

Audit and Risk Committee Agenda



17 September 2025 at 7pm

Marconi Room, Civic Centre, Chelmsford

Membership

Councillor N. Walsh (Chair)

and Councillors

G. Bonnett, N. Bugbee, H. Clark, N. Dudley, S. Rajesh, J. Raven, M. Sismey and A. Sosin

Local people are welcome to attend this meeting, where your elected Councillors take decisions affecting YOU and your City. There will also be an opportunity to ask your Councillors questions or make a statement. These have to be submitted in advance and details are on the agenda page. To find out more about attending please email committees@chelmsford.gov.uk or telephone on Chelmsford (01245) 606480

Audit and Risk Committee

17 September 2025

AGENDA

1. Apologies for Absence and Substitutions

2. Minutes

To consider the minutes of the meeting held on 11 June 2025.

3. Declaration of Interests

All Members are reminded that they must disclose any interests they know they have in items of business on the meeting's agenda and that they must do so at this point on the agenda or as soon as they become aware of the interest. If the interest is a Disclosable Pecuniary Interest they are also obliged to notify the Monitoring Officer within 28 days of the meeting.

4. Public Question Time

Any member of the public may ask a question or make a statement at this point in the meeting. Each person has two minutes and a maximum of 20 minutes is allotted to public questions/statements, which must be about matters for which the Committee is responsible.

The Chair may disallow a question if it is offensive, substantially the same as another question or requires disclosure of exempt or confidential information. If the question cannot be answered at the meeting a written response will be provided after the meeting.

Any member of the public who wishes to submit a question or statement to this meeting should email it to committees@chelmsford.gov.uk 24 hours before the start time of the meeting. All valid questions and statements will be published with the agenda on the website at least six hours before the start time and will be responded to at the meeting. Those who have submitted a valid question or statement will be entitled to put it in person at the meeting.

5. Announcements

6. External Audit Update

7. Updated Internal Audit Plan 2025

8. Risk Management Report

9. Annual Health and Safety Report 2024/25

10. Work Programme

11. Urgent Business

To consider any other matter which, in the opinion of the Chair, should be considered by reason of special circumstances (to be specified) as a matter of urgency.

**MINUTES OF THE
AUDIT AND RISK COMMITTEE**
held on 11 June 2025 at 7.15pm

Present:

Councillor N. Walsh (Chair)

Councillors, G. Bonnett, H. Clark, N. Dudley, S. Rajesh, J. Raven and A. Sosin

Independent Persons –
Mr C Groves
Ms J Hoeckx

1. Apologies for Absence and Substitutions

No apologies for absence were received.

2. Minutes

The minutes of the meeting on 26 February 2025 were confirmed as a correct record.

3. Declarations of Interests

All Members were reminded to disclose any interests in items of business on the meeting's agenda and that they should do so at this point on the agenda or as soon as they became aware of the interest. They were also obliged to notify the Monitoring Officer of the interest within 28 days of the meeting if they had not been previously notified. None were made.

4. Public Questions

There were no questions or statements from members of the public.

5. Announcements

No announcements were made.

6. External Audit Update

The Committee received an update from Ernst & Young, the Council's External Auditors that included the their Annual report for 2023/24 and Provisional Audit Planning Report for 2024/25. The Committee were informed that the annual report included the commentary on Value for Money arrangements for Chelmsford City Council, alongside explaining the work they had undertaken during the year and highlighted any significant weaknesses identified, along with recommendations for improvement.

The Committee were informed that a disclaimed audit opinion had been issued, due to the disclaimers of opinion on prior years, and the limited time between the backstop dates. The Committee also heard that the value for money element of the Audit had been completed with no significant matters to report, after looking at various budget processes and projects, which was detailed in Section 3 of the report.

The Committee were also provided with details on the Provisional Audit Planning Report for 2024/25. It was noted that due to the backlogs a disclaimed opinion was expected again in 2024/25 and guidance that had recently been issued on rebuilding assurances was going to be looked at by EY soon. It was also noted that similar risks had been identified to the previous year, in addition to a new risk for the implementation of IFRS 16. The Committee were also informed that the VFM work for the 24/25 audit had not yet been completed, but was near to being completed and the details would be included in the auditors annual report before the end of November, in line with the updated code.

In response to questions and comments from the Committee, the External Auditors noted that;

- The VFM work would definitely be completed by 30th November due to the updated code and would be reported to the Committee accordingly.
- New Auditing standards had been introduced after the fees had been set by PSAA leading to additional costs for the audit.
- Extra work had been required due to previous disclaimed audit opinions to assist with property valuations.
- PSAA who manage nationally the external audit contracts would review the proposed audit charges and the cost to the authority could reduce from those shown in the report.
- Work had not been duplicated on auditing the pension fund as additional work was required compared to the Audit carried out for Essex County Council on the pension fund and therefore specialists had to be engaged.
- Due to Local Government Reorganisation, work on the financial resilience of Council's and whether budget problems could be managed, would be covered in the earlier than normal VFM work to assist Council's.

RESOLVED that the update and reports be noted.

(7.16pm to 7.33pm)

7. Provisional Revenue Outturn Report 24/25

The Committee received a report of the Council's revenue outturn position for 2024/25, outlining the Council's expenditure and income against the approved budgets for 2024/25. The report also outlined the activity in the Council's finances, the variations identified and the risks they involved. Members were advised that the revenue budget was divided into service budgets, non-service budgets and reserve use.

Members were advised that the overall position for 24/25 had resulted in an improvement in the expected General Fund reserve position, which was £3.89m better off than the 2024/25 original budget and £2.5m better when measured against the 2025/26 budget assumption. The Committee heard that there had been an underspend of £1.6m on Net Service level budgets, predominantly due to additional income, alongside an favourable variance of £3.9m on Non-service level budgets, predominantly due to the following, a one-off gain of £1m from the disposal of the Councils investment in the CCLA property fund, additional interest (£0.8m), additional income from business rates and associated grant (£1.2m). The Committee were also informed of a reduced use of earmarked reserves of £1.7m and noted that the appendices to the report contained further details on the Council's revenue position, which was provisional and still subject to external audit.

The Committee noted that the revenue position showed an improvement, with some net gains already reflected in 25/26 budgets onwards and that income had been higher across the Council, leading to plans to review the revenue monitoring process going forward to avoid a pessimism bias on income forecasts by services and accountancy in future years.

In response to questions, officers stated that the news of the Radio 2 event at Hylands Park was of benefit to the Council's finances, but that due to an event traditionally taking place, the forecasting did build in a slight assumption for an event each year. It was also noted that a plan was being developed to redevelop and modernise parts of the Crematorium and that concerns about local competition, may reduce income but the investment was still in the Council's financial interest .

RESOLVED that the revenue outturn position for 24/25 and actions arising be noted.

(7.34pm to 7.48pm)

8. Capital Programme Update and Provisional Outturn 24/25

The Committee considered a report which detailed the capital expenditure incurred in 2024/25 and updated them on the approved Capital Schemes and variations in cost which had been identified at outturn and to date. The report also updated the Committee on the approved Asset Replacement Programme for 2024/25 and 2025/26 for variations in cost and timing which had been identified at outturn and to date.

The Committee were informed that the proposed cost of the Capital Schemes had increased by a net £0.438m (0.3%) against the latest approved budget of £130.684m, of which the specific details were summarised in Appendix 1 to the report. It was noted that the majority of the increases forecast in spend were funded by new grants or CIL. The Committee also heard that the later timing (underspend) of Capital Schemes in 2024/25, £12.2m, was beneficial to the Council in terms of cashflow and financing, as it had reduced the requirement for borrowing in the financial year. The Committee also heard that £0.847m of the 2024/25 Asset Replacement Schemes, had been deferred to future years and this too was favourable to the Council and the requirement to borrow against short-term assets had been delayed to 2025/26.

RESOLVED that;

1. the report be noted and;
2. Officers be asked to produce a report for July Cabinet including any comments from the Audit and Risk Committee

(7.49pm to 7.53pm)

9. Internal Audit Annual Report 2024/25

The Committee received a report summarising the work that the Internal Audit team had undertaken during the financial year 2024.25, which identified key themes, highlighting how responsive management had been in implementing recommendations and reviewed the effectiveness of Internal Audit.

The report concluded that the overall audit opinion was of Moderate Assurance, in line with previous years, meaning that the Internal Audit team, based on the work undertaken, consider there to be adequate systems of control in place, with some improvements required which were detailed in the high priority findings at section 4 of the report. The Committee also heard that management responses to implementing findings had been positive throughout the year and it had been reassuring to see issues being worked on that had been reported.

RESOLVED that the Internal Audit Annual report 2024/25 be noted.

(7.54pm to 7.59pm)

10. Counter Fraud Annual Report 2024/25

The Committee received a report summarising the counter fraud work undertaken by the Internal Audit Team during 2024/25, including work on Guidance, Training and Awareness for staff and Councillors and compliance with the National Fraud Initiative and Transparency Code. The Committee were also informed about how the Council managed the risk of fraud and information on the Council's Whistleblowing policy.

The Committee were also updated on a new criminal offence of 'Failure to prevent Fraud' which would become effective from September 2025, which was designed to hold organisations to account if they profited from fraud committed by their employees. It was noted that this was an important area for the Council to monitor closely going forward and that actions taken by the Council within the Counter Fraud strategy had provided a good basis for meeting the requirements to defend the new offence. It was also noted that these would continue to be reviewed and monitored in line with the new legislation and that the Council's new Counter Fraud Strategy in December 2025 would further underpin the key principles required.

RESOLVED that the Counter Fraud Annual Report be noted.

(7.59pm to 8.07pm)

11. Audit and Risk Committee Annual Report

The Committee received a report summarising the work undertaken during 2024/25 in line with CIPFA's Position Statement for Audit Committees 2023 and information had been gathered from the previous minutes and reports during 2024/25.

RESOLVED that the annual report be noted and recommended to the July Full Council meeting.

(8.08pm to 8.09pm)

12. Work Programme

The Committee were updated on the rolling work programme of future reports and work for the next series of meetings.

It was noted that some date changes may be required to align with external audit deadlines and that members would be advised of any changes.

RESOLVED that the work programme be agreed.

(8.09pm to 8.10pm)

13. Urgent Business

There was no urgent business.

The meeting closed at 8.10pm.

Chair



Chelmsford City Council Audit and Risk Committee

17th September 2025

Updated Internal Audit Plan 2025

Report by:

Audit Services Manager

Officer Contact:

Elizabeth Brooks, Audit Services Manager, elizabeth.brooks@chelmsford.gov.uk

Purpose

This report presents the Updated Internal Audit Plan 2025 to Committee.

Recommendations

Committee are requested to note the Updated Internal Audit Plan 2025.

1. Background

- 1.1. The Council is responsible for establishing and maintaining appropriate risk management processes, control systems, accounting records and governance arrangements. The purpose of Chelmsford City Council's Internal Audit section is to provide independent, objective assurance and consulting services to the Council (via the Audit & Risk Committee, Chief Executive, S151 Officer, External Audit and senior managers), relating to these arrangements, which are designed to add value and improve the Council's operations.
- 1.2. The Audit Services Manager is also responsible for the delivery of an annual audit opinion that can be used by the Council to inform its governance statement. The annual opinion will also conclude on the overall adequacy and

effectiveness of the organisation's framework of governance, risk management and control.

- 1.3. In order to achieve this, Internal Audit have developed an internal audit plan for 2025 which is based on a prioritisation of the audit universe using a risk-based methodology, including input from the Council's 'Our Chelmsford Our Plan', Principal Risk Register, Fraud Risk Register, AGS Action Plan as well as discussions with Council staff, senior management, plus consideration of local and national issues and risks.
- 1.4. In line with our approach, where instead of a full twelve-month plan, we produce a 6-month rolling plan to ensure we continue to be aligned to reviewing the highest risks in the Council, this report outlines the suggested areas for Internal Audit review for October 2025 to March 2026.
- 1.5. Additional changes to the plan may be necessary to reflect changing priorities and risk environment and therefore as usual, a contingency has been set aside to cover requests from management for ad hoc, advisory type work on risk identification and subsequent control design (as well as urgent, unplanned reviews which may arise). A budget for follow up reviews of previous audit work has also been accounted for in the plan.

2. Conclusion

- 2.1. The Updated Internal Audit Plan 2025 is attached for Audit & Risk Committee to note.

List of appendices: Updated Internal Audit Plan 2025

Background papers: None

Corporate Implications

Legal/Constitutional: The Council has a duty to maintain an effective internal provision to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance (Regulation 5 (Part 1) of the Accounts and Audit Regulations 2015).

Financial: None

Potential impact on climate change and the environment: None

Contribution toward achieving a net zero carbon position by 2030: None

Personnel: None

Risk Management: The scope of Internal Audit activities encompasses, but is not limited to, objective examinations of evidence for the purpose of providing independent assessments to the Audit & Risk Committee, management and outside parties (e.g. External Audit) on the adequacy and effectiveness of governance, risk management, and control process for Chelmsford City Council.

Equality and Diversity: None

Health and Safety: None

Digital: None

Other: None

Consultees: Noted by Management Team during August 2025

Relevant Policies and Strategies: None

Appendix A

Internal Audit Draft Plan 2025 (October 2025 to March 2026)

Audit Title	Link to Corporate Plan	Link to Principal Risk	Fraud Risk Assessment	Indicative Scope
Information Governance		PRR 016 - Information Governance	FRC1 - Data theft and other cyber crime	<i>Review of the control environment in relation to information governance.</i>
Car Park Strategy	Fairer and Inclusive Chelmsford		FRC12 - Income Collection; FRC7 - Payroll and expenses	<i>Review of the Car Park Strategy and its framework for reporting progress</i>
Housing Rents		PRR 006 - Homelessness	FRC3 Social Housing and Tenancy	<i>Review of the control environment in relation to Housing Rents</i>
Landlord Rent Deposit Scheme		PRR 006 - Homelessness	FRC3 Social Housing and Tenancy; FRC12 No Recourse to Public Funds	<i>Review of the control environment in relation to LRDS.</i>
Temporary Accommodation	Fairer and Inclusive Chelmsford	PRR 006 - Homelessness	FRC3 Social Housing and Tenancy; FRC12 No Recourse to Public Funds; FRC5 - Decision-making	<i>Review of arrangements for Temporary Accommodation, including procurement and monitoring of providers.</i>
Leisure Centres	A more connected Chelmsford	PRR 015 - Safeguarding	FRC11 - Income Collection; FRC8 Theft; FRC7 - Payroll and expenses	<i>Review of operational and financial arrangements.</i>
Decision Making		PRR023 Succession Planning	FRC 005 - Decision-making	<i>Review of the Council's decision-making arrangements.</i>
Insurance			FRC19 - Insurance claims	<i>Review of the arrangements for demonstrating compliance with insurance policy requirements.</i>
Safeguarding		PRR 015 - Safeguarding		<i>Review of the arrangements for Safeguarding.</i>
Procurement and Contract Management			FRC 004 - Procurement and contracting	<i>Review of the arrangements for Procurement and Contract Management.</i>
Performance Management	ALL		FRC 010 Manipulation of Data	<i>Review of the approach to performance management against Our Chelmsford Our Plan priorities</i>
Business Continuity/Emergency Planning		PRR 003 - Business Continuity; PRR 004 – Emergency Planning		<i>Review of the Policy and Framework for business continuity and emergency planning response and recovery</i>



Chelmsford City Council Audit and Risk Committee

17th September 2025

Risk Management Report – September 2025

Report by:

Audit Services Manager

Officer Contact:

Elizabeth Brooks, Audit Services Manager elizabeth.brooks@chelmsford.gov.uk

Purpose

This report summarises the current position for the Council's Principal Risks and outlines recent risk management activity.

Recommendations

Audit and Risk Committee are requested to note the contents of this report.

1. Background

- 1.1. It is the Council's policy to proactively identify, understand and manage the risks inherent in its services and associated with its plans and strategies, so as to encourage responsible, informed risk taking within its risk appetite and reduce exposure to a tolerable level using a justifiable level of resources.
- 1.2. An effective risk management framework should:
 - provide risk information to support decision-making and resource allocation
 - improve compliance with policies, procedures, laws and regulations and stakeholder expectations; and
 - provide assurance to internal and external stakeholders that the Council is well-managed.

- 1.3. The corporate risk management function assists the Council to identify, understand and manage its strategic risks. The function reports twice a year to the Audit and Risk Committee to enable the Committee to monitor the effective development and operation of strategic risk management in the Council.

2. Risk management activity

- 2.1. To provide a cost-effective and resilient response to corporate risk management following the restructure of the Risk and Insurance Manager role at the start of 2025, strategic responsibility for the function moved to the Audit Services Manager, with the Risk Manager role outsourced to Basildon Council, who have the dedicated resources, capacity, and skills for this purpose.
- 2.2. The main activities completed to date during 2025 have included:
 - Update of the Council's Principal Risk Register (see section 3 and Appendix 1)
 - Development of new Risk Management Strategy (see Appendix 2)
 - Updated and refreshed Risk Management Framework.
 - Early development of the Council's Local Government Reorganisation Risk Register
 - Exploring options for the future of the Council's Risk System

3. Principal Risk Summary

- 3.1. The Principal Risk Register is central to the risk management framework, owned by Management Team and covers the Council's strategic risks which require regular oversight at senior level to ensure that, where necessary, action is taken to further mitigate risks outside the Council's indicative risk appetite.
- 3.2. Corporate Risk Management liaise with nominated Risk Owners, Service Managers and Directors to update each Principal Risk, and report bi-annually to Management Team and Audit and Risk Committee to facilitate their monitoring and oversight.
- 3.3. A full detailed update of the Principal Risk Register was undertaken during Summer 2025 to ensure it is up to date and reflects the current risk profile and risk appetite. The summary and heatmap is at Appendix 1 below.
- 3.4. The Risk Management process is a subjective management tool and is designed to assist the strategic direction, and operational running of the Council and ensure key issues are highlighted and resources allocated appropriately. It is essential to consider that:
 - Some risks may be heavily influenced by external factors outside the Council's control.
 - Where inherent risk is increasing, additional work may have been undertaken to maintain the same current risk level.
 - Risks are constantly changing.

4. Conclusion

- 4.1. The Principal Risk Summary and Risk Management Strategy 2025 is attached for Audit & Risk Committee to note.

List of appendices:

1. Principal Risk Summary
2. Risk Management Strategy 2025

Background papers: None

Corporate Implications

Legal/Constitutional: The Council has a legal duty to ensure that it has a sound system of internal control, which includes effective arrangements for the management of risk (Regulation 3 (Part 2) of the Audit and Accounts Regulations 2015). The risk management framework encourages risk owners to consider the potential legal and regulatory consequences, should a risk event occur.

Financial: The risk management framework encourages risk owners to consider the potential financial consequences, should a risk event occur.

Potential impact on climate change and the environment/ Contribution toward achieving a net zero carbon position by 2030: Reputational consequences set out within the risk management framework encourage risk owners to consider environmental aspects of their activities.

Personnel: The corporate risk management framework is being implemented within existing staff budgets.

Risk Management: Effective risk management is an essential part of good governance, providing assurance to internal and external stakeholders that the Council is well-managed. This report is intended to enable the Committee to fulfil its role in overseeing the effective operation and development of risk management at the Council.

Equality and Diversity: Equalities implications of Council activities are considered at initiative level.

Health and Safety: The risk management framework encourages risk owners to consider the potential safety, health and wellbeing implications for staff and/or service users, should a risk event occur.

Digital: Risks relating to cyber security are considered within the risk management framework

Other: None

Consultees: Management Team noted the Risk Management Report in August 2025

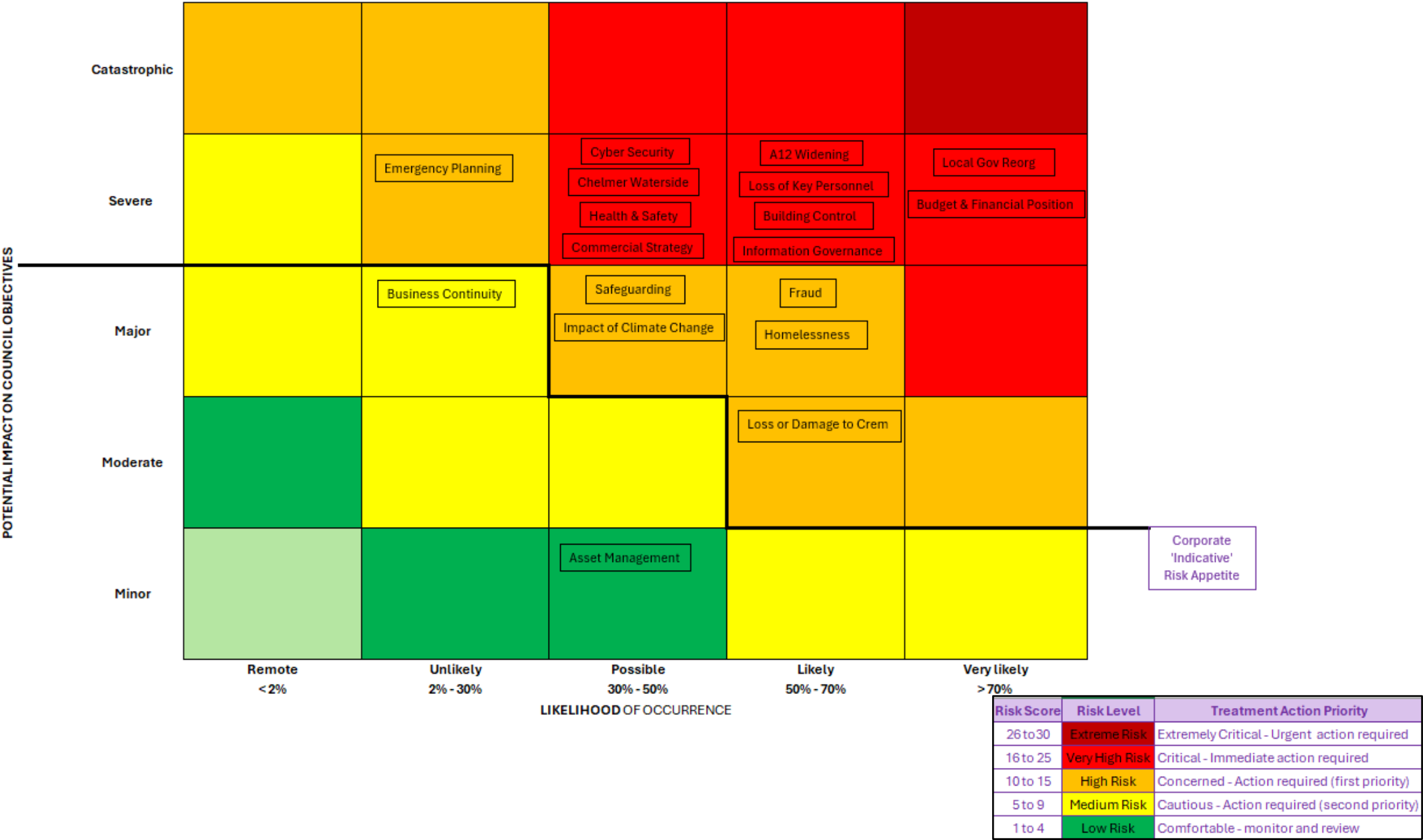
Relevant Policies and Strategies: None

Principal Risk Register

Ref	Risk Title	Our Plan Theme	Risk Owner	Current Risk Rating	Risk Score	Direction of Travel	Potential Risk Event
PRR 031	Local Government Reorganisation	All Themes	Nick Eveleigh	Very High	24	↔	Disruption to governance, service delivery, and financial stability during the transition to a new local government structure, may potentially lead to reduced service quality, staff uncertainty, and increased costs.
PRR 032	Budget and Financial Position	All Themes	Nick Eveleigh	Very High	24	↔	The Council's financial position may become unsustainable due to ongoing budgetary pressures, reduced income streams, and increasing service demands, potentially impacting the delivery of statutory and discretionary services.
PRR 037	Building Control	A greener and safer place	Paul Brookes	Very High	20	NEW	Failure to meet statutory duties may result in legal action, regulatory intervention, or complaints to the Ombudsman, exposing the authority to reputational and operational risks.
PRR 016	Information Governance	All Themes	Louise Goodwin	Very High	20	↑	A serious data breach may occur and/or other significant instance of non-compliance with data legislation, especially relating to data retention, leading to data loss, financial implications and/or reputational damage.
PRR 023	Succession Planning (Loss of Key Personnel)	All Themes	Nick Eveleigh	Very High	20	↔	Loss of key staff, especially due to LGR, may result in a significant loss of knowledge and experience which could seriously impact on service delivery.
PRR 036	A12 Widening	A fairer and more inclusive place	Paul Brookes	Very High	20	↔	Failure to secure funding may impact on delivery of key strategic sites in the Local Plan and increased costs.
PRR 014	Health & Safety	A greener and safer place	Keith Nicholson	Very High	16	↔	A serious health and safety incident may result in injury or death, trigger costly regulatory investigations, damage the Council's reputation, and negatively impact staff morale and service delivery.
PRR 001	Cyber Security	All Themes	Louise Goodwin	Very High	16	↔	A major IT failure or cyber incident may disrupt critical services, including statutory emergency response, and lead to data breaches, regulatory penalties, and financial losses.
PRR 012	Chelmer Waterside	A fairer and more inclusive place	Keith Nicholson	Very High	16	↔	Failure to deliver the Chelmer Waterside development as planned may result in financial and reputational loss, missed housing and funding opportunities, and strained relationships with key partners.
PRR 033	Commercial Strategy	A greener and safer place	Keith Nicholson	Very High	16	↔	Investment decisions driven by commercial strategy may expose the organisation to significant financial and reputational risks due to inadequate due diligence, excessive borrowing, poor diversification, weak governance, regulatory missteps, or external economic shocks.

Ref	Risk Title	Our Plan Theme	Risk Owner	Current Risk Rating	Risk Score	Direction of Travel	Potential Risk Event
PRR 006	Homelessness	All Themes	Paul Brookes	High	15	↔	Inability to provide suitable temporary accommodation may lead to legal breaches, financial penalties, reputational damage, and increased pressure on staff and services.
PRR 005	Fraud	All Themes	Nick Eveleigh	High	15	↔	Fraudulent activity may lead to significant financial loss, misallocation of limited resources, and reputational damage due to perceived inaction or poor oversight.
PRR 004	Emergency Planning	A greener and safer place	Keith Nicholson	High	12	↔	Failure to respond effectively to incidents may result in avoidable harm, extended disruption, reputational damage, and increased financial costs due to reactive management.
PRR 015	Safeguarding	A greener and safer place	Nick Eveleigh	High	12	↑	Failure in safeguarding responsibilities may result in serious harm to individuals, loss of public trust, and negative impacts on staff morale and the Council's reputation.
PRR 025	Impact of Climate Change	A greener and safer place	Keith Nicholson	High	12	↔	Inadequate understanding of the potential impact of climate change may lead to failure in mitigating the associated risks.
PRR 034	Loss or damage to the crematorium	A greener and safer place	Keith Nicholson	High	10	↔	The Council may be unable to meet its obligations as the burial and cremation authority for the area.
PRR 003	Business Continuity	All Themes	Keith Nicholson	Medium	9	↓	Prolonged disruption to core services may cause hardship for residents, damage the Council's reputation, and hinder its statutory emergency response obligations under the Civil Contingencies Act.
PRR 024	Asset management funding and replacement	A greener and safer place	Keith Nicholson	Low	4	↓	Inadequate planning and investment in key assets may impact the ability to provide services or degrade income earning capacity.

Principal Risk Register Heat Map



Impact Scoring Criteria

Score	Level	Financial	Operations	People	Reputation	Legal and regulatory	Major Projects	Equivalent Internal Audit Priorities
5	Catastrophic	Financial loss (>£20 million*)	Permanent cessation of core activities	Multiple fatalities	Future viability of the organisation threatened	External control of the Council assumed	Repeated failure of high-profile projects. All discretionary funding withdrawn	Critical Priority (Emerging Findings Note)
4	Severe	Financial loss (>£1 million*)	Extended disruption of core activities in excess of normal recovery timescales, with adverse impact on the wider community	Life-threatening or multiple serious injuries (to staff or service users) or prolonged workplace stress. Severe impact on morale/service performance. Mass strike actions etc.	Critical impact on the reputation or brand of the organisation. Intense political and media scrutiny i.e. national front-page headlines, TV	Possible criminal, or high-profile civil action against the Council, Members or officers. Statutory intervention triggered with impact across the whole Council. Critical breach in laws and regulations that could result in severe fines or consequences	Politically unacceptable increase on project budget/cost for high-profile project. Elected Members are required to intervene	
3	Major	Major financial loss. Service budgets exceeded (£200k to £1 million*)	Disruption to core activities. Some services compromised. Management Team action required to overcome medium-term difficulties	Serious injuries or stressful experience (for staff member or service user) requiring medical attention/ many workdays lost. Major impact on morale/performance	Major impact on the reputation or brand of the organisation. Unfavourable media coverage. Noticeable impact on public opinion	Major breach in laws and regulations resulting in major fines and consequences. Scrutiny required by external agencies	Key targets missed. Major increase on project budget/ cost. Major reduction to project scope or quality	High Priority recommendations (Limited to No Assurance)
2	Moderate	Moderate financial loss. Handled within the team (£50k to £200k*)	Significant short-term disruption of non-core activities. Standing Orders occasionally not complied with, or services do not fully meet needs. Service Manager action will be required	Injuries (to staff member or service user) or stress levels requiring some medical treatment, potentially some workdays lost. Some impact on morale/performance	Moderate impact on the reputation or brand of the organisation. Limited unfavourable media coverage	Moderate breach in laws and regulations resulting in fines and consequences. Scrutiny required by internal committees or internal audit to prevent escalation	Delays may impact project scope or quality (or overall project must be re-scheduled). Small increase on project budget/cost. Handled within the project team	Medium Priority recommendations (Moderate to Limited Assurance)
1	Minor	Minor financial loss (< £50k*)	Minor errors in systems/operations or processes requiring Service Manager or Team Leader action. Little or no impact on service users	Minor injuries or stress with no workdays lost or minimal medical treatment. No impact on staff morale	Minor impact on the reputation of the organisation	Minor breach in laws and regulations with limited consequences	Minor delay without impact on overall schedule. Minimal effect on project budget/cost or quality	Low Priority recommendations (Substantial to Moderate Assurance)

Risk Management Strategy 2025-26

Vision: To embed a systematic approach to the identification, assessment, and mitigation of potential threats, empowering Chelmsford City Council to create a fairer, greener and more connected community through the application of the following risk management principles:

Proportionate <i>Measures to identify, treat, monitor and report on risks should be proportionate to the risks faced by the Council.</i>	Aligned <i>Risk management cannot take place in isolation and must be aligned to existing business activities (including strategic planning and performance) to be effective.</i>	Comprehensive <i>Arrangements should capture the broad spectrum of risks faced by the Council, but be flexible enough to do this efficiently, without leading to 'risk overkill'</i>
Embedded <i>Arrangements should be clearly communicated, integrated into existing management structures and activities, and enforced.</i>		Dynamic <i>Risk information must be current to enable timely and effective decision-making</i>

Strategic Risk Management Objectives

Corporate Risk Management

- Develop the Dynamics Risk Management System to automate risk reporting as far as possible and facilitate self-service for risk owners, where appropriate.
- Ensure all existing (and any new) subsidiary risk registers are made available to risk owners through Dynamics Risk Management System.
- Through Dynamics Risk Management System, develop the use of 'target risk' to help refine the Council's indicative risk appetite and improve consistency in the way that risks are treated.
- Enable improved risk identification and management through liaison with the Council's insurance programme.

Compliance

- Rollout the Dynamics Risk Management System compliance function, establishing real-time reporting to Service Managers and Directors on outstanding Health & Safety and Fire Risk actions and report bi-annually to Management Team by the Specialist Risk Teams (i.e. Health and Safety and Building Services).

Training and Awareness

- Review and develop the Council's risk protocols and staff training and awareness on the risk framework.
- Roll out further training and guidance to Service Managers and staff on technical operations of Dynamics Risk Management System.
- Champion using Dynamics Risk Management System to enable services to identify, analyse and treat operational risks in a practical and efficient way.



Chelmsford City Council Audit and Risk Committee

17th September 2025

Annual Health and Safety Report 2024/25

Report by:

Director of Public Places

Officer Contact:

Lewis Mould, Public Health and Protection Services Manager, 01245 606439,
lewis.mould@chelmsford.gov.uk

Purpose

To provide members with the 2024/25 annual health and safety update.

Recommendations

That members note the report.

1. Introduction

- 1.1 Chelmsford City Council is committed to high standards of health and safety management within a sensible risk management framework. This means having in place effective management arrangements within directorates to ensure the wellbeing of our staff, service users, members of the public and others affected by our organisation and services.
- 1.2 This report summarises the activity undertaken within corporate health and safety in the last 12 months, an analysis of accidents that have occurred, and a summary of audit activity undertaken.

- 1.3 The Council uses external health and safety advisors to assist in managing the Council's high-risk services. Peninsula have been in place since 2020, providing advice and carrying out audits across the higher-risk services such as Leisure, Waste Collection/Street Care and Parks, thereby providing an external check on the Council's approach to and implementation of its health and safety systems.
- 1.4 The Council has a Health, Safety & Welfare Forum that has senior level representation from across the organisation. The aim of the Health, Safety and Welfare Forum is to promote co-operation in instigating, developing and carrying out measures to ensure and improve the health, safety and welfare at work of all employees. The Forum have been consulted on this report.

2. Training

- 2.1 The core training courses of Managing Safely, Working Safely and Peninsulas Health & Safety Awareness continue to underpin the health and safety training provided by the Council, with additional specific training provided depending on the job role. The majority of roles within the Council are required to carry out one of these three training courses: Managing Safety for managers and supervisors, Working Safely for frontline operatives and Health & Safety Awareness for low-risk operatives. The Managing and Working Safely courses are accredited by the Institute of Occupational Health & Safety (IOSH).
- 2.2 Service areas are being encouraged to coordinate corporate wide training through HR to help ensure a central record is maintained and refresher training can be carried out in an effective and efficient manner.
- 2.3 The Council will continue to fund the necessary health & safety training to ensure employees comply with the relevant health & safety legislation.

Table 1 – Employee Training Carried Out

Course	No. of Employees Trained						
	18/19	19/20	20/21	21/22	22/23	23/24	24/25
IOSH Managing Safety	17	16	13	66	30	12	18
IOSH Managing Safety Refresher	12	7	20	36	10	11	41
IOSH Working Safely	15	29	40	149	172	67	113
IOSH Working Safely Refresher	16						
IOSH Executive Directors & Chief Executive					6	0	1
H&S Awareness e-Learning					83	400	187
Manual Handling Train the Trainer	12	16	7	1	13	8	6
Manual Handling	212	142	122	211	239	251	244
Manual Handling - eLearning							87
Emergency First Aid	24	18	0	22	37	43	36
First Aid at Work	23	0	0	27	30	21	30
First Aid at Work Re-Qualification	19	14	26	13	21	18	23
Fire Marshall/ Fire Warden	62	20	37	59	79	29	68
E-learning Fire Safety						26	49

Paediatric First Aid	0	0	2	7	1	10	18
Emergency Paediatric						5	
Activity First Aid (Outdoor)						3	3
Risk Assessment	44	6	35	1	7	8	26
Stress Management	26	15	0	0	0	0	
Legionella Training for Operatives	12	12	10	7	25	13	10
Legionella Training for Supervisors	16	4	4	3	25	9	10
Legionella Awareness – eLearning					6	19	15
Asbestos Awareness - eLearning						51	33
VDU Assessor Training	13	0	0	0	0		
Display Screen Equipment e-Learning					339	70	75
Conflict Resolution & Lone Working	57	25	19	23	19	27	0
Conflict Resolution							38
Lone Working - eLearning							11
Management of Contractors	0	0	50	40	26	5	
Management of Contractors – eLearning						113	28
Evac Chair	29	21	0	28	19	40	113
Evac Chair – Train the Trainer						3	3
Evac Chair Refresher	7	3	0	0	0		
Mental Health Awareness for Managers	24	32	0	0	0	0	1
Mental Health First Aid Training							8
Total Trained	640	384	385	665	1187	1262	1295

2.4 Employees whose training is overdue:

- IOSH Managing Safely – 2 not started (issued April and May 25), 3 in progress.
- IOSH Managing Safely Refresher – 3 failed (all resubmitting), 22 not started, albeit 17 issued May 25.
- IOSH Working Safely – 49 not started, albeit 41 issued May 25 (new starters and renewals). 5 in progress.
- Manual Handling (inc. Casuals) –
 - CE – 1
 - PHPS – 2
 - Car Parks - 1
 - Museum - 9
 - Theatre – 8
 - Community Sport & Wellbeing – 3
 - Parks – 9
 - Hylands – 5
 - Leisure – 16 (full) 30 (e-learning)
- Fire Warden Refresher Training – 44 required. 24 invited to next course. 20 (CSAC) specific courses to be arranged.

- EVAC Chair Training – 81 required.
 - 2 Museum.
 - 2 Building Services.
 - 72 Sports Centres.
 - 5 Hylands.

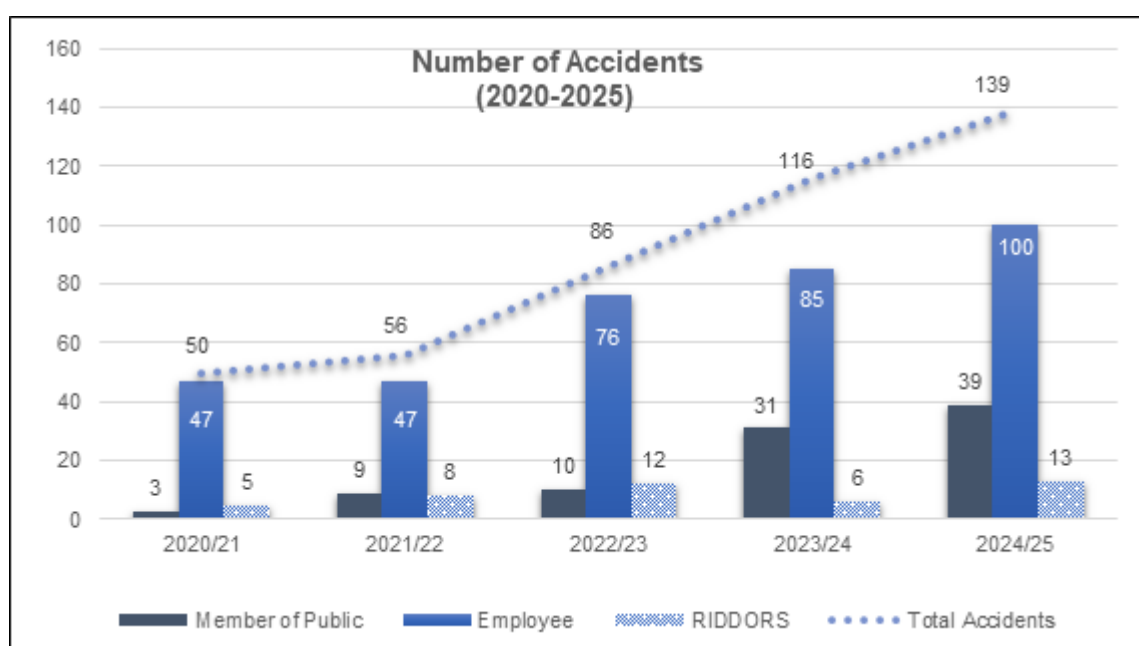
Work has been undertaken this year to improve the number of people undertaking EVAC Chair and Manual Handling training. There has been an increase in the number of train the trainer courses, increasing the number of trainers available.

This information is constantly changing throughout the year and this provides a snapshot soon after the end of 24/25.

3. Accidents

- 3.1 Accidents continue to be a key indicator of the effectiveness of the Council's health and safety management system. The accident rate has increased in comparison to post pandemic levels, and there has been an increase in RIDDOR reportable accidents.
- 3.2 Figure 1 shows the total number of accidents over the last 5 years involving employees and members of the public, and the number of those accidents that were RIDDOR reportable. RIDDOR reportable accidents are the more serious accidents or those resulting in more than 7 days off work.
- 3.3 When compared to the previous year, there has been an increase in the number of accidents to employees in 2024/25. RIDDOR reportable accidents have also increased by 7. The accident trends are discussed in more detail below.

Figure 1 – Total Number of Accidents



- 3.4 There were thirteen RIDDOR reportable accidents in 2024/25 which is seven more than the previous year. The number of RIDDOR accidents within waste collection services is seven, which has increased by two compared with 2023/24.
- 3.5 Out of the thirteen RIDDORS, nine were reportable due to the accident resulting in 7+ days off work and four were a reportable injuries (broken elbow, fractured scapula, 2 fractured ankles).
- 3.6 Figure 2 shows the incidence of employee accidents over the last 5 years. The majority of accidents occur in the Public Places Directorate which is expected due to the number of employees within the Directorate and the high-risk operational services provided.

Figure 2 – Employee Accidents

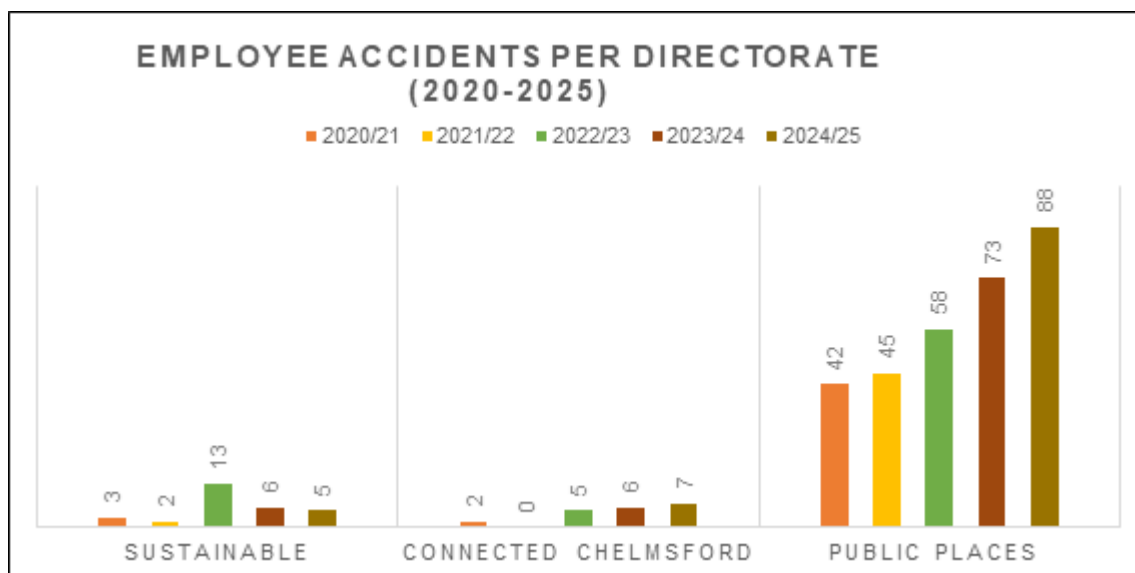


Table 2 - Employee Accident Categories for 2024/25.

Category	% of Accidents					2024/25 Number of Accidents
	2020/21	2021/22	2022/23	2023/24	2024/25	
Slips/Trips	32	23	22	22	29	29
Impact	23	51	30	35	25	25
Manual Handling	21	13	6	12	12	12
Sharp Objects	11	6	3	13	19	19
Falls from Height	0	0	2	0	2	2
Needle Stick		2	0	1	1	1
Acts of Violence	6	4	5	5	5	5
Road Traffic Accident (Employee Injured)	0	0	4	4	2	2

Other	4	0	7	8	5	5
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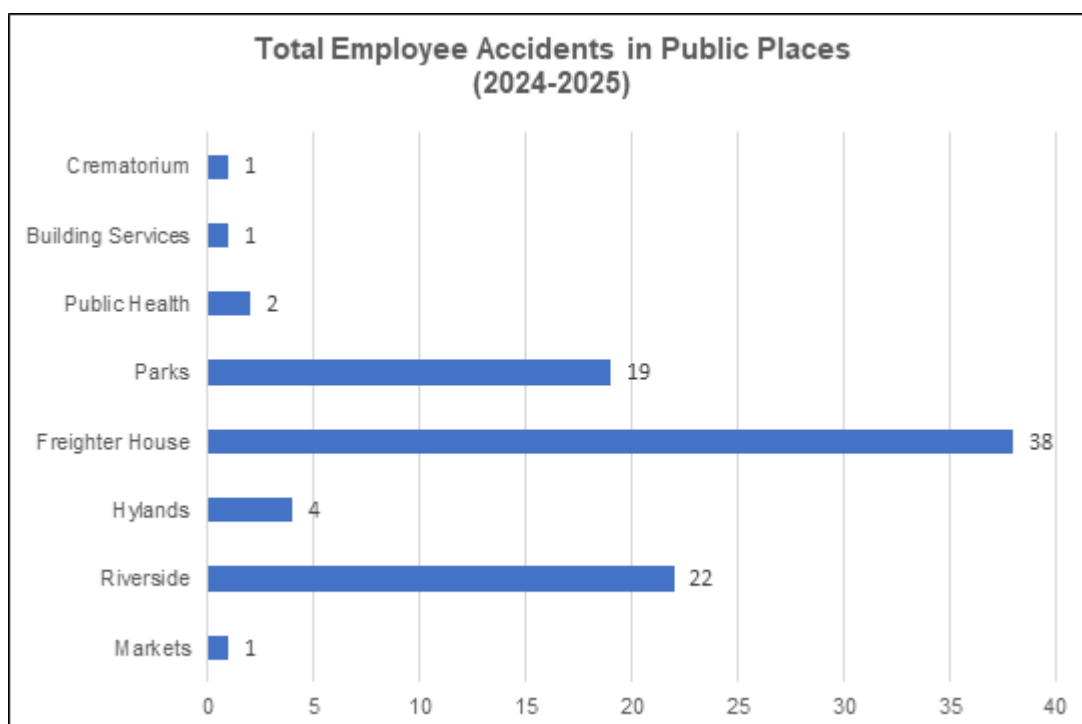
3.7 Due to the relatively small number of accidents, it is difficult to determine any specific trends with regards to accident causation. Slips/Trips and Impact continue to be the major causes of injury. Manual handling injuries and sharp objects have remained the same, but the number of injuries is low given the high-risk manual handling activities that occur across the Council. The number of acts of violence has not increased in 2024/25. Of those reported, two were animal bites, two were physical assaults (one resulting in lost time) and one was an act of intimidation. This will continue to be closely monitored to see if additional safeguards need to be put in place. All other areas have remained at similar levels, when compared to last year's figures.

3.8 Of the 13 Employee RIDDORS:

- 1 was an act of violence
- 8 were slip/trip injuries.
- 4 were manual handling injuries.

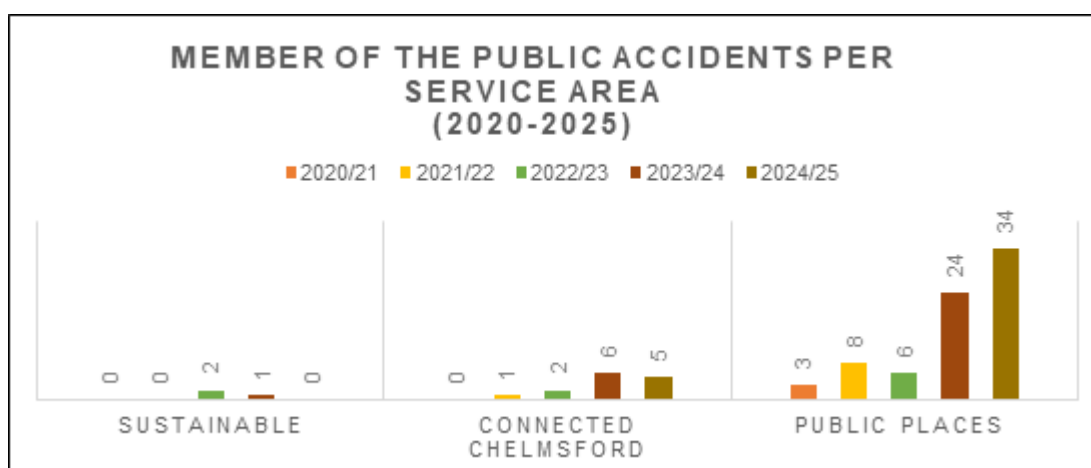
3.9 Figure 3 breaks down the accidents in Public Places to the respective service areas. As expected, the highest number of accidents occurred in services based at Freighter House, although the number of accidents is low considering the size and frequency of waste collection and street cleansing activities that take place. In 2024/25 the number of accidents for employees based at Freighter House was one more than the previous year. The figures also show an increase in reporting at Riverside and Parks. Accident rates for other services within Public Places remain low.

Figure 3 – Breakdown of Accidents in Public Places Directorate



- 3.10 Accidents to members of the public are shown in Figure 4 below. There has been an increase in accidents from 31 in 23/24 to 39 in 24/25. Of the 39, 13 of the accidents occurred at holiday clubs run by CSAW, 8 at Riverside, 6 at CSAC and 5 at the Theatre. Due to the age demographic and nature of the activities being undertaken in these areas, the level of accidents is not thought to be excessive.

Figure 4 – Accidents to Members of the Public



4. Performance Indicators

- 4.1. Table 3 gives details regarding the performance indicators. As discussed above the number of accidents to employees and members of the public have increased when compared to last year's figures. Accidents continue to be reported across a wide section of the council's services, which shows continued compliance with the accident reporting procedure.

With regards to investigations:

- Proactive noise monitoring was undertaken by a specialist at Riverside, CSAC and Theatre to determine whether the noise levels were at an acceptable level for employees. Where issues were found, mitigating measures were put in place in line with the recommendations from the noise assessment, to ensure that the council is in compliance with the Noise at Work Regulations.
- Dust monitoring was undertaken by a specialist at the Stables in Hylands. This was due to concerns raised by a resident artist who believed that silica dust was being released from pottery activities in an adjoining unit. The monitoring showed that there were no concerns relating to silica dust.

Table 3 – Performance Indicators

Performance Indicator	2020/21	2021/22	2022/23	2023/24	2024/25
Total Number of Accidents (Employees)	47	47	76	85	100
Total Number of Accidents (Public)	3	9	10	31	39
Notifiable Employee Accidents (RIDDOR)	5	8	12	6	13
Number of lost time accidents	6	20	19	30	20
Fatal Accidents	0	0	0	0	0
Number of investigations carried out*	1	0	0	0	4
Audit investigations as per audit schedule**	55%	70%	50%	100%	100%
H&S Policies Reviewed	100%	100%	100%	100%	100%
Dangerous occurrences	0	0	0	0	0

* This performance indicator relates to investigations carried out by Corporate Health & Safety, and this does not include investigations carried out by the service.

** Low risk audits no longer form part of the auditing schedule. Only high-risk audits undertaken.

5. Audits

5.1 The following audits were undertaken by Peninsula (external auditors) during 2024/25:

Service	Date of Audit
South Woodham Ferrers Leisure Centre	04/06/24
Crematorium/Parks	11/07/24
Museum Store/Facilities - Bancrofts Road	10/09/24
Parking Services	26/11/24
FH – Love Your Chelmsford	02/12/24
Public Health	11/03/25

Actions from Audits

5.2 The following shows the number of actions arising from the Peninsula audits:

Service	Number of Actions			Number of Actions Completed	Number of Actions Outstanding	
	Total	Medium Risk	High Risk		Medium Risk	High Risk
South Woodham Ferrers Leisure Centre	18	10	8	18	0	0
Crematorium/Parks	21	16	5	18	3	0
Museum Store/Facilities - Bancrofts Road	23	18	5	18	3	2
Parking Services	8	7	1	8	0	0
FH – Love Your Chelmsford	7	-	-	7	-	-
Public Health – Housing Standards	12	-	-	5	-	-
Public Health – Community Protection	4	-	-	0	-	-
Total	93	51	19	74	6	2

(No reporting system in place so records kept on a spreadsheet which is updated manually. Records taken from 29/07/25))

5.3 Outstanding High-Risk Actions

Service	Action	Service Area Comments
Bancrofts Road	Fire evacuation drills. It was unclear if fire drills have been carried out.	Minimal occupation of site so fire drills not able to be carried out. This is under review for implementation in coming months.
	Fire doors. One fire door had a gap over 5mm present, and another did not close entirely.	Fire door survey booked for September 2025. Some delays due to staff changes.

Proposed Audits 2025/2026

Currently the following Peninsula Audits have been undertaken or are proposed:

Service	Date of Audit
Theatre	May 25
Building Services	June 25
Chelmsford Sports & Athletic Centre	Sept 25
Parks (Waterhouse Lane)	Oct 25
Riverside	Nov 25
Freighter House (Collections)	Dec 25
Hylands	Jan 26
Museum of Chelmsford	Feb 26

6. Conclusion

- 6.1 The safety management systems at Chelmsford City Council continue to be effective in ensuring the safety of employees and members of the public. Where weaknesses have been identified, remedial action has been taken to ensure more robust measures are implemented. Overall, the accident levels remain very low for an organisation delivering a wide range of services daily to 181,000+ residents and visitors to Chelmsford.

List of appendices:

None

Background papers:

None

Corporate Implications

Legal/Constitutional: None

Financial: None

Potential impact on climate change and the environment: None

Contribution toward achieving a net zero carbon position by 2030: None

Personnel: None

Risk Management: An effective health and safety management system has a positive impact on risk management

Equality and Diversity: None

Health and Safety: An annual report enables Management Team and Members to have oversight of the Council's health and safety responsibilities

Digital: None

Other: None

Consultees:

Management Team

Relevant Policies and Strategies:

None

Chelmsford City Council Audit and Risk Committee

17th September 2025

Audit and Risk Committee Work Programme

Report by:

Audit Services Manager

Officer Contact:

Elizabeth Brooks, Audit Services Manager elizabeth.brooks@chelmsford.gov.uk

Purpose

This report updates the rolling programme of work for this Committee.

Recommendations

That the rolling programme of work for the Committee is agreed.

1. Introduction

- 1.1. The Audit & Risk Committee works to a standard programme of work to ensure that their work is spread evenly across meetings, as far as possible, and to ensure that core reports are produced at the appropriate time within the Council's reporting timetable.

2. Rolling Programme of Work

- 2.1. Many of the reports submitted to this Committee are presented on a cyclical basis and can be timetabled for particular meetings. However, from time to time additional reports are requested which are presented to future meetings. The proposed rolling programme of work for this Committee for the next series of meetings is shown below.

26th November 2025

Agenda Item	Report Owner
External Audit – VFM Report	Accountancy Services Manager (S151)
Internal Audit Interim Report	Audit Services Manager
Counter Fraud Strategy 2026	Audit Services Manager
Audit & Risk Committee Work Programme	Audit Services Manager

10th December 2025 - Cancelled

28th January 2026

Agenda Item	Report Owner
External Audit – Accounts Sign Off	Accountancy Services Manager (S151)
Procurement Update	Procurement Manager
Audit & Risk Committee Work Programme	Audit Services Manager

18th March 2026

Agenda Item	Report Owner
External Audit Update	Accountancy Services Manager (S151)
Internal Audit Plan 2026 + Internal Audit Charter	Audit Services Manager
Risk Management Report	Audit Services Manager
Accounting Policies	Accountancy Services Manager (S151)
Audit & Risk Committee Work Programme	Audit Services Manager

TBC June 2026

(Joint meeting with Governance Committee)

Agenda Item	Report Owner
Review of the Local Code of Corporate Governance	Legal and Democratic Services Manager
Annual Governance Statement	Legal and Democratic Services Manager

(Audit & Risk Committee)

Agenda Item	Report Owner
External Audit Update	Accountancy Services Manager (S151)
Revenue (Outturn)	Accountancy Services Manager (S151)
Capital Monitoring (Outturn)	
Internal Audit Annual Report	Audit Services Manager
Counter Fraud Annual Report	
Audit & Risk Committee Annual Report & Review of TOR	
Audit & Risk Committee Work Programme	Audit Services Manager

TBC September 2026

Agenda Item	Report Owner
External Audit Update	Accountancy Services Manager (S151)
Health and Safety Annual Report	Public Health and Protection Services Manager
Internal Audit Plan to March 2026	Audit Services Manager
Risk Management Report	Audit Services Manager
Audit & Risk Committee Work Programme	Audit Services Manager

List of appendices: None

Background papers: None

Corporate Implications

Legal/Constitutional: The Council has a duty to maintain an effective internal provision to evaluate the effectiveness of its risk management, control and governance processes, taking into account public sector internal auditing standards or guidance (Regulation 5 (Part 1) of the Accounts and Audit Regulations 2015). Numerous frameworks also emphasise the importance of the audit committee, including:

- Delivering Good Governance in Local Government
- Global Internal Audit Standards
- the Code of Practice on Managing the Risk of Fraud and Corruption

Financial: None

Potential impact on climate change and the environment: None

Contribution toward achieving a net zero carbon position by 2030: None

Personnel: None

Risk Management: The role of the Audit & Risk Committee in relation to risk management covers: assurance over the governance of risk, including leadership, integration of risk management into wider governance arrangements and the top level ownership and

accountability for risks; keeping up to date with the risk profile and the effectiveness of risk management actions and; monitoring the effectiveness of risk management arrangements and supporting the development and embedding of good practice in risk management.

Equality and Diversity: None

Health and Safety: None

Digital: None

Other: None

Consultees: None

Relevant Policies and Strategies: None
