



Cambridge City Council Civic Affairs and Audit Committee

Date: Monday, 17 November 2025

Time: 5.30 pm

Venue: Mill Road Community Centre, 6 Hazell Street, Cambridge, CB1 2GN

Contact: democratic.services@cambridge.gov.uk, tel:01223 457000

Agenda

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|---|--|-----------------|
| 1 | Apologies | |
| 2 | Declarations of Interest | |
| 3 | Minutes | (Pages 3 - 6) |
| 4 | Public Questions | |
| 5 | Internal Audit Update | (Pages 7 - 28) |
| 6 | Information Governance Annual Report | (Pages 29 - 40) |
| 7 | Performance Management Framework | (Pages 41 - 48) |
| 8 | Civic Affairs & Audit Committee Rolling Work Programme | (Pages 49 - 56) |

Civic Affairs and Audit Committee Members: McPherson (Chair), Gawthrope Wood (Vice-Chair), Bennett, Bick, Dalzell, Robertson and Sheil

Alternates: Clough, Davey and Young

Emergency Evacuation Procedure

In the event of the fire alarm sounding all persons should vacate the building by way of the nearest escape route. The duty Officer will assume overall control during any evacuation, however in the unlikely event the duty Officer is unavailable, this responsibility will be assumed by the Committee Chair.

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- Phone: 01223 457000

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Those wishing to address the meeting will be able to do so virtually via Microsoft Teams, or by attending to speak in person. You must contact Democratic Services democratic.services@cambridge.gov.uk by 12 noon two working days before the meeting.

The full text of any public question must be submitted in writing by noon two working days before the date of the meeting or it will not be accepted. All questions submitted by the deadline will be published on the meeting webpage before the meeting is held.

Further information on public speaking will be supplied once registration and the written question / statement has been received.

CIVIC AFFAIRS AND AUDIT COMMITTEE

30 June 2025

5.30 - 6.45 pm

Present: Councillors McPherson (Chair), Gawthrope Wood (Vice-Chair), Bennett, Bick, Dalzell, Robertson and Sheil

Officers:

Head of Legal Practice: Tom Lewis

Head of Shared Internal Audit: Jonathan Tully

Chief Finance Officer: Jody Etherington

Committee Manager: James Goddard

FOR THE INFORMATION OF THE COUNCIL

1 Apologies

There were no apologies from Councillors. The Head of Legal Practice was present instead of the Democratic Services Manager.

Councillor Robertson asked why the Independent Person was not present?

2 Declarations of Interest

There were no declarations of interest.

3 Minutes of the meeting held on 12 May 2025

The minutes of the meeting held on 12 May 2025 were approved as a correct record and signed by the Chair.

4 Public Questions

There were no public questions.

5 Proposed Amendments to Members Allowances

The Committee received a report from the Head of Legal Practice.

The Committee made the following comments in response to the report:

- i. Councillor Bennett:
 - a. Suggested a Green Councillor could sit on the Independent Remuneration Panel (IRP).
 - b. Queried if all relevant information had been given to the IRP to make recommendations.
 - c. Circumstances had changed since the IRP did their work – should they revise the recommendation?
- ii. Liberal Democrat Councillors:
 - a. Took issue with the Labour Group increasing councillor Special Responsibility Allowance (SRA).
 - b. Queried if Labour Group raised concerns about SRA with IRP?
 - c. Queried why the three previous Leaders accepted the old allowance whereas the new Leader had an increased SRA?
- iii. Labour Councillors:
 - a. The recommendations were Labour Group proposals as set out in the Officer's report.
 - b. The Labour Group disagreed with IRP recommendations so put in their own proposals as Labour Group thought the Leader had responsibilities and powers not recognised by IRP.
 - c. Councillor remuneration was looked at each year by the Labour Group.

Resolved (by 4 votes to 3) to recommend that Council:

1. The uplift in the Special Responsibility Allowance (SRA) to the Leader to 4 times the basic allowance.

Resolved (by 4 votes to 3) to recommend that Council:

2. Amend the overall number of SRA's that can be claimed to a maximum of 3.

Resolved (unanimously) to recommend to Council:

3. Removal of the allowance paid by the City Council to members of the Cambridgeshire and Peterborough Combined Authority (CPCA) for those sitting on the CPCA Overview & Scrutiny and Audit & Governance Committees.

6 Internal Audit Update

The Committee received a report from the Head of Shared Internal Audit Service.

Councillor Robertson noted a typographical error on P26 of the agenda pack Housing Advisory ~~Scrutiny~~ Board.

The Head of Shared Internal Audit Service said the following in response to Members' questions:

- i. The City Council was mandated by law to provide information to Central Government as part of the National Fraud Initiative. All councils uploaded datasets via the secure Cabinet Office system. Internal Audit quality checked the data in advance as the Cabinet Office could issue penalties if they received inaccurate or poor-quality information. The City Council complied with the regulations and data specifications. Officers were happy to discuss how to improve data sets in future.
- ii. The Council had an important role to play in tackling modern slavery. There are various agencies to report concerns to and this will be context specific, Details are set out in internal policies.
- iii. Recruiting people to the role of internal audit continues to be challenging. A review of the team has introduced two apprenticeship posts, and recruitment should start once a new training scheme is finalised. Officers were happy to talk to possible candidates.
- iv. Clarified the role of City Council Internal Audit Officers in the Disabled Facility Grant review that was funded by the County Council as part of the overall Better Care Fund. They could not influence how fast claims were processed through the county system. The City Council Internal Audit team checked that the grant received was spent in compliance with grant conditions and provided assurance back to the County Council.
- v. An asbestos review had been undertaken. The existing system was cumbersome for reporting. Officers were looking to see if a better system was available in future.
- vi. A response was awaited from the Department for Work and Pensions regarding housing rent corrections. Figures would be reviewed when a response was available. The Internal Audit team will continue to work with the Project Team.

Unanimously resolved to:

- i. Note the progress update and approve the forward plan of Internal Audit work; and
- ii. Approve the supporting Charter and the Code of Ethics.

7 Civic Affairs & Audit Committee Rolling Work Programme

The Committee reviewed the work plan. No additions or amendments were required.

The meeting ended at 6.45 pm

CHAIR

REPORT TITLE: Internal Audit Update

To:

Civic Affairs and Audit Committee [17/11/2025]

Report by:

Jonathan Tully, Chief Audit Executive

Tel: 01223 458180 Email: jonathan.tully@cambridge.gov.uk

Wards affected:

All

1.	Recommendations
1.1	The Civic Affairs and Audit Committee is requested to note the report.
2.	Purpose and reason for the report
2.1	<p>This report provides the Committee with an update on internal audit activity, assurance outcomes, and strategic developments. It reflects our evolving approach to meet new professional standards and maintain effective governance.</p> <p>The information supports the Committee's understanding of governance, risk, and control within the organisation (see Appendix for full details). It includes outputs from assurance and advisory work, as well as foresight on emerging and topical issues. This provides:</p> <ul style="list-style-type: none"> Reasonable assurance on the internal control environment, governance and risk management arrangements. Updates on how we are responding to the latest Internal Audit Standards
2.2	<p>A report was previously provided to the Committee in June 2025. Following the governance model review in May 2025 and the introduction of new standards, we have taken the opportunity to review and revise the format of our reporting.</p> <p>We are transitioning to a more agile and frequent reporting format to better inform the Committee, and support consistency across our shared services reporting which will help us be more efficient.</p>
2.3	This is not a key decision, as the report is presented in accordance with the Committee's terms of reference.
3.	Alternative options considered

3.1	This report is to note and does not have alternative options, although we welcome feedback from the Committee on format and presentation to inform future reports.
4.	Background and key issues
4.1	<p>Strategic and Professional Changes</p> <p>The Accounts and Audit Regulations 2015 require that the Council “<i>must undertake an effective internal audit to evaluate the effectiveness of its risk management, control and governance processes; taking into account public sector internal auditing standards or guidance.</i>”</p> <p>In 2024, the Institute of Internal Auditors (IIA) issued new Global Internal Audit Standards. Within the UK public sector, these standards are adopted under the authority of the Relevant Internal Audit Standard Setters (RIASS), which include HM Treasury, the Scottish Government, the Department of Finance Northern Ireland, the Welsh Government, the Department of Health and Social Care, and the Chartered Institute of Public Finance and Accountancy (CIPFA).</p> <p>RIASS are responsible for determining the standards and requirements applicable to internal auditing across central government, local government, and the health sector in the UK.</p> <p>To support the implementation of the new standards, CIPFA published the <i>Application Note: Global Internal Audit Standards in the UK Public Sector</i>, which outlines the specific requirements we must follow. Additionally, CIPFA has introduced a new <i>Code of Practice for the Governance of Internal Audit in UK Local Government</i>, designed to help authorities establish and maintain effective internal audit arrangements in line with statutory regulations.</p> <p>The new standards will take effect from the 2025/2026 financial year. While full compliance is not immediately required, we have conducted an internal assessment to identify areas where our processes need to evolve to meet the new requirements. Our Internal Audit team was previously assessed as compliant with the former Public Sector Internal Audit Standards, providing a good foundation for adapting to the new standards.</p> <p>Once we have gathered sufficient evidence to demonstrate compliance with the new standards, we will undergo an external assessment to validate our adherence. We also remain actively engaged in professional networks and will continue to review and adopt emerging best practices to enhance our local procedures.</p>

4.2	<p>Internal Audit Plan Opinion on Control Environment</p> <p>The Global Internal Audit Standards in the UK Public Sector require that the Chief Audit Executive “must establish risk-based plans to determine the priorities of the internal audit activity, consistent with the organisation’s goals.”</p> <p>Our Plan and supporting documents are developed in line with guidance set out by CIPFA and the IIA. It is developed using a range of inputs, including the Council’s Risk Registers, Corporate Plan, stakeholder consultation, committee reports, other assurance processes, and horizon scanning to identify emerging risks and opportunities.</p> <p>It is considered good practice to operate an agile Audit Plan that adapts continuously to changes in the governance, risk, and control environment. Our plan is structured around a long-term framework of reviews, typically spanning a three-year cycle. Individual audits are prioritised using a range of risk-based criteria.</p> <p>Maintaining relevance, speed, and flexibility in our planning approach is essential to ensure that resources are used effectively. This enables us to provide a robust audit opinion and proactively communicate topical risks and assurance to the Committee.</p> <p>Members of the Committee are encouraged to propose areas where they would welcome assurance, for potential inclusion in the audit plan. This helps ensure the plan remains responsive to organisational priorities and emerging risks.</p> <p>The current plan, as presented at the previous Committee meeting, is considered sufficient to support the provision of an audit opinion for the Annual Governance Statement.</p> <p>Our report includes the output of our work in the recent quarter to provide insight on governance, risk, and control environment. We also include information and signpost to news articles to help provide foresight on topical matters and help develop the knowledge and skills of the Committee.</p>
5.	Corporate plan
5.1	Internal Audit work contributes to all priorities of the Corporate Plan . Whilst our work is predominantly risk-based, we also map our work program to Corporate Priorities for assurance that we contribute to a breadth of Corporate Plan areas.
6.	Consultation, engagement and communication

6.1	The Internal Audit Plan is agile and based on continuous engagement with colleagues. Requests for work are considered alongside our own risk appraisal. Members of the Civic Affairs and Audit Committee can also contribute to the plan by identifying areas where they would welcome assurance.
7.	Anticipated outcomes, benefits or impact
7.1	Delivery of the Internal Audit Plan will enable me to provide an opinion on the overall adequacy and effectiveness of the organisation's internal control environment, governance, and the risk management framework. The attached report outlines the outcomes of recent audit work. This will form part of the Annual Governance Statement.
8.	Implications
8.1	Relevant risks
	In the writing of this report, there are no significant implications or risks to the Council. The Internal Audit Plan enables the Council to review the effectiveness of our risk management. If the plan is not approved there is an increased likelihood that hazards and risks may crystallise.
	Financial Implications
8.2	None, budget already approved.
	Legal Implications
8.3	None
	Equalities and socio-economic Implications
8.4	None
	Net Zero Carbon, Climate Change and Environmental implications
8.5	None, the team leverages digital technology to minimise the need for travel.
	Procurement Implications
8.6	None, identified.

	Community Safety Implications
8.7	None.
9.	Background documents Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985
9.1	<ul style="list-style-type: none"> • Global Internal Audit Standards • Application Note: Global Internal Audit Standards in the UK Public Sector • Code of Practice for the Governance of Internal Audit in UK Local Government • Council Corporate Plan • Civic Affairs and Audit Committee Terms of Reference • Internal Audit Charter
10.	Appendices
10.1	a) Governance Risk and Control update report
	To inspect the background papers or if you have a query on the report please contact Jonathan Tully, Chief Audit Executive, tel: 01223 - 458180, email: jonathan.tully@cambridge.gov.uk.



Committee update - November 2025

Introduction

Overview and background

The purpose of this document is to provide an update to the Committee on key audit and governance themes.

This document provides summary updates for the Committee. Statistics are included to help provide an overview of work in progress and these are taken from the last financial quarter.

Committee information

[Calendar of meetings](#)

[Committee Membership and Functions](#)

Internal Audit Information

[Internal Audit Charter](#)

Governance information



[Annual Governance Statement](#)

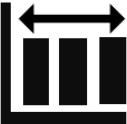
Governance, Risk and Control

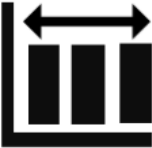
Internal Audit updates

Internal Audit reviews provide assurance on the Governance Risk and Control environment, and this contributes to the [Annual Governance Statement](#).

Below are a summary of reviews completed in the last quarter:

Review	Assurance and actions		Summary of report
Homes for Ukraine Follow Up 	Assurance: Current: Previous: Actions: Critical High Medium Low	Full Limited 0 0 0 0	<p>We reviewed the implementation of previously agreed actions following the June 2024 audit of Homes for Ukraine scheme, which had originally received a ‘Limited’ assurance rating.</p> <p>The follow-up confirmed that all outstanding actions, one high and three medium priority management agreed actions have now been completed, resulting in an upgraded ‘Full’ assurance rating.</p> <p>The Resettlement and Community Equity team demonstrated strong controls in host payment processes and took corrective action to address data inaccuracies and overpayments.</p>
Carbon Management: Data Quality 2024/25 	Assurance: Current: Previous: Actions: Critical High Medium Low	Full Full 0 0 0 0	<p>A review was undertaken of the data quality supporting Cambridge City Council’s 2024/25 Greenhouse Gas (GHG) emissions report. The assessment confirmed that all reported figures were accurately calculated using approved DEFRA/DESNZ conversion factors, with supporting data verified to source and all required datasets included. The control environment was found to be well-designed and consistently applied, with no management actions required. The service demonstrated strong practices in data collection and reporting, contributing to a ‘Full’ assurance rating and a minor organisational impact. The audit supports the Council’s strategic objective of achieving net zero emissions by 2030.</p>

Review	Assurance and actions		Summary of report
Grant assurance – Disabled Facility Grant 	Assurance: Current: Previous: Actions: Critical High Medium Low	Full Full 0 0 0 1	<p>In 2024/25, a total of £1,051,550 was allocated to the Council to carry out improvements to housing stock and disabled adaptations.</p> <p>We reviewed a sample of grants, plus their supporting documentation. This provided assurance that:</p> <ul style="list-style-type: none"> • grant applications were legitimate and only awarded to eligible applicants. • applications were supported by a qualified and independent medical referral. • applications were processed promptly. • suppliers and contractors were appropriately procured and awarded based on value for money. • any project cost variations were appropriately reviewed and approved. • financial records were completed and reconciled. • projects were effectively managed by the HIA. • grants were used for capital expenditure as set out in the grant conditions. <p>We have raised one low priority action relating to the incorrect input of the HIA fee onto Tascomi following the variations, resulting in the HIA fee being understated by £74.</p> <p>However, there is no impact on the reconciliation between the amount awarded and the amount paid as the reconciliation process relies on figures from the grant calculation sheet which was correct.</p>

Review	Assurance and actions		Summary of report
Information Governance 	Assurance: Current: Previous: Actions: Critical High Medium Low	Reasonable Reasonable 0 0 0 0	<p>The assurance focused on the Information Governance (IG) arrangements delivered through a joint Information Governance and Security Board across Cambridge City Council, South Cambridgeshire District Council, and Huntingdonshire District Council. The Chief Audit Executive attends this quarterly board, which is consistently represented by senior officers, including Senior Information Risk Owners, a Data Protection Officer, and technical leads, enabling prompt feedback and embedded assurance.</p> <p>Key strengths included a structured policy review cycle, regular updates on cyber security and governance, and proactive communication strategies such as simulated phishing campaigns and intranet updates. The group maintains its own action plan, which is actively monitored, with progress noted in policy compliance and awareness initiatives.</p> <p>The persistent and evolving nature of cyber threats, including phishing and supply chain vulnerabilities, continues to limit the ability to provide full assurance, highlighting the need for ongoing vigilance and enhancement of controls. The Councils acknowledge this risk, with cyber threats appropriately recorded on their risk registers.</p>

Overall assurance

The internal audit work and assurance mapping enables me to form an opinion on the internal control environment, governance and risk management arrangements.

There is currently a **Reasonable level of assurance** overall, which is similar level to the previous period.

This assurance directly informs the Annual Governance Statement (AGS), which accompanies the Statement of Accounts and is published on our [website](#).



Continuous improvement

We maintain a quality assurance and improvement programme that covers all aspects of the Internal Audit activity.

Development activities are included in this report to help the committee satisfy itself on the effectiveness of internal audit, including conformance with auditing standards. The committee can use this information for their annual report to those charged with governance.



Standards update

We are implementing the new Global Internal Audit Standards and the supporting UK Public Sector Application Note (GIASUKPS), effective from 1 April 2025.

Following a readiness assessment, we are updating our documents and processes to reflect UK local government requirements.

Our revised Internal Audit Charter and Code of Ethics were presented to the [June Committee](#).

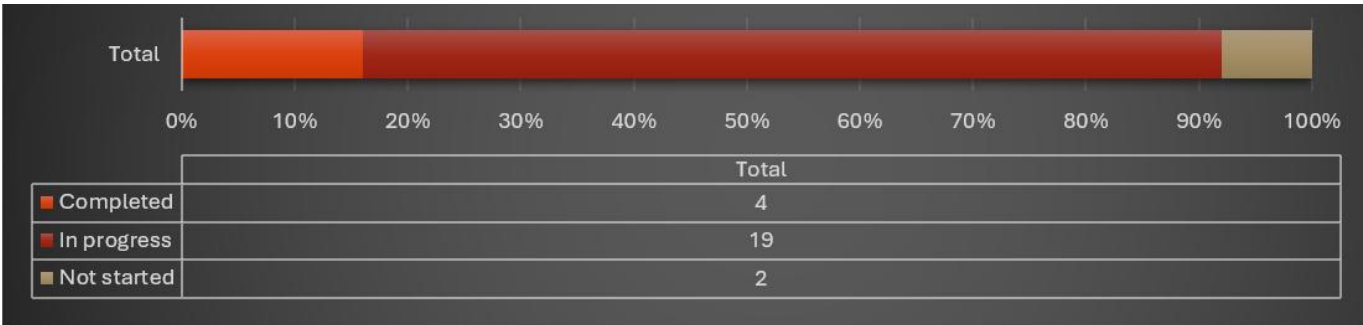


Our team holds quarterly sessions dedicated to reviewing our professional standards and help identify opportunities for continuous improvement. This process informs our annual internal quality assurance and improvement programme.

In line with expectations, Internal Audit teams are working towards full compliance within the first year of implementation. Once we have conducted substantial reviews under the new standards and gathered sufficient supporting evidence, we will proceed with an external assessment to validate our compliance.

Our regular internal reviews, combined with assessment tools provided by our professional bodies, enable us to develop and maintain a robust action plan for continuous improvement.

We have identified 25 actions to support our compliance with the new professional standards. Of these, 4 have already been completed, and 19 are currently in progress.



We remain on track to implement all outstanding actions by the end of the financial year. Most actions are minor administrative updates; however, several key developments are worth highlighting to the Committee:

Task Name	Description	Progress	Priority
GIAS: Charter	A new Charter and Mandate aligned with the GIASUKPS standards was developed and approved by the Committee in June 2025.	Completed	Urgent
GIAS: Strategy	A revised Strategy format is required under the new standards. We have included it in this report.	In progress	Urgent
Develop Root Cause Analysis resources	We have developed tools and resources to embed Root Cause Analysis into our audit programme. We need to develop back-office systems to hold data in a structured way for longer term insight. We anticipate further professional guidance on this approach which we will adopt.	In progress	Important
Review our Methodologies	Our policies and procedures are being updated to reflect the new standards. Our internal Audit Manual is also being modernised into SharePoint pages to improve accessibility, improve version control, and support onboarding.	In progress	Important
Reporting theme and trends	A new requirement involves reporting common themes and trends to the Board. This will be integrated with our Root Cause Analysis to enhance insight and foresight.	In progress	Medium
Develop AI Tools	We are safely integrating AI into the audit process, developing agent models to automate tasks such as scope planning, summarisation, peer review, and root cause analysis. This enhances efficiency and insight.	In progress	Medium
Third Party Assurance Framework	We will revise our framework for third party assurance, as referenced in our Annual Governance Statement. We will use CIPFA's new guidance on Assurance Mapping to develop and document this in our Audit Manual.	In progress	Medium
Quality - Performance Objectives	Performance objectives have been reviewed with Senior Management as part of the Corporate Performance Management and Transformation. We are also updating our Teams webpages to improve communication of performance data.	In progress	Medium

Internal Audit Strategy

The Global Internal Audit Standards require that the chief audit executive *“plans strategically to position the internal audit function to fulfil its mandate and achieve long-term success.”*



Developing an internal audit strategy is an ongoing and iterative process. It should be updated as internal audit practices evolve and improve and in response to changes in the internal audit function’s external and internal environments.

The CIPFA Application Note (GIASUKPS) sets out interpretations and requirements which need to be applied to the GIAS requirements, in order that these form a suitable basis for internal audit practice in the UK public sector. It explains that GIAS 9.1 (*Understanding Governance, Risk Management, and Control Processes*) describes the need for a chief audit executive to understand the organisation’s governance, risk management and control processes to develop an effective strategy and plan. Alongside the listed requirements in the Standard, *auditors in the UK public sector must be aware of the importance of securing value for money and the definitions which define that term in their part of the UK public sector.*

We have been developing our new Strategy over the past year, using the development tools and templates provided by the IIA.

Our strategy provides a basis for keeping internal audit services aligned with Council priorities, delivering assurance to the audit committee and senior management, and helping managers enhance governance, risk management, and control processes to achieve better performance:

Vision:	To be a trusted and forward-thinking partner that harnesses innovation, technology, and insight to drive continuous improvement and support resilience.	
Mission:	We deliver independent, risk-based and objective assurance, providing insight and foresight to strengthen governance, risk management, and internal control. We are committed to quality, innovation, and cost-effective delivery.	
Strategy		Target Position in 2028
Our Objectives (what we aim for)	Our Strategic Internal Audit Initiatives (how we will get there)	Success Measures
Provide Quality Services		
We aim to deliver high-quality, professional audit services that build trust and confidence across the organisation. By aligning with professional standards and best practice guidance, we provide assurance to stakeholders. We continuously adapt to emerging expectations and clearly communicate the rationale behind our approach.	<ol style="list-style-type: none"> 1. Complete a readiness assessment to new 2025 Global Internal Audit Standards in the UK Public Sector and deliver an action plan for improvement. External assessment to validate our compliance. 2. Engage with our stakeholders and provide both insight and foresight into topical Governance Risk and Control topics 3. Collaborate with other assurance providers to ensure appropriate and non-duplicated levels of assurance are applied to areas of highest risk 	<p>Compliant with professional standards.</p> <p>Stakeholders report added value through feedback</p>
Evolve a High Performing and Motivated Team		
Our team has a strong sense of professionalism and takes pride in our work. To help the team perform at its best and ensure continuity of service, we will continue to invest in developing our skills and knowledge. This commitment supports the delivery of high-quality assurance and helps maintain a motivated, resilient team.	<ol style="list-style-type: none"> 1. Development of our talent development programme, which includes an apprenticeship scheme with a structured development pathway. 2. Promote the profession as career choice to a wider demographic, encouraging the use of innovative ways of working, utilising secondments of subject matter experts to support qualified auditors and fostering strong collaborative working arrangements with colleagues in other teams. 3. Maintain robust learning and development opportunities to help team members grow, adapt, and consistently deliver high-quality assurance. 	<p>Embedded talent development programme.</p> <p>Evidence of innovative ways of working reported to stakeholders.</p>

Be Innovative		
It is important that we can maximise our productivity by working both efficiently and effectively. This means leveraging our technology and continually seeking ways to improve how we work. By embracing innovation, we can enhance the quality of our work, reduce manual effort, and respond more quickly to emerging risks and opportunities.	<ol style="list-style-type: none"> 1. Create a dedicated team space to explore and develop safe, practical applications of artificial intelligence that can enhance audit delivery and insight. 2. Build a robust methodology for processing and analysing data, including a suite of continuous testing routines that interrogate full data sets using smart technology. This will support more efficient, targeted and insightful audit work. 	<p>Safe and effective AI is embedded in our work programme.</p> <p>Data analytics is embedded in our work programme.</p> <p>Stakeholders informed.</p>
Be Prepared for Change		
We work with innovative and complex councils and regularly adapt our approach to meet evolving organisational objectives and risks. Our team learns quickly and responds with agility. The upcoming Local Government Reorganisation will also bring significant change and short-term uncertainty. To continue providing timely and relevant assurance, we must remain flexible, build new capabilities, and support the organisation through this transition.	<ol style="list-style-type: none"> 1. Identify how the team can act as an enabler during organisational change, providing pragmatic assurance that helps the organisation manage risk effectively and make informed decisions. 2. Map the team's existing skills and experience to identify areas where new capabilities will be needed. This will inform long-term development planning and ensure we are ready to support the future organisation. 	Team is in a position to effectively review key risks and services across the new organisation.

Team resources update

Following the recent transformation review, the Internal Audit team has been restructured to include two new apprenticeship posts. The **Institute of Internal Auditors' apprenticeship scheme** is expected to launch in early 2026, although this has been delayed due to changes in the national apprenticeship framework.

As a result, we currently have vacancies which we plan to fill through short-term arrangements such as secondments or agency workers. If these posts are not backfilled, there will be a budgetary saving; however, this would result in a reduced level of assurance during the period.

We have begun engaging with training providers in preparation for the apprenticeship scheme, and recruitment will commence once the scheme is finalised. This approach supports in-house talent development and helps address ongoing recruitment challenges within the audit profession.

Fraud and error updates

National Fraud Initiative

We are currently preparing for the next National Fraud Initiative (NFI) data upload. This annual exercise includes Council Tax and Electoral Register datasets and helps proactively identify cases where discounts should be removed due to changes in circumstances.

Failure to Prevent

From September 2025 there is new legislation that introduces a “failure to prevent” offence as part of the Economic Crime and Corporate Transparency Act 2023 (further information in news articles below).

Under the new offence, an organisation will be liable where a specified fraud offence is committed by an employee or agent, for the organisation's benefit, and the organisation did not have reasonable fraud prevention procedures in place. It does not need to be demonstrated that company management instructed or knew about the fraud.

This will discourage organisations from turning a blind eye to fraud by employees which may benefit them. The offence will encourage more companies to implement or improve prevention procedures, driving a major shift in corporate culture to help reduce fraud. Organisations will be able to avoid prosecution if they have reasonable procedures in place to prevent fraud.

Earlier in the year we provided training to the Corporate Managers, and posted resources on our Intranet as supporting guidance has been developed. As part of good practice, we have been reviewing our fraud risk register data. In addition, we are conducting a broader review to identify any further gaps in alignment with recognised good practice.

Risk update

We have continued to strengthen our Risk Management system and Framework, with planned integration into the broader Performance Management Framework.

A key highlight this quarter is that 100% of all risk records were reviewed during the period. This is a significant achievement given the volume of records and competing priorities. Achieving a high percentage of risk reviews provides assurance that risk management is effectively embedded across the organisation. It also reflects the sustained effort invested over the past few years to improve our approach and promote the value of risk management.

Training, development and risk insight

Below are topical updates that the Committee may find useful.

New measures to tackle fraud come into effect

Businesses will benefit from a new corporate criminal offence of ‘failure to prevent fraud’, designed to drive an anti-fraud culture and improve business confidence.



Introduced as part of the [Economic Crime and Corporate Transparency Act \(ECCT\) 2023](#), the offence, which comes into effect (Monday 1 September), will hold large organisations to account if they profit from fraud. It forms part of wider measures introduced by the government to tackle fraud and protect the UK economy, as part of the Plan for Change.

Fraudscape 2025

CIFAS produced their [annual fraudscape report](#). It provides a detailed overview and analysis of the fraud risk data filed by Cifas members to the National Fraud Database (NFD) and Insider Threat Database (ITD) in the twelve months to December 2024, and presents these with intelligence provided by Cifas members, partners and law enforcement. Together the insight from these different sources provides a compelling account of the challenges and threats facing the fraud prevention community, as well as the emerging threat vectors which will require focus and dedication to address.



National Fraud Initiative Report 2022 - 2024

The National Fraud Initiative (NFI) is a significant part of the Public Sector Fraud Authority's data and analytics service, matching data to help in the prevention and detection of fraud.

Earlier this year the Public Sector Fraud Authority [produced a report](#) which captures outcomes recorded in the period 1st April 2022 to 31st March 2024 from their NFI exercise, FraudHub, AppCheck and ReCheck products.



Public Sector
Fraud Authority

The Nolan Principles at 30: What does the future hold for standards in public life?

In 1995, the prime minister's ethics adviser Lord Nolan set out the [Seven Principles of Public Life](#). Since then, the Nolan Principles have been the basis for the ethical standards expected of those working in the public sector, from the prime minister to civil servants to police officers.



To mark the 30th anniversary of the Nolan Principles, and to explore how ethical standards can be upheld in the future, the IfG brought together a series of expert panels and keynote speakers – including former prime minister the Rt Hon Sir John Major KG CH – for a thought-provoking and stimulating [one-day conference](#).

Institute of Internal Auditors – Risk In Focus report

The new [Risk in Focus 2026 report](#) has been published. Coordinated by ECIIA with 14 European Institutes of Internal Auditors across 15 countries, this edition draws on 879 CAE responses, 5 roundtables with 44 participants, and 10 in-depth interviews to map the key challenges and where internal audit is spending (and will spend) its time.



As good practice we are reviewing the risk intelligence in the report to our own Strategic Register and audit plan, providing assurance that we are considering relevant and topical risks.

CIFAS – Workplace Fraud Trends

The fraud prevention service, CIFAS, have published their [Workplace Fraud Trends 2025](#) report. It provides insight on the perceived risks and information on how employers can safeguard their workforce.



Useful Links

Link	Details
Public Sector Audit Appointments	PSAA is responsible for appointing an auditor and setting scales of fees for relevant principal authorities that have chosen to opt into its national scheme.
EY	EY is our externally appointed auditor.
Cabinet Office NFI (National Fraud Initiative)	The National Fraud Initiative is a data matching exercise which helps public sector organisations to prevent and detect cases of fraud and error.

Note

This document will have links to external websites where it provides more information. We are not responsible for the content of external websites.

Glossary of terms

Assurance ratings

Internal Audit provides management and Members with a statement of assurance on each area audited. This is also used by the Chief Audit Executive to form an overall opinion on the control environment operating across the Council, including risk management, control and governance, and this informs the Annual Governance Statement (AGS).

Term	Description
Full Assurance	Controls are in place to ensure the achievement of service objectives and good corporate governance, and to protect the Authority against significant foreseeable risks.
Reasonable Assurance	Controls exist to enable the achievement of service objectives and good corporate governance, and mitigate against significant foreseeable risks. However, occasional instances of failure to comply with control process were identified and/or opportunities still exist to mitigate further against potential risks.
Limited Assurance	Controls are in place and to varying degrees are complied with, however, there are gaps in the process which leave the service exposed to risks. Therefore, there is a need to introduce additional controls and/or improve compliance with existing ones, to reduce the risk exposure.
No Assurance	Controls are considered to be insufficient, with the absence of at least one critical control mechanism. There is also a need to improve compliance with existing controls, and errors and omissions have been detected. Failure to improve controls leaves the Authority exposed to significant risk, which could lead to major financial loss, embarrassment, or failure to achieve key service objectives.

Action ratings

Opportunities for improvement are developed into actions with Management to improve the effectiveness of the governance, risk management arrangements, and the internal control environment.





Management are responsible for implementing their actions and providing assurance when they are completed. Timescales for implementing actions should be proportionate and achievable to the available resources. To help prioritise the actions we have produced guidance below:

Priority	Description	Timescale for action	Monitoring
Critical	Extreme control weakness that jeopardises the complete operation of the service.	To be implemented immediately.	Within 1 month
High	Fundamental control weakness which significantly increases the risk / scope for error, fraud, or loss of efficiency.	To be implemented as a matter of priority.	Within 6 months
Medium	Significant control weakness which reduces the effectiveness of procedures designed to protect assets and revenue of the Authority.	To be implemented at the first opportunity.	Within 12 months
Low	Control weakness, which, if corrected, will enhance control procedures that are already relatively robust.	To be implemented as soon as reasonably practical.	Within 24 months

The Council has an Action tracking system, which is used for monitoring progress. This will be updated upon distribution of the report and we will follow up the actions where appropriate.

Assurance – Direction of Travel

The symbols below indicate the direction of travel when we have concluded a review:

Control Status	Improvement	Consistent	Decrease	New
Symbol				
Details and factors	Actions have been implemented New controls established Risk factors have reduced	Controls continue to operate at the same level The risk environment has stayed consistent	Controls have reduced, or not been complied with Risks factors have increased, or new risks have emerged	This is a new review and we do not have a comparable benchmark.

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**REPORT TITLE: Annual Information Governance and Cyber Security Report
2024-25**

To:

Civic Affairs and Audit Committee (date tbc)

Report by:

Adam Brown, Data Protection Officer & Information Governance Manager

Email: Adam.Brown@3csharedservices.org

Wards affected:

All

Director Approval: Director Jane Wilson confirms that the report author has sought the advice of all appropriate colleagues and given due regard to that advice; that the equalities impacts and other implications of the recommended decisions have been assessed and accurately presented in the report; and that they are content for the report to be put to the Committee.

1. Recommendations

- 1.1 It is recommended that Civic Affairs and Audit Committee note the contents of this report.

2. Purpose and reason for the report

- 2.1 The purpose of this report is to provide an update on Information Governance activity and performance during 2024/25 (April 2024 – March 2025).

It provides:

- An overview of the current arrangements in place to monitor the Information Governance arrangements at the Council including Data Protection Compliance and Information Security / Cyber Security Compliance.
- An update on the council's performance relating to:
 - Freedom of Information Act (FOIA) / Environmental Information Regulations (EIR) Requests
 - Data Subject Access Requests
 - Personal Data Incidents

3. Alternative options considered

This is an update report for members and so no alternative options considered at this stage.

4. Background

Information is a vital asset and needs to be managed securely by the council. Appropriate policies, guidance, accountability, and structures must be in place to manage the council's information legally, securely, and effectively to minimise risk to the public and staff and to protect its finances and assets.

Information Governance describes the comprehensive approach to managing information. This includes access to information, data quality, information management, information security and sharing, data privacy and data protection and other relevant information law compliance, including the Freedom of Information Act, the Data Protection Act/UK GDPR, the Environmental Information Regulations, and Privacy in Electronic Communications Regulations.

4.1 Organisational arrangements

The Information Governance Team consists of six members:

- The Data Protection Officer (DPO)/Information Governance Manager, manages and oversees the service, and provides specialist advice on complex matters around data protection and information management for all three councils.
- The Deputy Data Protection Officer provides cover and supports the team in the absence of the DPO and is also responsible for the information asset registers for the three councils and supports the Information Management Officers.
- The Requests Manager who leads the information requests and transparency functions for the team. The Requests Manager provides specialist advice and guidance to staff and Members on FOIA and EIR.
- Information Management Officers who support the Information Governance Officers with complex information requests and provide advice and guidance to the councils' internal departments on matters relating to data sharing, data protection impact assessment and personal data incident investigations.
- Two part time Information Governance Officers who manage incoming information requests and coordinate internal requests for support around personal data incidents/breaches, advice on data sharing and data protection impact assessments/contract reviews.

As this is a shared service, the Data Protection Officer (DPO) is the statutory DPO for all three authorities.

A Joint Information Governance and Security Board was established in April 2023. The Board is made up of representatives of HDC, SCDC and Cambridge City Councils to ensure that the three councils work together to ensure good information security and governance. The Joint Information Governance and Security Board monitors and is responsible for ensuring that the council meets the compliance obligations of relevant information law.

Terms of reference for the Joint Information and Security Board were reviewed and agreed in October 2024.

The Joint Information Governance and Security Board meets quarterly and last met in October 2025.

4.2 Data Protection Compliance

Compliance against the obligations of the Data Protection Act and UK GDPR are monitored in line with the [ICO's Accountability Framework](#).

The ICO's Accountability Framework has been expanded, where appropriate, to consider the other information law regimes that come under the remit of the 3C ICT Information Governance service which are

- Freedom of Information Act (FOIA), and
- Environmental Information Regulations (EIR).

The Information Governance Team work against identified risks and issues in the Accountability Framework, against the main areas of

- Contracts and Data Sharing
- Individual's Rights
- Leadership and Oversight
- Policies and Procedures
- Risk and DPIA
- Lawful Basis and Records of Processing Activity (ROPA)
- Training and Awareness
- Transparency

Updates to monitor the status and progress of the plan are provided to the Joint Information Governance and Security Board on a quarterly basis.

There have been no new policies introduced this year with all previous outstanding policies for Information Governance and Security now up to date and within a review cycle. Work is now ongoing to align policies to a standardised policy framework for Information Security

New policies reviewed in 2024-25

- Generative AI Policy
- Internal Review Policy
- Information Governance Framework
- Information Management Policy

- Information Security Policy

4.3 Information Security Compliance

Cyber security remains vital for everyday operations and regular business processes. The council must keep systems that are secure and reliable, so that residents, public users, and partner agencies can trust them to connect systems and share information and data across various platforms.

Following from recommendations from the Department for Levelling Up, Housing and Communities (DLUHC) last year the Cyber and Information Security Team have expanded and taken on a new member of staff. This, along with additional measures such as continuous vulnerability management, and a focus on vulnerability patching have improved the cyber security posture of the Council.

The approach of the Cyber and Information Security Team is to follow the principles of the NCSC Cyber Assessment Framework (CAF) and 10 Steps to Cyber Security. The service reports into the Joint Information and Security Board on a quarterly basis, with a detailed report against high and medium cyber security risks.

The Joint Information and Security Board also receive a quarterly report on cyber security incidents. The number and cause of incidents are given in the table below.

Cause of incident	Number of incidents
Malware	1
Anti-virus disabled	1
Supply chain phishing	1

Table 1: Cyber security incidents 2024-25

In each case action was taken to contain the incident and additional monitoring was applied to affected accounts and devices to provide assurance that no malicious activity has occurred. In the case of anti-virus being disabled this was identified due to additional controls being put in place by the Cyber and Information Security Team.

Simulated Phishing Campaigns.

Phishing is the practice of sending emails that appear to be from a reputable source but are sent by a malicious actor. It is estimated that around 80% of all security incidents start with email-based phishing, and due to the success of this strategy, the number and sophistication of these attacks is rapidly increasing.

In order to gain visibility into the risk specific to the council, raise user awareness, and improve user capability to detect and appropriately handle Phishing emails, 3C ICT use “Simulated Phishing Campaigns” which involves sending realistic but safe Phishing emails to users on a regular basis. These campaigns have been running over the course of 2024-25, and the results reported to the Joint Information and Security Board.

Over the course of 2024-25 user awareness has improved, as evidenced by a decrease in the number of phishing e mails that have been opened, as well as an increase in the number reported. Remedial training is targeted at those staff who engage with these e mails.

Simulated phishing exercises are only one of several mitigations the Council has in place to reduce the risk posed by phishing, including e mail security, antivirus and firewalls.

4.4 Data Protection request performance

The Data Protection Act 2018 is the UK's implementation of the General Data Protection Regulations (GDPR). Data protection is concerned with personal data about individuals rather than general information.

The Information Governance Team coordinate requests relating to individuals' rights such as right to request access to the personal data the Council holds, right to erasure, right to rectification as well as third party requests for personal data such as from the Police or to prevent or detect fraud.

Individual rights requests must be responded to within a month. Individual requests made during the year were as follows:

Category	Received	Compliance with time frame (30 Days)
Data Rights Requests (including SAR, erasure and rectification requests)	34	88%
SAR Complaints	0	-
Disclosure for Crime and taxation purposes	20	95%
Disclosure for Legal purposes	6	66%

Table 2: Data Protection requests 2024-25

Whilst not required by the Data Protection Act, it is best practice to provide a review stage to personal information rights requests. As with requests made under FOIA or EIR this allows the Council the opportunity to review its handling of the request and to consider any appeals that the requester has made in relation to their request. The Council had no complaints relating to Data Protection Rights this year.

Requesters also have a right to complaint to the ICO in their capacity as the regulator. The Council did not receive any complaints relating to Data Protection from the regulator this year.

4.5 Personal data incidents and breaches

The guidance on notification of data breaches under the Data Protection Act / GDPR is that if a breach or incident is likely to result in high risk to the rights and freedoms of individuals, the Council must inform the ICO within 72 hours of becoming aware of the issue. If it's likely to result in high risk to rights and freedoms of individuals, the Council has a lawful duty to inform the individuals without undue delay.

As result, the Information Governance team have established a framework to ensure that each reported incident is assessed for:

- The potential detriment and adverse effect to the data subject. This includes emotional distress and information about the private aspects of a person's life becoming known to others.
- The extent of detriment, which could depend on the volume of the data and its sensitivity.

The assessment is carried out by a member of the Information Governance team when an incident is reported by a Service Area.

All incidents relating to personal data are logged to identify any trends, with the view to establish if any mitigations need to be put into place to prevent likely recurrence. Mitigations could include requiring additional training, reviewing current processes, or issuing advice or briefing notes.

	Incidents/breaches	Reported to ICO
2020-21	11	0
2021-22	25	2
2022-23	27	0
2023-24	20	1
2024-25	46	0

Table 3: Personal data incidents 2020-2025

46 incidents were reported in 2024-25, an increase in the number of incidents from last year. The volume of these incidents without a report to the Information Commissioners Office evidence a promising trend of increased reporting of low level breaches. A breakdown of these is as follows:

Type of Incident (Category)	Number
Disclosed in error	34
Lost or stolen paperwork	2
Technical security failure	5
Uploaded to website in error	1
Unauthorised access/disclosure	4

Table 4: Categories of personal data incidents 2024-25

In all instances, immediate steps were taken by officers to mitigate the incident, once known. Examples included contacting incorrect receiver of emails from the recipients of the email and those affected and removing documents from the Council's website.

A quarterly update on incidents is provided to the SIRO to ensure visibility and ensure any improvements needed are discussed and followed through as appropriate. Where relevant learning from breaches/incidents/near misses is also shared across the three councils to minimise the risk of further occurrence.

The information Governance Team have published a series of guidance documents, including a number of data protection topics as well as how to identify and report a data breach this year. Additional training and support are also provided to services where repeat incidents occur identify and eliminate root causes of these incidents.

4.6 Freedom of Information/Environmental Information Requests

The public has the right of access to information held by the Council under the Freedom of Information Act. The Freedom of Information Act (FOIA) works alongside the Environmental Information Regulations (EIR).

Requests for information that are not dealt with as part of the day-to-day business of the Council should be considered as Freedom of Information requests.

3C ICT Information Governance oversees the request management system for handling information requests. Ownership of the response to these requests is placed on service areas by means of key responders and champions being designated and responsible for ensuring their service responds within the legal timeframe of 20 working days. An Information Governance Officer coordinates all formal requests and allocates specialist support from the Information Governance team where service areas require this.

In 2024-25 (Apr – Mar) the council received a total of 615 requests under FOIA and EIR. This represents a 1.4% increase in the number of requests received on the previous year.

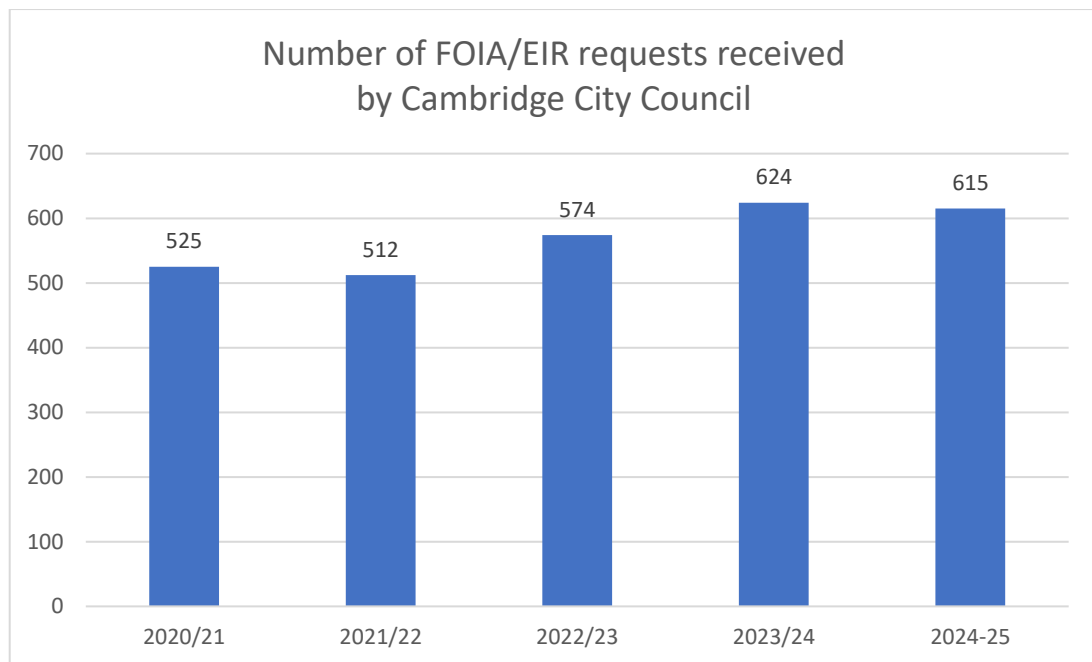


Chart 1: FOIA and EIR requests received by CCC 2020-25

The Council works to a target of 90% response compliance within 20 days as advised by the Information Commissioner. The Council achieved 86% in 2024-25 which is an improvement of 5% on the response rate of 2023-24.

Detail of the requests received across all Council services is provided below. The Corporate and Communities Groups received the most cases.

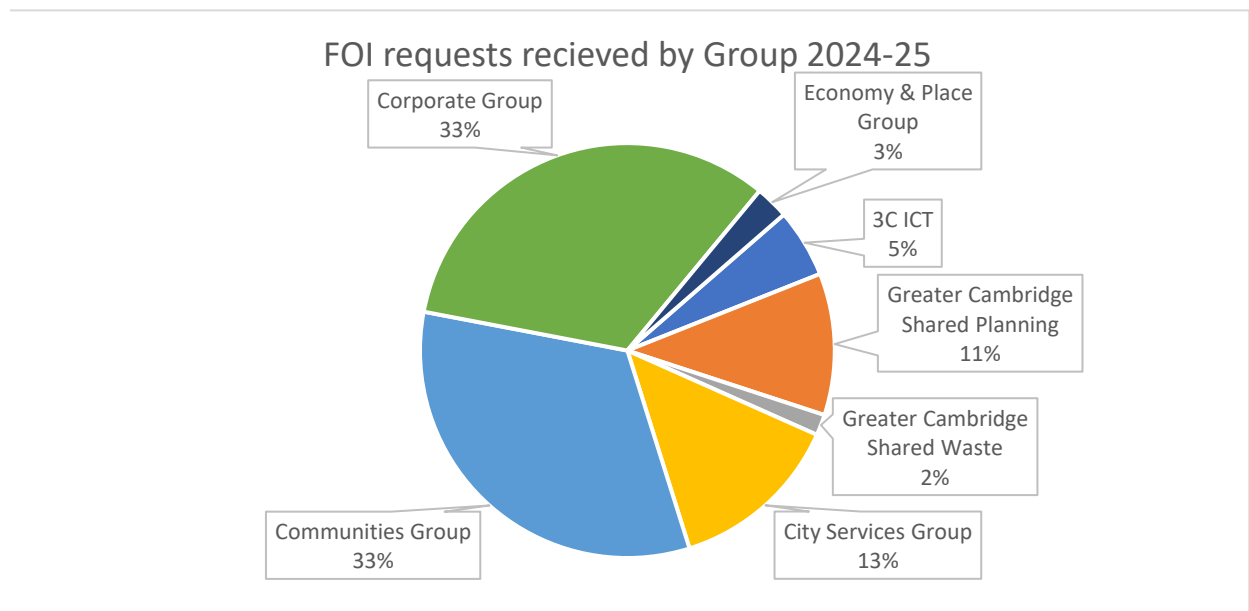


Chart 2: FOI requests by Group

Access to information acts such as FOIA and EIR provide a limited right of access. Some information may be withheld if an exemption to disclosure applies. All requested information was provided in most cases, with information being exempted in only 18% of cases. See breakdown of outcomes below.

Request Outcome	Count
All information provided	380
Some information provided; remainder exempt	51
Some information provided; remainder not held	3
Exemptions applied to all information	64
Exceeds reasonable limits	4
Not held	59
Withdrawn	55

Table 5: Outcomes to information requests 2024-25

The Information Governance team continue to provide reports on performance and compliance with the legislation, which are shared on the Cambridge City Council intranet on a quarterly basis. These reports also enable services to understand trends, and to help focus on what should be uploaded onto their publication scheme.

Requestors have the right to a review of their case if they are not satisfied with the outcome or how the request was handled, before taking further action to the Information Commissioner's Office.

	Received	Response within 20 working days
Internal Reviews	8	100%
ICO Complaints	2	Both still open pending ICO investigation

Table 6: Information request reviews and complaints to regulator 2024-25

4.7 Looking Forward

The team have ambitious goals moving forward, with a number of these being delivered alongside colleagues in ICT. Primarily working towards adherence to standardised Policy and Risk Frameworks for Information Security.

Building on this in the next year the team is looking to implement more technical controls around management and security of data based on the organisational controls already in place.

5. Corporate plan

- 5.1 Information Governance and Cyber Security support the Council's overarching vision of "One Cambridge – Fair for All" in the following ways.

- **Cyber security and resilience** protect the infrastructure that supports inclusive digital services.
- **Data protection compliance** ensures fair use of data in service delivery and community engagement.
- **Transparency** fosters democratic accountability and empowers residents to participate in shaping their city.

6. Consultation, engagement and communication

6.1 Senior managers have been consulted in the production of this report.

7. Anticipated outcomes, benefits or impact

7.1 The Council takes transparency issues seriously and is broadly compliant with the legislation. Several measures have been put into place to increase the Council's performance in these areas, and to reduce the risk of breaches in compliance with the legislation.

Officers will continue to review practice, learning from 3C ICT partners and others to strive to continually improve performance, serve residents better and reduce the council's exposure to risk.

8. Implications

8.1 Relevant risks

No decision required that would result in impact to risks

Financial Implications

8.2 No decisions with financial implications are proposed in this report.

Legal Implications

8.3 No decisions with legal implications are proposed in this report

Equalities and socio-economic Implications

8.4 This report does not propose decisions with equalities impacts, so an EqlA has not been produced.

Net Zero Carbon, Climate Change and Environmental implications

8.5 *No decisions with environmental implications are proposed in this report.*

Procurement Implications

8.6 *No decisions with procurement implications are proposed in this report.*

Community Safety Implications

8.7 *No decisions with community safety implications are proposed in this report.*

9. Background documents

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

9.1 *There are none*

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REPORT TITLE: Development of the Quarterly Performance Report to Cabinet

To:

Civic Affairs and Audit Committee

17 November 2025

Report by:

Jane Wilson, Chief Operating Officer

Tel: 01223 457860 Email: jane.wilson@cambridge.gov.uk

Wards affected:

All

Director Approval: Jane Wilson confirms that the report author has sought the advice of all appropriate colleagues and given due regard to that advice; that the equalities impacts and other implications of the recommended decisions have been assessed and accurately presented in the report; and that they are content for the report to be put to the Committee.

1.	Recommendations
1.1	<p>It is recommended that the Civic Affairs and Audit Committee</p> <ol style="list-style-type: none"> Note the development of the new quarterly performance report for Cabinet and its role in supporting the Council in delivering on its Local Code of Governance Note the updated financial thresholds in the Risk Management Framework
2.	Purpose and reason for the report
2.1	<p>This report is to bring this Committee's attention to the development of a quarterly performance report for Cabinet.</p> <p>The Civic Affairs and Audit Committee's terms of reference include oversight of the Council's corporate governance arrangements. The development of the new Performance Management Framework – including its Principles and Approach and the Quarterly Performance Report – represents a key enhancement to those arrangements. Noting this development will support the Committee in fulfilling its governance role. Furthermore, these changes will be reflected in the Annual Governance Statement, which the Committee will consider later in the year.</p>

	<p>The quarterly performance report will form an important ongoing plank in our delivery of the Local Code of Governance and delivers on the Performance Management Framework Principles and Approach approved by the Executive Councillor for Finance and Resources following scrutiny at the Strategy and Resources Scrutiny Committee March 2025. The Framework includes a Governance section and references the governance arrangements, including the importance of Civic Affairs and Audit Committee.</p> <p>The committee is also asked to note updated financial thresholds in the Risk Management Framework, the need for which was identified during the detailed development work for the quarterly report. This helps provide the Committee with assurance that the risk management framework is regularly reviewed for effectiveness.</p>
3.	Alternative options considered
3.1	As this item is to note, no alternative options were considered.
4.	Background and key issues
4.1	<p>Background</p> <p>The Quarterly Performance Report for Cabinet is one element in delivering the Council's Performance Management Framework Principles and Approach agreed March 2025. The primary objective of the Framework is to enable the Council to be an effective, efficient and high-performing organisation, successfully meeting its agreed objectives at every level, and enabling effective scrutiny, both internally and publicly, of our performance against those objectives.</p> <p>The development of a Quarterly Performance Report for Cabinet responds both to the Performance Management Framework and the new Cabinet Governance model adopted from May 2025.</p> <p>Rationale for the Quarterly Performance Report</p> <p>The primary purpose of the report is to provide effective strategic oversight, enabling considered decision-making, effective scrutiny, and public visibility.</p>

It will achieve this through a consistent, quarterly, high-level factual snapshot of the overall health of the Council, presented in clear, lay terms. It will complement the more reflective and in-depth Annual Report.

It will bring together performance measures, finance, and risk information into one place. These three sources of information taken together provide a rounded picture of the health of the Council.

Format

The report will focus on the whole Council level, split into two parts:

- The Council's general activities and responsibilities
- The Council as a residential Social Landlord

This separation reflects the financial separation between our General Fund, through which all income and expenditure relating the Council's general activities and responsibilities, and the Housing Revenue Account which is ring-fenced for all income and expenditure relating to the Council as a residential social landlord.

For each part, there will be a high-level narrative overview, making the link between performance, finance and risk, and an appendix with supporting detail. This will incorporate previously separate quarterly reports covering finance, our social landlord function and the quarterly update on the Housing Development Agency. Their integration into the single quarterly report ensures that it provides an effective overview of the Council as a whole.

Style

The intention is for the report to be straightforward and easy to understand using minimal jargon or specialist language, and where specialist terms are unavoidable, they will be explained. The narrative and language used will be objective and evidence based.

Schedule

The Quarterly Performance Report will first go to the Cabinet in December 2025, covering the second quarter of 25/26, and will thereafter go on a quarterly basis, with the expected annual pattern being Q1: September Cabinet, Q2: December Cabinet, Q3: March Cabinet, Q4: June Cabinet.

	<p>Review</p> <p>There will be a review in Summer 2026, so that any revisions can be incorporated from Q1 of the 26/27 reporting cycle. This timescale reflects that this is a new approach as well as a new report for the Council, with an early review and revision part of the process of ensuring it can deliver on its purpose. The Performance Management Framework as a whole will be subject to periodic review by Internal Audit as part of the risk-based audit plan, with outcomes reported to the Civic Affairs and Audit Committee, providing additional assurance on its effectiveness and alignment with the Council's governance arrangements.</p> <p>Link to Local Code of Corporate Governance</p> <p>The Quarterly Performance Report to Cabinet will be an additional route by which the Council adheres to the Local Code of Corporate Governance. Most notably it practically demonstrates the management of risk and performance through robust internal control and strong public financial management, and contributes to good practices in transparency, reporting and audit, to deliver effective accountability.</p> <p>Risk Management Strategy update</p> <p>We are integrating our risk management data into the broader Performance Management Framework to strengthen alignment between risk and performance oversight. Our Risk Management Framework includes a scoring matrix that supports consistent risk evaluation and helps prioritise mitigation efforts. This Risk Management Framework was last presented to the Committee in February 2024.</p> <p>As part of good governance, it is important to periodically review the scoring matrix to ensure it remains relevant and proportionate. The existing finance scoring levels have remained unchanged since at least the Committee's 2021 review. In collaboration with the Section 151 Officer, we have developed updated financial scoring factors to reflect current conditions. These are listed in Appendix A below for clarity.</p>
5.	Corporate plan
5.1	<p><i>Explain how the decision links to the Councils Corporate Plan</i></p> <p>Corporate plan 2022-27: our priorities for Cambridge - Cambridge City Council</p>

	The primary link is to objective 4, Modernising the Council to lead a greener city that is fair for all.
6.	Consultation, engagement and communication
6.1	The Performance Management principles and approach were approved by the Exec Cllr for Finance and Resources following a presentation at the Strategy and Resources Scrutiny Committee in March 2025. Members of Cabinet, the two scrutiny committees and the chair and vice chair of this committee were invited to take part in workshops on the format of the report in October 2025. Extensive internal staff engagement has taken place, to inform both the data and the format.
7.	Anticipated outcomes, benefits or impact
7.1	As set out above, the report will provide a quarterly snapshot of the health of the Council, to support effective decision making and scrutiny.
8.	Implications
8.1	Relevant risks
	This report is to note and provide visibility on the new Quarterly Performance Report to Cabinet, there are no associated risks with doing so.
	Financial Implications
8.2	This report is to note and provide visibility on the new report, there are no associated financial implications
	Legal Implications
8.3	This report is to note and provide visibility on the new report, there are no associated legal implications
	Equalities and socio-economic Implications
8.4	There are no equalities or socio-economic implications in noting this report.
	Net Zero Carbon, Climate Change and Environmental implications
8.5	There are no net zero carbon, climate change or environmental implications in noting this report.
	Procurement Implications
8.6	There are no procurement implications in noting this report.

	Community Safety Implications
8.7	There are no community safety implications in noting this report.
9.	Background documents Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985
9.1	<i>n/a</i>
10.	Appendices
10.1	<i>Appendix A – Revised Financial Risk Scores</i>
	To inspect the background papers or if you have a query on the report please contact Jane Wilson, Chief Operating Officer tel: 01223 458760 email: jane.wilson@cambridge.gov.uk

Appendix A Risk Score changes

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		1	2	3	4	5
Financial 2021	Failure to effectively manage the Council's assets and finances including budget monitoring, financial priorities, medium/long term planning, fraud prevention.	The level of financial impact is likely to be under £5,000 in any year.	The level of financial impact is likely to be up to £50,000 in any year.	The level of financial impact is likely to be up to £300,000.	The level of financial impact is likely to be up to £500,000 in any year.	The level of financial impact is likely to be over £500,000 in any year.
Financial September 2025	Failure to effectively manage the Council's assets and finances including budget monitoring, financial priorities, medium/long term planning, fraud prevention.	The total level of financial impact is likely to be less than £50,000.	The total level of financial impact is likely to be between £50,000 and £150,000.	The total level of financial impact is likely to be between £150,000 and £500,000.	The total level of financial impact is likely to be between £500,000 and £3 million.	The total level of financial impact is likely to be over £3 million.

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REPORT TITLE: Civic Affairs & Audit Committee rolling work programme

To:

Civic Affairs & Audit Committee (17 November 2025)

Report by:

Sarah Michael, Democratic Services Officer

Email: sarah.michael@cambridge.gov.uk

Wards affected:

None

1. Recommendations

- 1.1 It is recommended that the Civic Affairs & Audit Committee note the work programme and make any suggestions for future items.

2. Purpose and reason for the report

- 2.1 To allow the Committee to review what items are coming forward over a rolling 12-month period and to make suggestions for items to be included at future meetings.

This allows for greater transparency for members of the Committee to be able to assess if the right items are coming forward and to provide challenge to officers on areas that are within the remit of the Committee.

3. Implications

3.1 Relevant risks

There are none.

Financial Implications

3.2 There are none.

Legal Implications

3.3 There are none.

Equalities and socio-economic Implications

3.4 There are none.

Net Zero Carbon, Climate Change and Environmental implications

3.5 There are none.

Procurement Implications

3.6 There are none.

Community Safety Implications

3.7 There are none.

4. Background documents

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985

4.1 There are none.

5. Appendices

5.1 Appendix A – Work programme

To inspect the background papers or if you have a query on the report please contact Sarah Michael, Democratic Services Officer, email: sarah.michael@cambridge.gov.uk

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Civic Affairs and Audit Committee Rolling Work Programme 2025/26

Meeting date – 19 January 2026

Report title	Short description & outcome	Link to Terms of Reference	Report author and responsible director
Annual Governance Statement 2024/2025	Committee to review and approve the draft Annual Governance Statement for 2024/2025 financial year. n.b. this may be deferred to align to the approval of the Statement of Accounts (date tbc)	3.4.4 b. Review and approve the Annual General Statements (AGS)	Jonathan Tully
Civic Protocols and updates	Provide the Committee with updates on Civic Events and to review protocols.	3.4.5c Overview of the Council's Constitution and consideration of proposed amendments or revisions to the Constitution including the Schemes of Delegation, Procedure Rules and Protocols.	Dan Kalley
Whistleblowing Policy	Committee approval of periodic review of the Councils policy that supports colleagues to raise concerns.	3.4.5 a Assurance of the Council's governance, risk management	Jonathan Tully

		framework and associated control environment and policies including the Council's Risk Register, Risk Management Strategy, 'whistleblowing', and anti-fraud and anti-corruption arrangements.	
Counter Fraud policy update	Committee review and endorsement of Counter Fraud Policy, noting work taken in response to new Economic Crime and Transparency Act	3.4.5 a Assurance of the Council's governance, risk management framework and associated control environment and policies including the Council's Risk Register, Risk Management Strategy, 'whistleblowing', and anti-fraud and anti-corruption arrangements.	Jonathan Tully

Meeting date – 9 March 2026

Report title	Short description & outcome	Link to Terms of Reference	Report author and responsible director
Annual Audit Committee report	Report presented outlining the work of the committee over the past 12 months, to be presented to Full Council once been through Civic Affairs & Audit Committee	3.4.2 To publish an annual report on the work of the Committee, including a conclusion on the compliance with the CIPFA Position Statement.	Jonathan Tully/Dan Kalley
Review of Council Constitution	Following review of working of Constitution since agreement in May 2025, recommendations on updates to Constitution to be presented before report presented to Annual Meeting in May 2026	3.4.5 (c) Overview of the Council's Constitution and consideration of proposed amendments or revisions to the Constitution including the Schemes of Delegation, Procedure Rules and Protocols.	Tom Lewis/Dan Kalley

Risk Management update	Periodic review / update of the Councils risk management framework and strategy	3.4.5 a Assurance of the Council's governance, risk management framework and associated control environment and policies including the Council's Risk Register, Risk Management Strategy, 'whistleblowing', and anti-fraud and anti-corruption arrangements.	Jonathan Tully / Stephanie Fisher
Internal Audit update	Provide the Committee with an update on the work programme of the Internal Audit team, including: <ul style="list-style-type: none"> • Update of audits completed. • Plan of upcoming audit work. Topical governance risk and control matters	3.4.4 d Receive and consider the Charter, resource requirements, plans reports and opinions of the internal auditor; ensuring effective control within the assurance framework.	Jonathan Tully