of effective arrangements for financial reporting and review the statutory statements of account and any reports that accompany them.</p>	<p><b>Complies</b> The Statement of Accounts and the associated external auditors report are considered by the Committee.</p> <p>Management's response to the ISA260 is also reported to the Committee for consideration.</p>
<b>Establishing appropriate and effective arrangements for audit and assurance</b>	
<p>Consider the arrangements in place to secure adequate assurance across the body's full range of operations and collaborations with other entities.</p>	<p><b>Complies</b> The Annual Internal Audit Plan is presented to the Audit Committee for approval. Further assurance can be taken from other review bodies such as Ofsted and the CQC as required.</p>
<p>In relation to the authority's internal audit functions:</p> <ul style="list-style-type: none"> <li>• Oversee its independence, objectivity, performance and conformance to professional standards.</li> <li>• Support effective arrangements for internal audit.</li> <li>• Promote the effective use of internal audit within the assurance framework.</li> </ul>	<p><b>Complies</b> The Audit Committee approve the Internal Audit Charter and the Quality Assurance and Improvement Programme on an annual basis.</p>
<p>Consider the opinion, reports and recommendations of external audit and inspection agencies and their implications for governance, risk management or control, and monitor management action in response to the issues raised by external audit.</p>	<p><b>Complies</b> All reports of the external auditor and management response to these are considered by the Committee. External audit attend every Audit Committee meeting to enable verbal updates or respond to questions from the Audit Committee.</p>
<p>Contribute to the operation of efficient and effective external audit arrangements, supporting the independence of auditors and promoting audit quality.</p>	<p><b>Complies</b> Full Council are consulted on whether the Council should participate in the national scheme for the procurement and appointment of external auditors (which Blackpool Council does).</p> <p>There have been occasions where members of the Audit Committee have</p>

	been involved with external audit and finance outside of committee meetings in order to address relationship and performance issues.
Support effective relationships between all providers of assurance, audits and inspections, and the organisation, encouraging openness to challenge, review and accountability.	<b>Complies</b> This can be evidenced through the minutes of the Audit Committee which demonstrate the breadth of discussion and engagement by committee members and officers.
<b>Audit Committee Membership</b>	
A membership that is trained to fulfil their role so that members are objective, have an inquiring and independent approach, and are knowledgeable.	<b>Complies</b> An Audit Training Academy is in place which delivers modular training prior to each Audit Committee meeting. The training programme is developed each year, dependent on requests from Audit Committee members and is approved by the Committee for each Municipal Year.
A membership that promotes good governance principles, identifying ways that better governance arrangement can help achieve the organisation's objectives.	<b>Complies</b> This can be evidenced through the minutes of the Audit Committee which demonstrate the breadth of discussion and engagement by Committee members and officers.
A strong, independently minded chair, displaying a depth of knowledge, skills, and interest. There are many personal skills needed to be an effective chair, but key to these are: <ul style="list-style-type: none"> <li>• Promoting apolitical open discussion.</li> <li>• Managing meetings to cover all business and encouraging a candid approach from all participants.</li> <li>• Maintaining the focus of the committee on matters of greatest priority.</li> </ul>	<b>Complies</b> Whilst the Chair of the Audit Committee is a new chair for this Municipal Year they have considerable experience of serving on the Audit Committee. The Chair holds a pre-meeting before each Audit Committee to discuss the agenda and help shape discussions and challenge.

Willingness to operate in an apolitical manner.	<b>Complies</b> This can be evidenced by the minutes of the Audit Committee.
Unbiased attitudes – treating auditors, the executive and management fairly.	<b>Complies</b> Good working relationships are in place between the Audit Committee, officers and external audit.
The ability to challenge the executive and senior managers when required.	<b>Complies</b> This can be evidence in the minutes of the Audit Committee which highlight the level of discussion and challenge.
Knowledge, expertise and interest in the work of the committee.	<b>Complies</b> For this Municipal Year it is a new Committee with many newly elected members. Training is in place to support the Committee to develop their knowledge and skills to make effective contributions to the meetings. Continuity is in place through the new Chair of Audit Committee and the co-opted independent member.
<b>Engagement and Outputs</b>	
Meet regularly, at least four times a year, and have a clear policy on those items to be considered in private and those to be considered in public.	<b>Complies</b> The Committee meet 6 to 7 times each Municipal Year. Where possible items are discussed in public but where this would not be appropriate arrangements are in place for a private meeting.
Be able to meet privately and separately with the external auditor and with the head of internal audit.	<b>Complies</b> External audit are invited to all Committee pre-meets so that they can have a discussion with the Audit Committee outside of the presence of officers.  The Chair and Vice Chair of Audit Committee have regular meetings with the Head of Audit and Risk approximately before each Committee meeting to set the

	agenda.
Include, as regular attendees, the chief finance officer(s), the chief executive, the head of internal audit and the appointed external auditor; other attendees may include the monitoring officer and the head of resources (where such a post exists). These officers should also be able to access the committee members, or the chair, as required.	<b>Complies</b> The Director of Resources (Statutory Finance Officer), external audit and Head of Audit and Risk attend all Audit Committee meetings. The Director of Governance and Partnerships (Monitoring Officer) and Chief Executive also attend as required. All officers and external audit are able to contact the Chair of Audit Committee outside of formal meetings should this be required.
Have the right to call on any other officers or agencies of the authority as required.	<b>Complies</b> Officers are regularly invited to Audit Committee to provide updates on the implementation of internal audit recommendations and the strategic risk register. The Committee can also request officers to attend for any other risk, control or governance issue and such actions are included on the audit tracker which helps inform the work programme for the Committee.
Support transparency, reporting regularly on its work to those charged with governance.	<b>Complies</b> The Chair of Audit Committee presents an annual report to Full Council summarising the work that the committee has undertaken and aspirations for the future focus of the committee.
Report annually on how the committee has complied with the position statement, discharged its responsibilities, and include an assessment of its performance. The report should be available to the public.	<b>Complies</b> This was done for the first time in November 2022 is done annually going forward.
<b>Impact</b>	
As a non-executive body, the influence of the audit committee depends not only on	<b>Complies</b> On an annual basis the Audit Committee

<p>the effective performance of its role, but also on its engagement with the leadership team and those charged with governance. The committee should evaluate its impact and identify areas for improvement.</p>	<p>undertakes a self-assessment of its effectiveness. This also includes seeking feedback from key stakeholders such as Chief Officers, internal and external audit. The findings of this exercise are reported to the Audit Committee and also inform the Audit Academy training programme for each Municipal Year.</p>
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<b>Overall Strengths</b>
<p>As part of the assessment the Committee felt that it exhibits a number of strengths which feed into all element of the Position Statement and these include:</p> <ul style="list-style-type: none"> <li>• Overall the Committee recognised the work that it does reflected in the Position Statement with all core functions complied with.</li> <li>• The Committee feels that engagement with officers is good with a wide range of officers being invited to Committee to provide input and assurance.</li> <li>• The Committee feels that it receives useful and meaningful information which enables it to effectively interrogate and ask questions.</li> <li>• The Committee feels that it has a strong sense of challenge, asks probing questions and asks follow-up questions to ensure that they are satisfied with the response.</li> <li>• The Committee strives to continually improve through its Audit Academy.</li> </ul>

<b>Areas for Development</b>
<p>The Committee recognised that it wanted to continue to develop and as part of the process identified a number of actions in order to continue to evolve and these include:</p> <ul style="list-style-type: none"> <li>• Ensure that the vacant independent member post is recruited to.</li> <li>• Consider the development of a plan setting out the expectations of the new external auditor in terms of working relationships.</li> <li>• Ensure that Audit Committee members receive Fraud Awareness Training.</li> <li>• Consider the benefits of wider engagement of the Executive at Audit Committee meetings when appropriate to do so.</li> <li>• Ensure that officers presenting at meetings provide a more detailed overview of their reports.</li> </ul>

6.2 Does the information submitted include any exempt information? No



**7.0 List of Appendices:**

7.1 None.

**8.0 Financial considerations:**

8.1 The work of the Audit Committee is delivered within the restrictions of the core Council budget.

**9.0 Legal considerations:**

9.1 The completion of this Position Statement demonstrates how the Council's Audit Committee meets legislative requirements.

**10.0 Risk management considerations:**

10.1 The primary role of the Audit Committee is to provide assurance that the Council is effectively managing its risks.

**11.0 Equalities considerations and the impact of this decision for our children and young people:**

11.1 These would be considered throughout the work of the Audit Committee as appropriate.

**12.0 Sustainability, climate change and environmental considerations:**

12.1 These would be considered throughout the work of the Audit Committee as appropriate.

**13.0 Internal/external consultation undertaken:**

13.1 The report was considered by Audit Committee members, the Head of Audit and Risk and the Director of Governance and Partnerships as part of the Audit Academy on the 18<sup>th</sup> September 2023.

**14.0 Background papers:**

14.1 None.

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**AUDIT COMMITTEE ACTION TRACKER**

	DATE OF REQUEST	ACTION	TARGET DATE	RESPONSIBLE OFFICER	UPDATE	RAG RATING
1	27 July 2023	That confirmation of the development of a Financial Framework for Children’s Service be provided to the Committee once complete	14 January 2024	Chris Coyle, Assistant Director CSC		In progress
2	27 July 2023	The Statement of Accounts 2020/2021 be approved and signed by the Director of Resources, in consultation with the Chair of the Audit Committee, subject to clarification	November 2023	Steve Thompson, Director of Resources/Chair of Audit		In Progress
3	27 July 2023	That details of the external auditor’s fees be brought to a future meeting of the Committee	TBC	Deloitte		Not yet due
4	14 September 2023	That a report on compliance with Driving at Work within the grey fleet be brought to a meeting in six months’ time.	March/April 2024	John-Paul Lovie, Head of Waste Services/Lynne Rowbottom, Transport Manager		Not yet due

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