

To: Councillor Brock (Chair)
Councillors Terry, Barnett-Ward, Emberson,
Ennis, Gittings, Hoskin, Leng, McEwan,
Mitchell, Robinson, Rowland, Thompson
and White

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30 June 2023

Your contact is: **Simon Hill - Committee Services (simon.hill@reading.gov.uk)**

NOTICE OF MEETING - POLICY COMMITTEE 10 JULY 2023

A meeting of the Policy Committee will be held on Monday, 10 July 2023 at 6.30 pm in the Council Chamber, Civic Offices, Reading, RG1 2LU. The Agenda for the meeting is set out below.

1. **CHAIR'S ANNOUNCEMENTS**
2. **DECLARATIONS OF INTEREST**
3. **MINUTES** **5 - 12**
4. **PETITIONS AND QUESTIONS**

To receive any petitions from the public and any questions from the public and Councillors.
5. **HOUSEHOLD SUPPORT FUND 4** **BOROUGH WIDE 13 - 24**

This report sets out the proposed use of the Household Support Fund grant to provide cost of living support to households in the most need.
6. **CIPFA PRACTICAL GUIDANCE FOR LOCAL AUTHORITIES ON AUDIT COMMITTEES** **BOROUGH WIDE 25 - 46**

This report sets out the outcome of a self-assessment against the 'CIPFA Audit Committees: Practical Guidance for Local Authorities and Police' and recommends revised Terms of Reference for the Audit & Governance Committee.
7. **FOOD SERVICE PLAN 2023-24** **BOROUGH WIDE 47 - 166**

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This report sets out the updated Food Service Plan for the period 2023-2024, a statutory requirement under the Food Law Code of Practice set by the Food Standards Agency (FSA).

8. ELECTIONS 2023 - VOTER IDENTIFICATION AND OTHER ISSUES **BOROUGH WIDE** **167 - 172**

This report provides the Committee with an update on the 2023 Local Elections and the changes introduced by the Elections Act 2022, including the requirement for electors to produce photographic identification in order to vote.

9. 2022/23 QUARTER 4 PERFORMANCE REPORT **BOROUGH WIDE** **173 - 244**

This report sets out the provisional revenue and capital outturn positions for the Council's General Fund and Housing Revenue Account (HRA) for 2022/23 as well as performance against the measures of success published in the Council's Corporate Plan.

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Present: Councillor Brock (Chair);

Councillors Barnett-Ward, Emberson, Ennis, Hoskin, Leng,
McEwan, Mitchell, Robinson, Rowland, Thompson and White

Apologies: Councillors Terry and Gittings

2. CHAIR'S ANNOUNCEMENTS

The Chair made the following announcement:

'We have all been deeply saddened to hear that Councillor Colette Dennis, member for Norcot Ward, passed away suddenly and unexpectedly on Friday the 9th of June. Colette was a good friend to very many of us and I know that losing her will be felt across the Chamber and most especially in the Labour Group. She was a wonderful Ward Councillor, an active member of the community in Norcot especially around Dee Park and the Dee Caf Community café, at the Norcot Mission Church and its Lunch Club and at the Oak Tree Care Home. As for her work on the Council, she always displayed compassion, commitment and insatiable spirit to stand up for her residents and challenge any inequities she saw. She showed a particular interest in the Council's adult social care and children's services and had just been appointed chair of the older People's Working Group.

I'm very proud of the contribution Colette made to her community and to our Council and we will miss her very greatly. My thoughts and I'm sure the thoughts of everyone around the Council are with her husband, Councillor Glenn Dennis, and with all Colette's family and friends.'

The Committee and others in attendance stood for a minute's silence.

3. MINUTES

The Minutes of the meetings held on 3 April 2023 and 24 May 2023 were agreed as a correct record and signed by the Chair.

4. CIVIL ENFORCEMENT CONTRACT (PARKING SERVICES) - DELEGATED AUTHORITY TO SPEND AND AWARD CONTRACT

The Executive Director of Economic Growth & Neighbourhood Services submitted a report providing information on the ongoing procurement process for the Civil Enforcement (Parking) Contract(s) to be implemented in November 2023 and seeking authority to enter into a contract(s).

The report explained that the Council currently outsourced the provision of its Civil Enforcement Services through one contract. This had been running for ten years and would expire on 31 October 2023. The proposal would be to award new contracts from 1 November 2023 for a period of four years with the option of extending the contract for a

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further 3+3 years, subject to performance. Some functions were proposed to move in-house, primarily delivery of customer services in relation to informal PCN challenges to align with the Council's aims and values in relation to the customer journey.

To allow for flexibility of the delivery of services the contracts would be split over three lots comprising:

- Lot 1: Civil Enforcement Services
- Lot 2: Civil Parking Enforcement PCN and Permit Software and Associated Hardware
- Lot 3: Combined bid

Resolved –

- (1) That the recommended procurement route and process as described in the associated report be noted;**
- (2) That the Interim Executive Director for Economic Growth and Neighbourhood Services, in consultation with the Leader of the Council, the Director of Finance and the Assistant Director of Legal and Democratic Services, be authorised to finalise the terms of and enter into a contract(s) to provide civil enforcement services with the most economically advantageous tenderer(s).**

5. THE LODGE AT COLEY PRE-SCHOOL

The Executive Director of Children's Services submitted a report seeking delegated authority to go to external consultation on the proposal for the closure of The Lodge at Coley Pre-School nursery.

The report explained that The Lodge was a small 16 place nursery for the use of 2 year-old children only, operating from one room on the grounds of St. Mary's and All Saints Primary School. A viability analysis of The Lodge had been undertaken following an inadequate Ofsted inspection in June 2022. After the inspection The Lodge had received a programme of improvement which included senior staff being seconded to The Lodge to provide additional support. When re-inspected in December 2022 the facility had been graded good in all areas. However, the Lodge had never run at full capacity and the viability analysis results showed that significant risks remained around both the quality of day-care and financial viability of the service that would require considerable additional ongoing investment.

The report stated there was a small risk in closing the unit due to the changes around places for 2-year-olds announced by the government earlier in the year. However, four additional childcare providers would be in place later during the year and would offer 300 additional places across Reading.

The report also sought delegated authority for discussions to take place with the headteacher of St Mary and All Saints Primary School for the possible use of the facility as

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an additional provision for children with SEND. Based on the outcomes of the consultation and discussion with St Mary and All Saints Primary headteacher, delegated authority was also sought to decide on the future of the facility.

Resolved –

- (1) That the current service model for The Lodge at Coley pre-school nursery presented quality and financial risks be agreed and that the Executive Director of Children’s Services be authorised to commence consultation on the impact of the potential closure of The Lodge at Coley;
- (2) That the Executive Director of Children’s Services be authorised to discuss with the headteacher of St Mary’s and All Saints Primary school regarding the possible use of the provision for a SEND facility with the school;
- (3) That the Executive Director of Children’s Services in consultation with the Lead Councillor for Children’s Services be authorised to decide on the future of the facility based on the outcomes of (1) and (2) above.

6. OUTSIDE BODY APPOINTMENTS

The Assistant Director of Legal and Democratic Services submitted a report asking the Committee to make appointments or nominations to outside bodies for the Municipal Year 2023/24, or longer where required. A schedule of outside body appointments showing the Group Leaders’ recommendations was tabled at the meeting.

Resolved –

- (1) That appointments or nominations to the listed outside bodies be made as follows:

Organisation	Representative	Role	Term of Office	End
Age UK Berkshire - Board observer			1 year	
Association of Public Service Excellence (APSE)	Councillor Jason Brock		1 year	
Association of Public Service Excellence (APSE)	Councillor Paul Gittings		1 year	
AWE Aldermaston – Local Liaison Committee	Councillor Clarence Mitchell		1 year	
AWE Aldermaston – Local Liaison Committee	Councillor Mark Keeping		1 year	
Berkshire Healthcare Foundation Trust – Governor	Councillor Deborah Edwards		3 years	

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Berkshire Local Transport Body	Councillor John Ennis	Deputy	1 year	
Berkshire Local Transport Body	Councillor Jason Brock		1 year	
Berkshire Maestros	Councillor Paul Gittings		1 year	
Berkshire Pension Fund Panel	Councillor Glenn Dennis		1 year	
Parking and Traffic Regulations Outside London Adjudication Joint Committee	Councillor Will Cross	Deputy	1 year	
Parking and Traffic Regulations Outside London Adjudication Joint Committee	Councillor John Ennis		1 year	
Caversham Park Village Association	Councillor Stephen Goss		1 year	
Citizens' Advice Reading Trustee Board			1 year	
Citizens' Advice Reading Trustee Board	Councillor Wendy Griffith		1 year	
Community Alcohol Partnerships CIC	Public Protection Manager	Officer		
Conservation Area Advisory Committee			1 year	
Conservation Area Advisory Committee	Councillor Wendy Griffith		1 year	
Flexible Home Improvements Limited	James Crosbie	Officer		
Hexham Community Association Management Committee	Councillor Will Cross		1 year	
Homes for Reading Limited	Councillor Jan Gavin		3 years	
Homes for Reading Limited	Councillor Jo Lovelock		3 years	
Homes for Reading Limited	Councillor Liam Challenger		3 years	
Homes for Reading Limited	Councillor Raj Singh		3 years	
Homes for Reading Limited		Officer	3 years	
Improvement and Efficiency Social Enterprise	Councillor Jason Brock		1 year	
Improvement and Efficiency Social Enterprise	Councillor Liz Terry		1 year	
Kenavon Drive	Councillor Richard		1 year	

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Management Company	Davies			
Kennet and Avon Canal Trust	Councillor Paul Gittings		1 year	
Kennet Day Nursery Association	Councillor Ruth McEwan		1 year	
Launchpad Reading	Councillor Rachel Eden		1 year	
LGA Unitary Councils Network	Councillor Jason Brock	Substitute		
LGA Unitary Councils Network	Councillor Liz Terry			
Local Enterprise Partnership	Councillor Jason Brock		1 year	
Local Government Association (Conference)	Councillor Jason Brock		1 year	
Local Government Association (Conference)	Councillor Tony Page		1 year	
Local Government Information Unit Management Committee	Councillor Alice Mpofu-Coles	Deputy	1 year	
Local Government Information Unit Management Committee	Councillor Rachel Eden		1 year	
Mapledurham Playing Fields Management Committee	Councillor Isobel Ballsdon		3 years	
Mapledurham Playing Fields Management Committee	Councillor Sam Juthani		3 years	
Mid and West Berkshire Local Access Forum	Councillor Adele Barnett-Ward		1 year	
Pakistani Community Association	Councillor Wendy Griffith		1 year	
Queen Victoria Institute	Councillor Karen Rowland		4 years	
Queen Victoria Institute			4 years	
Readibus Board of Directors	Councillor Andrew Hornsby-Smith		1 year	
Readibus Board of Directors	Councillor Jacopo Lanzoni		1 year	
Readibus Board of Directors	Councillor Mohammed Ayub		1 year	
Readibus Board of Directors			1 year	
Readibus Board of Directors			1 year	
Reading Climate Change Partnership	Ben Burfoot	Officer	1 year	

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Reading Climate Change Partnership	Chris Maddocks	Officer	1 year	
Reading Climate Change Partnership	Councillor John Ennis		1 year	
Reading College Business Advisory Board	Councillor Jason Brock		1 year	
Reading Deaf Centre	Councillor Will Cross		1 year	
Reading Hampshire Property Partnership	Mike Graham	Officer	1 year	
Reading In Bloom Committee	Councillor Karen Rowland		1 year	
Reading Sports Aid Fund	Councillor Adele Barnett-Ward		3 years	
Reading Sports Aid Fund	Councillor Tony Page	Mayor	Mayoral term	
Reading Voluntary Action	Councillor Adele Barnett-Ward		1 year	
REDA - Reading's Economy and Destination Agency	Councillor Jason Brock		1 year	
REDA - Reading's Economy and Destination Agency		Officer	1 year	
Royal Berkshire NHS Foundation Trust - Governor	Councillor Deborah Edwards		1 year	
South East Employers	Councillor Liz Terry		1 year	
South East Employers	Councillor Jason Brock	Substitute	1 year	
South East England Councils	Councillor Jason Brock		1 year	
South East England Councils	Councillor Liz Terry	Substitute	1 year	
South East Strategic Leaders	Councillor Jason Brock		1 year	
South East Strategic Leaders	Councillor Liz Terry	Substitute	1 year	
St Laurence Relief in Need Trust			4 years	
St Laurence Relief in Need Trust			4 years	
Standing Committee On Archives	Councillor Jason Brock		1 year	
Thames Valley Police & Crime Panel	Councillor Karen Rowland		1 year	
Thames Valley Police & Crime Panel	Councillor Liz Terry	Substitute	1 year	
Trading Standards South-East Ltd	James Crosbie	Officer	1 year	
Trading Standards South-	Public Protection	Officer	1 year	

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East Ltd	Manager			
University of Reading Court	Councillor Tony Page	Mayor	Mayoral term	

- (2) That the appointments or nominations be made on an “or nominee” basis where the organisation in question was willing to accept this arrangement;
- (3) That the Monitoring Officer, in consultation with the Leader of the Council and any relevant Group Leaders, be authorised to appoint the Council’s representative(s) to any outside body vacancies arising mid-year or otherwise not filled in the annual round of appointments;
- (4) That the Trustees Sub-Committee be authorised to conduct a review of the appointments and nominations to outside bodies and report back to Policy Committee with recommendations.

7. EXCLUSION OF THE PRESS AND PUBLIC

Resolved –

That pursuant to Section 100A of the Local Government Act 1972 (as amended), members of the press and public be excluded during consideration of items 9 and 10 below as it was likely that there would be a disclosure of exempt information as defined in the relevant paragraphs specified in Part 1 of Schedule 12A to that Act.

8. DECLARATIONS OF INTEREST FOR CLOSED SESSION ITEMS

Councillor Ennis declared a non-prejudicial interest in item 9. Councillor Ennis left the meeting while discussions were taking place.

9. PROPERTY IN CENTRAL READING

The Executive Director of Economic Growth & Neighbourhood Services submitted a report seeking approval to grant a reversionary lease to the tenant set out in the report. The lease would commence on the expiry of the existing lease.

The report provided two options with the recommended option to grant the lease to the current tenant on the same terms as the existing lease.

Resolved –

That a reversionary lease be granted to the current tenant as per the terms detailed in the report.

(Exempt information as defined in Paragraph 3).

10. PROPERTY IN SOUTH CENTRAL READING

The Executive Director of Economic Growth & Neighbourhood Services submitted a report seeking approval to grant a reversionary lease to the sub-tenant set out in the report.

The report provided four options, with the recommended option to grant the lease to the sub-tenant on the terms set out in the report. A site plan was attached to the report at Appendix 1.

Resolved –

That a reversionary lease be granted to the sub-tenant on the terms detailed in the report.

(Exempt information as defined in Paragraph 3).

(The meeting started at 6.30 pm and closed at 7.10 pm)

Policy Committee

10 July 2023



Reading
Borough Council
Working better with you

Title	Household Support Fund 4
Purpose of the report	To make a decision
Report status	Public report
Report author	Gavin Handford, Assistant Director, Policy, Performance & Customer Service
Lead Councillor	Liz Terry, Corporate Services & Resources
Corporate priority	Thriving Communities
Recommendations	<ol style="list-style-type: none"> 1. To agree the utilisation of the DWP Household Support Fund as detailed in Para 3.11 for 2023/24 to support Reading residents in the most need; particularly those who may not be eligible for the other cost of living support government has recently made available. 2. To delegate the ability to the Director of Resources, in consultation with the Leader of the Council, to make changes to the delivery of HSF4 to meet changes in demand and maintain compliance with the funding allocation requirements from DWP as detailed in para 3.1. 3. Note the decision taken under officer delegation by the Assistant Director, Policy, Performance & Customer Service, to utilise an element of the funding for staff resource and initial allocation payments as detailed in para 1.7.

1. Executive Summary

- 1.1. A Household Support Fund (HSF) grant of £2,261,298 has been confirmed for Reading borough to provide cost of living support to households in the most need; particularly those who may not be eligible for the other support government has recently made available.
- 1.2. The grant is funded by the Department of Work and Pensions (DWP) and is to be utilised between 1st April 2023 and the 31 March 2024.
- 1.3. The grant is provided to help families and vulnerable individuals who struggle to pay for basic living costs, such as:
 - energy and water
 - food
 - essentials linked to energy and water
 - wider essentials
 - advice services
 - housing costs
- 1.4. DWP has stipulated some grant conditions including that Local authorities are expected to offer support throughout the duration of the Fund Period and must develop their delivery plans to reflect this. A summary of the DWP conditions is in Appendix 1.

It is proposed that the utilisation of the HSF grant over the coming year is focused on two key elements:

- An **application-based** scheme that is agile and flexible enough to meet the specific needs of local people who are in desperate need of cost-of-living support. There are a wide range of people who need such support, but that are difficult to specifically identify, and therefore provide a defined funding allocation.
 - Automatic support through an **allocation** scheme to low-income households with children in receipt of Pupil Premium/Free School Meals and older people in receipt of Housing Benefit who do not receive the direct government support provided to recipients of other DWP benefits.
- 1.5. The Council may make changes to the delivery of HSF4 during the year to respond to changes in demand from residents and to ensure that the delivery of HSF4 remains within the available funding.
- 1.6. Due to HSF4 being delivered over a full year, in contrast to the six-month timescale of previous HSF rounds, the resources being utilised through the scheme are now more than £2,000,000. Therefore, the comprehensive detail of the HSF4 scheme for Reading is being presented to Policy Committee for approval.
- 1.7. To enable the timely delivery of HSF4, £499,500 of the funding has been drawn down under delegated authority by the Assistant Director for Policy, Performance & Customer Services. Within this, £383,000 was identified to begin the first payment of the allocation element of HSF4 to be made by July 2023, prioritising Pupil Premium families with children entitled to free school meals, and £116,500 of the funding was identified to cover the set-up and administration costs of the application-based element. Following detailed data collection on the number of eligible households, the allocation to voucher payments was increased to £400,000, whilst remaining within the financial limits for Officer Delegation.
- 1.8. Other key requirements of the HSF4 process are summarized in Appendix 1.
- 1.9. Details of the proposed application-based element of HSF4 are presented in Appendix 2.

2. Policy Context

- 2.1. For HSF3 (1st October 2022 to 31st March 2023), the Council moved away from providing direct support for Free School Meals (FSM) families during school holidays to the provision of Cost-of-Living vouchers with the intention of providing residents with more flexibility and choice in utilising the support provided.
- 2.2. The HSF 3 scheme can be summarised as follows:
- £125 Cost of Living Voucher per family household that have school age children eligible for Pupil Premium Free School Meals and/or vulnerable children up to nursery age
 - £125 Cost of Living Voucher per care leaver
 - £100 Cost of Living Voucher per household with older people receiving the state pension (individuals who have reached the state pension age) who are on the Council Tax Reduction Scheme (CTRS) or in receipt of housing benefit, or with older people receiving the state pension (individuals who have reached the state pension age) who are in receipt of pension credit or savings credit and not on CTRS.
 - £650 Cost of Living voucher to households receiving Housing Benefit and on CTRS but no other DWP benefit.
 - £25 emergency energy vouchers - A small fund of £1,250 was allocated to provided 50 x £25 emergency energy vouchers to council tenants who

experience issues with their heating and hot water to fund the use of electric heaters whilst the issues are resolved.

- 2.3. Data for determining the number of households with school-age children eligible for Pupil Premium Free School Meals was using information provided by schools to BFFC through their school census that was used for HSF3.
- 2.4. Approximately 90% of the Cost-of-Living vouchers which were allocated to the residents detailed above were taken up. This means that there were still over 500 households across the borough which did not access the support that was being directly offered to them.
- 2.5. Due to the previous HSF funding windows being for only six months and therefore the including smaller amounts of funding to the Council, the utilisation of the funding received from DWP for the Household Support Fund activities has previously been agreed under officer delegation.

3. The Proposal

- 3.1. Based on the requirements and information provided by Government¹, the following approach for HSF4 is recommended.
 - To establish an application-based scheme that is agile and flexible enough to meet the specific needs of local people who are in desperate need of cost-of-living support. There are a wide range of people who need such support, but that are difficult to specifically identify, and therefore provide a defined funding allocation.
 - Provide automatic support through an Allocation scheme to low-income households with children in receipt of Pupil Premium/Free School Meals and older people in receipt of Housing Benefit who do not receive the direct government support provided to recipients of other DWP benefits. These are definable groups whose circumstances make them specifically vulnerable to cost-of-living rises, but who miss out on more general Government support.
 - In line with the permitted use of the funding, to utilise up to 10% of the HSF4 resources for the administration of the scheme throughout the year; including promotion of the Application element so that support reaches those most in need.
 - The Council may make changes to the delivery of HSF4 during the year to respond to changes in demand from residents and to ensure that the delivery of HSF4 remains within the available funding.
- 3.2. The **allocation** elements are proposed to be made in two equal payments during the year, with the first payment being in June/July and the second payment being in November. Initial payments in June have been made under the officer delegation, prioritising free school meals families. This is to provide resources to residents in the build-up to potentially key cost-increasing times of year (school summer holidays and the winter months). The need for an earlier payment to residents is also mitigated by the £300 cost of living payment the Government will be making soon to low-income households, and the recent payment by the Council of £650 to residents who only receive Housing Benefit or CTRS, and no other benefits. Families eligible for Pupil Premium support are also able to access support during the Easter School Holidays via the Holiday Activities & Food programme.
- 3.3. As required by the HSF guidance, the **application-based** element needs to be available throughout most of the year to 31st March 2024. It is proposed not to be a

¹ [1 April 2023 to 31 March 2024: Household Support Fund guidance for county councils and unitary authorities in England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/1-april-2023-to-31-march-2024-household-support-fund-guidance-for-county-councils-and-unitary-authorities-in-england)

budget limit on the amount allocated each month as although it is uncertain what will be the demand, we do not want to refuse applications that have a clear need. However, to ensure that funding remains available for the whole of the year, it is proposed to monitor expenditure each month and take action to manage demand accordingly. This may include further marketing the scheme if demand is low.

3.4 Specific details of the proposed application-based element of HSF4 are presented in Appendix 2.

3.5 **Application-based** schemes in other local authorities are commonly delivered via an online application form which requires proof of residency and requests a range of financial information, as well as a description of the need for support. It is proposed that the administration of the application-based element is delivered by the Council, with the additional capacity needed to do so funded from the administration element of HSF4. Capacity is needed to develop the scheme, launch, and promote the application-based element, coordinate activities across the council and with key external partners, and manage the budget throughout the year.

3.6 **Reasonable Administrative Costs.** Within the guidance for HSF4, there is provision for local authorities to utilise these funds to administer its delivery. Specifically, the guidance defines reasonable costs as:

- staff costs
- advertising and publicity to raise awareness of The Fund
- web page design
- printing application forms
- small IT changes, for example, to facilitate management information production

3.7 To successfully deliver HSF4, the Council will need staffing resources to set up the application-based element, to administer the applications, outreach activities to target hard to reach groups, and to provide overall management of the fund during the year. There will also be costs associated with making payments to residents within both the allocation and application-based elements. Early feedback from other local authorities is that administration costs increased during the delivery of HSF3 and therefore were considering allocating up to 10% of the Fund to cover its administration.

3.8 Setting up the application-based element and having sufficient resources to administer it is a practical priority for successfully delivering HSF4, along with having a dedicated named lead for the work during the year. It is therefore recommended that £116,500 of the Fund initially be allocated to the administration of HSF4, with the ability to utilise up to a maximum of 10% of the Fund (£226,130), in accordance with Government guidance, on its administration and promotion.

3.9 **Specific Details of Resources and the Households/Individuals to be Supported.**

- Families with children eligible FSM or Pupil Premium, & care leavers it is proposed would receive two cost of living payments of £125 during the year.
- Older People on low income in receipt of Housing Benefit, but no other DWP benefits, it is proposed would receive a one-off £450 cost of living payment.
- Application-element estimated on mean £125 per application.

3.10 This approach would provide support to the following number of households:

	Households
With children eligible FSM or PP, & care leavers	4,200
Older Housing Benefit recipients not in receipt of £900 from DWP	1,000
Number of individual Application payments of £125	4,281

3.11 Based on these assumptions and utilisation of up to 10% of the HSF for administration costs, the overall costs of the Scheme are as follows:

Option Costs	Rate £	Number	£
Admin and scheme cost (Maximum)			116,500
Scheme promotion and contingency			109,630
Older Housing Benefit recipients not in receipt of £900 from DWP	450		
<i>Actual</i>		909	
Estimate for Budgeting		1,000	450,000
Households with FSM, care leavers, PP	250		
• Reading PP/FSM		3,165	
• Care Leavers		240	
• West Berks FSM (Reading Residents)		307	
• Wokingham FSM (Reading Residents)		371	
<i>Actual</i>		4,083	
Estimate for Budgeting		4,200	1,050,00
Application-Based Element	125		535,168
Total			2,261,298

Variant Options

3.12. In developing the scheme, the following three variant options were considered. The **increase or decrease** in option costs from those set out in the table above is estimated below (and there would of course be a corresponding reduction in the funding distributed through the **application-based** element)

1	Pay £450 to all people receiving Housing Benefit, but no other benefits	£228,150
2	Increase the amount paid to £900 for Older People receiving Housing Benefit, but no other benefits	£294,300
3	Additional payment of £50 per child after the first for households with children eligible FSM or Pupil Premium, & care leavers	£281,092
4	Reduce the amount paid to Older People receiving Housing Benefit, but no other benefits to £250 to be consistent with payment made to FSM families reducing the cost to £163,500	£-130,800

3.13 An example of these options in combination would be to do **both 3 and 4** which would still leave funding for the Application element estimated at **£385K**.

3.14 Inclusion of these variant options has not been recommended as 1,2&3 would reduce the amount of funding available to the discretionary application-based element of HSF4, and therefore reduce the ability and capacity for the Council to respond flexibly to the needs of residents who are struggling to meet their cost of living within the Borough.

- 3.15 Older People receiving Housing Benefit, but no other benefits are not eligible to receive the £900 cost of living payment from the Government to low-income households. Allocating a payment of £450 to these residents is recommended as a way of mitigating this group of residents missing this payment from Government.

4. Contribution to Strategic Aims

- 4.1. The utilisation of the Household Support Fund provides direct targeted support to families within the borough and enables a broad range of individuals to have the opportunity to access financial support to mitigate the impact of the rising cost of living within the borough.
- 4.2. This targeted and flexible support to residents is to help ensure that everyone who lives within the borough can maintain a suitable quality of life and share in its successes. It tackles inequality in our society, to ensure everyone has an equal chance to thrive whatever their economic, social, cultural, ethnic, or religious background, and prioritises the needs of the most marginalised groups and the most vulnerable adults and children in our communities.
- 4.3. The Council's Corporate Plan 2022-25 'Investing in Reading's Future' sets out the vision for Reading to reach its potential and to ensure that everyone living and working can share the benefits of our town's success. This commitment is also central to the Council's Tackling Inequality Strategy 2023-26 which demonstrates how the Council will go beyond our existing activities and strategies to achieve a more consistent quality of life for our residents in our most deprived areas.

5. Environmental and Climate Implications

- 5.1. Resources from the Household Support Fund can be utilised by residents to improve the energy efficiency of their homes and therefore reduce their energy costs.

6. Community Engagement

- 6.1. The Council has routinely engaged with local voluntary and community organisations to understand the impact they are experiencing in supporting residents with the rising cost of living within the borough. This engagement has enabled the Council to tailor the information and support available to residents who are struggling with the rising cost of living.
- 6.2. The development of the approach and criteria for the application-based element of the Household Support Fund have been guided by the feedback from local voluntary and community organisations on how the rising cost of living can affect residents from a broad range of backgrounds and personal circumstances. For example, over half of the residents being referred to support from the ReadiFood foodbank are single people living alone.

7. Equality Implications

- 7.1. The Household Support Fund is focused on supporting any resident who is experiencing difficulties with the rising cost of living within the borough.
- 7.2. Opportunities to access support from the Household Support fund will be widely promoted across the borough to ensure everyone is aware of them, including to local voluntary and community organisations who have a direct relationship with local communities across the borough.
- 7.3. Elements of the Household Support Fund which is targeted towards families eligible for free school meals and older people in receipt of Housing Benefit is also expected to support other protected characteristics within the borough.

- 7.4. Monitoring of the take up of the Household Support Fund will include Equalities information to determine if any changes to the scheme and support available to access it need to be amended during the year.

8. Other Relevant Considerations

- 8.1. None.

9. Legal Implications

- 9.1. None to note.

10. Financial Implications

- 10.1. The Council has been allocated a Household Support Fund grant by Department of Work & Pensions of £2,261,298 for the financial year 2023/24. All costs for this Household Support Fund scheme within Reading Borough will be met from this grant.
- 10.2. The utilisation of these resources is being undertaken directly in accordance with the guidance issued by Department of Work & Pensions for their use, to support residents within Reading Borough.
- 10.3. Activities relating to the delivery of the Household Support Scheme will be contained within the resources provided by Department of Work & Pensions. Flexibility has been built into the delivery arrangements to enable the Council to alter the scheme as needed to meet any unexpected changes in demand.
- 10.4. At this time, there is no indication from Government on whether there will be a Household Support Fund allocation to local authorities in future years.

11. Timetable for Implementation

- 11.1. Not applicable.

Appendices

1. Appendix 1 – Summary of the key requirements of the HSF4 process
2. Appendix 2 – Details of the proposed application-based element of HSF4

APPENDIX 1

Household Support Fund 4 – Key Requirements Overview

DWP has provided data and information to identify those in need in their area:

- information relating to Universal Credit (UC) claims with limited capability for work or earnings below the Free School Meals (FSMs) and free prescription thresholds in their area
- data on people receiving the Guarantee Credit and/or Savings Credit elements of Pension Credit
- data on all claimants on income-related (IR) Employment and Support Allowance (ESA IR).

Every local authority must operate at least part of their scheme on an **application basis**, so that residents can come forward to ask for support. There is flexibility regarding exactly how this can be run, including through third parties rather than directly by the Council. As with funds allocated directly to residents, it is expected that the Council will offer application-based support throughout the duration of the Fund, either continuously over most of the year or in regular intervals throughout the year.

It is also mandatory for local authorities to **make public their plans for the Fund**, including how and when they intend to deliver the application-based portion of their scheme. This should be through a website page dedicated to the Fund headed with 'Household Support Fund' on their website.

This webpage must be easily accessible for residents and outline the Council's plans for funding, including with details of who is eligible in the area, as well as how and when residents might be able to apply for the application-based element of the scheme. Links to the Government's Cost of Living Hub should be included, as well as a specific reference that the grant is funded by the Department for Work and Pensions or the UK Government.

A proportion of the funding can be used to cover the administration costs of the scheme.

Utilisation of the HSF grant can commence from 1st April 2023, but the Council is required to submit an initial delivery plan in a specified template to DWP by 17th May 2023. This was done based on the outline of the scheme presented to Policy Committee and with the agreement of the Lead Member and Section 151 officer which is a condition of the HSF4 guidance.

At the end of the Fund, the Government will also ask for a summary of the spending against the final delivery plan with this due at the same time as the final MI in April 2024. Delivery plans must be signed off by our Section 151 Officer and responsible Lead Member before submission to DWP.

This delivery plan requires information on anticipated spend, expected volumes and number of households supported in the following sections:

Information Type	Specific Details Requested
Household Composition	Households with Children Households with Pensioners Households with Disabled People Other Households
Spend by Category	Food (excluding FSM support in the holidays) FSM support in the holidays Energy & Water Essentials Linked to Energy and Water Wider essentials Housing Costs

	Advice Services
Types of Support	Vouchers Cash awards Third Party Organisations Tangible Items Other
Access Routes	Application-based support Proactive Support Other

The Council is required to appoint an appropriate Senior Responsible Officer who is accountable for ensuring a delivery plan is developed and agreed through necessary decision-making mechanisms including engagement with the relevant Lead Member and ensuring compliance with and progress against the commitments in the delivery plan.

APPENDIX 2

Discretionary Application-Based HSF Support – Overview

Eligibility

The discretionary application-based element of HSF4 is focused on two specific approaches.

The **first** is providing additional support to low-income households within the borough who are more at risk due to the rising cost of living. Low-income households at risk are defined as households in receipt of low-income benefits or other related state benefits (such as a Personal Independence Payment).

Therefore, an assessment of eligibility for support from HSF4 for this approach focuses on two specific criteria:

- Is the person making the application a Reading Borough resident
- Is the person / family making the application on a low-income benefit, or other related state benefit, and therefore at risk because of the rising cost of living

The **second** approach is for residents who aren't in receipt of any income-based or other state benefits but have specific circumstances that have negatively impacted their overall cost of living, such as an unexpended or increased expenditure.

These residents will need to provide information about their income and expenditure, and their current specific circumstances that means they are requesting support with their cost of living.

In terms of their personal circumstances, support will be prioritised to households who fall into one or more of the following higher risk categories:

- Carers
- Care Leavers
- People with Disabilities
- Families with children receiving Pupil Premium
- People Living Alone
- Residents with Unsecure Employment
- Large Households
- People with energy inefficient homes
- Households with prepayment energy meters
- Residents in Private Rented Accommodation
- Victims of Crime
- Veterans
- Residents with English as a Second Language
- Residents with Ethnically Diverse Heritage

Promotion of the discretionary application-based element of HSF4 can be targeted to support these residents.

Type of Financial Support

It is recommended that financial support to households that are assessed as eligible to receive it is paid directly into their bank accounts via BACS. For the expected small number of residents who don't have or are unwilling to use their bank accounts, alternative payment arrangements will be made.

Eligible households will be able to access financial support. Households will be able to apply for HSF4 support twice during the year (either between April and September, or between October and March).

The average amount of £125 is suggested as this is consistent with the payments that were made to families within HSF3. Having a set amount of funding available will also help manage resident's expectations of the level of support available from the HSF. With a recommended budget for Application-Based support from HSF4 of £535,168, the Council would be able to make 4,281 payments of £125 to residents throughout the year.

Application Process and Information Needed

The initial application for support from HSF4 will be made via a form on the Council's website. This form can be completed by the resident or by someone else (such as a local advice organisation), if needed.

Proof of residency will be confirmed via residents providing their Property Reference Number and Council Tax Reference Number. Additional provision will be made for residents who are not able to provide this information.

Confirmation of being in receipt of benefits will be the main method of determining need for cost-of-living support from the **first element** of the discretionary application-based part of HSF4.

Additional information on income, expenditure and specific circumstances will be needed for the **second element** of the discretionary application-based part of HSF4.

When making an application, residents will be asked information about their personal circumstances and what the HSF4 payment will be used for. This information will be used to complete the required information returns to DWP.

Personal Information:

- Households with Children, Households with Pensioners, Households with Disabled People

Type of Support Needed:

- Food, Energy & Water, Essentials Linked to Energy and Water, Wider essentials, Housing Costs, Other

Decision and Appeals

The decision to award or reject will be made by Council officers administering the scheme. Their decision will be final and there will be no right to appeal

Profile of Resources Available for the HSF4 Application Scheme

To ensure that residents can apply for support from HSF4 in each month of the year, a profile of monthly spend has been created based on expected levels of demand.

A periodic review of the number of applications will enable the Council to determine whether any changes need to be made to the eligibility or size of payments available to ensure that all the resources are utilised correctly, and the Council stays within the available budget. Any changes to the amounts of funding allocated within the scheme will be taken by the Director of Resources in line with the Council's agreed financial management arrangements. For example, this could include additional payments to families on Free School Meals to reflect different family sizes.

To manage some expected peaks in demand for the scheme, the following monthly spend profile is proposed for the application-based element of HSF4:

HSF4 Application Element Budget Profile		
Month	Budget	Demand Peaks
Apr		
May		
Jun		
Jul	133,792	Launch & School Summer Holidays
Aug	53,517	School Summer Holidays
Sep	53,517	Back to School Costs
Oct	26,758	
Nov	26,758	
Dec	80,275	Cold Weather & Xmas
Jan	53,517	Cold Weather
Feb	53,517	Cold Weather
Mar	53,517	Cold Weather
Total	535,168	

Policy Committee

10 July 2023



Reading
Borough Council
Working better with you

Title	CIPFA Practical Guidance for Local Authorities on Audit Committees
Purpose of the report	To make a recommendation to Council
Report status	Public report
Report author (name & job title)	Paul Harrington, Chief Auditor
Lead Councillor (name & title)	Cllr Liz Terry, Lead Councillor for Corporate Services and Resources
Corporate priority	Our Foundations
Recommendations	<ol style="list-style-type: none"> 1. That Policy Committee considers the key points arising from the CIPFA Audit Committees: <i>practical guidance for local authorities and police</i>, as summarised in section 2 below. 2. That Policy Committee recommends to Council the revised Audit & Governance Committee’s terms of reference (appendix 1) and the removal of its decision-making powers in relation to the approval of the annual financial statements, returning the latter to full Council. 3. That Policy Committee endorses the recommendations of the Redmond Review that the external audit annual report should be submitted to full council by the external auditor. 4. That Policy Committee recommends to Council that the Audit & Governance Committee reports annually on how it has complied with the CIPFA position statement, discharged its responsibilities, and includes an assessment of its performance. The report should be available to the public.

1. EXECUTIVE SUMMARY

- 1.1 CIPFA (The Chartered Institute of Public Finance and Accountancy) recently issued practical guidance for Local Authorities on Audit Committees, which included resources for Audit Committee members, a supplement for those responsible for guiding the committee, and a self-assessment of good practice. The guidance was partly in response to the Redmond Review¹, it updated previous CIPFA guidance from 2018 and complimented the CIPFA Position Statement on Audit Committees. It also incorporated recent legislative changes and professional developments following the Redmond Review. Whilst it is guidance, it is noted that “*CIPFA expects that all local government bodies should make their best efforts to adopt the principles, aiming for effective audit committee arrangements.*”
- 1.2 Audit committees are a key component of an authority’s governance framework. Their purpose is to provide an independent and high-level focus on the adequacy of governance, risk and control arrangements. The committee’s role in ensuring that there is sufficient

¹ [Independent Review into the Oversight of Local Audit and the Transparency of Local Authority Financial Reporting, Sir Tony Redmond, September 2020](#)

assurance over governance, risk and control gives greater confidence to all those charged with governance that those arrangements are effective.

- 1.3 In a local authority, the full council is the body charged with governance. The audit committee may be delegated some governance responsibilities but will be accountable to full council.
- 1.4 The committee has oversight of both internal and external audit, together with the financial and governance reports, helping to ensure that there are adequate arrangements in place for both internal challenge and public accountability.
- 1.5 Using the CIPFA self-assessment tool, a self-assessment was conducted by Internal Audit in January 2023 against the CIPFA guidance and concluded that current arrangements 'partially comply' with the guidance, with 'moderate' improvement required. The purpose of this report is to provide a summary of the key points from the guidance and provide members with the outcome of the self-assessment carried out by Internal Audit, along with recommended actions for consideration.
- 1.6 Although the detail of the guidance is provided in section 2 of the report, some of the more noteworthy changes are summarised as follows:
 - CIPFA recommends that the audit committee is an advisory committee and does not have delegated powers, such as the approval of the financial statements. The role of the audit committee is to review the financial statements prior to approval. The statements are the responsibility of all those charged with governance.
 - CIPFA also recommends that each authority audit committee should include at least two co-opted independent members to provide appropriate technical expertise.
 - CIPFA has endorsed the recommendations of the Redmond Review that the external audit annual report should be submitted to full council by the external auditor.
 - A committee size of no more than eight members should be established. CIPFA also recommends that the use of substitutes on the committee is avoided.
 - The audit committee should have oversight of counter-fraud arrangements to be able to judge whether the authority's arrangements are fit for purpose.
 - The committee may wish to review the effectiveness of whistleblowing arrangements.
 - Tasks such as budget monitoring should not be undertaken by the committee.
 - As an advisory committee to those charged with governance, the Committee should be regularly held to account by full council.
 - The committee report annually on how it has complied with the CIPFA position statement, discharged its responsibilities, and include an assessment of its performance. The report should be available to the public.
 - CIPFA has produced a model terms of reference for Audit Committees to adopt.
 - The committee should operate in a non-political manner, with objective, open discussion on governance, risk and control issues.

2. SUMMARY OF CIPFA GUIDANCE

The revised and updated CIPFA Audit Committees: Practical Guidance For Local Authorities And Police (2022 edition)² takes into account recent legislative changes and professional developments and supports the 2022 CIPFA Position Statement. It includes additional guidance and resources to support audit committee members, and those working with and supporting the committee's development.

² <https://www.cipfa.org/policy-and-guidance/publications/a/audit-committees-practical-guidance-for-local-authorities-and-police-2022-edition>

The guidance is summarised under the following headings: Purpose of the Audit Committee, Independence and Effectiveness, Core Functions of the Audit Committee, Audit Committee Membership, Engagement & Outputs and Impact.

2.1 Purpose of the Audit Committee

- Be a key part of the Local Authority's governance framework.
- Provide an independent, high-level focus on governance, risk and control arrangements and their adequacy.
- May be delegated some governance responsibilities, but ultimately accountable to Full Council.
- Have oversight of internal audit, external audit, financial and governance reports to help ensure appropriate internal challenge and public accountability is in place.

2.2 Independence and effectiveness

The Audit Committee should:

- be directly accountable to the authority's governing body
- be independent of both the executive and the scrutiny function
- have no other functions, and explicitly no decision-making role
- have rights of access to, and constructive engagement with, other committees/functions
- have rights to request reports and seek assurances from relevant officers
- be of an appropriate size (CIPFA recommends no more than eight members) to operate as a group of experienced, trained committee members.
- include co-opted independent members in accordance with the appropriate legislation. Where there is no legislative direction to include co-opted independent members, CIPFA recommends that each authority audit committee should include at least two co-opted independent members to provide appropriate technical expertise.
- remain an advisory committee and not have delegated powers. It is noted that, currently, some authorities have delegated decisions such as the approval of financial statements to the audit committee. This takes the audit committee beyond its advisory role.

CIPFA recommends the inclusion of two co-opted independent members (rather than one as proposed by the Redmond review) for the following reasons:

- to supplement the elected members' knowledge and experience in specific areas such as auditing or financial reporting
- to provide continuity outside the political cycle, particularly where the committee membership changes annually/due to elections
- two co-opted members (as opposed to one) allows the recruitment of individuals with different but complementary knowledge and experience, thereby increasing the committee's resilience and continuity, and demonstrates a commitment to supporting and investing in the committee.

It is also noted that at the time of the Redmond Review (2020), from a representative sample of 27 Local Authority Audit Committees (not including FRAs or PCCs), 44% had independent members on them.

2.3 Core functions of the Audit Committee

Maintenance of governance, risk and control arrangements

- Support a comprehensive understanding of governance both across the organisation and among all those charged with governance, fulfilling the principles of good governance and supporting the authority's ethical framework.
- Consider the effectiveness of the authority's risk management arrangements, including understanding the organisation's risk profile, and seek assurances that active arrangements are in place on risk-related issues, for both the body and its collaborative partnership and trading arrangements. It should also understand the roles of other committees to avoid duplication and confusion with its own role. Where the Audit Committee undertakes more in-depth risk reviews (as not carried out by other committees), it should be mindful of when it is acting as a risk committee rather than just an audit committee.
- Monitor the effectiveness of the internal control system, including arrangements for financial management, ensuring value for money, supporting standards and ethics and managing the authority's exposure to fraud and corruption risks.
- The audit committee's agenda should include counter fraud and corruption, and not be limited to an update to the committee on a significant case of fraud or corruption. It should also enable members to judge whether the authority's arrangements are fit for purpose.
- As part of the audit committee's oversight of the governance framework and assurances underpinning the Annual Governance Statement (AGS), the committee may wish to review the effectiveness of the whistleblowing arrangements.
- Support the effective implementation of agreed actions in improvement programmes arising from external inspections, peer reviews and other interventions.

Financial and governance reporting

- Be satisfied that the authority's accountability statements, including the AGS, properly reflect the risk environment, and any actions required to improve it, and demonstrate how governance supports the achievement of the authority's objectives.
- It is good practice for accounts and the AGS to be reviewed by the Audit Committee prior to the external audit commencing and in the latter case also before being signed by the Leading Member and the authority's Chief Executive.
- Support the maintenance of effective arrangements for financial reporting and review the statutory statements of account and any reports that accompany them.
- Care should be taken to not overlap with financial scrutiny. Tasks such as budget monitoring should not be undertaken by the committee.
- Where the Audit Committee has been nominated to undertake the scrutiny role for Treasury Management, it needs to carry this out in accordance with the Treasury Management Code but ensure not to include any executive and decision-making roles.

Establishing appropriate and effective arrangements for audit and assurance

- Consider the arrangements in place to secure adequate assurance across the body's full range of operations and collaborations with other entities.
- In relation to the authority's internal audit functions:
 - oversee its independence, objectivity, performance and conformance to professional standards
 - support effective internal audit arrangements
 - promote the effective use of internal audit within the assurance framework.
- Consider the opinion, reports and recommendations of external audit and inspection agencies and their implications for governance, risk management and control, and monitor management action in response to the issues raised by external audit.

- Contribute to the operation of efficient and effective external audit arrangements, supporting the independence of auditors and promoting audit quality.
- Support effective relationships between all providers of assurance, audits and inspections, and the organisation, encouraging openness to challenge, review and accountability.
- CIPFA has endorsed the recommendations of the Redmond Review that the external audit annual report should be submitted to full council by the external auditor, although accompanied by a report from the Audit Committee setting out the proposed response to the report.

2.4 Audit committee membership

Audit Committee members should be:

- Knowledgeable, trained to fulfill their role, objective, and have an inquiring and independent approach.
- Promoting good governance principles and identifying improvements that can help achieve the organisation's objectives.
- Willing to operate in an apolitical manner.
- Unbiased and treat auditors, the executive and management fairly.
- Constructively challenging the executive and senior managers when required.
- Having expertise and interest in the committee's work; although committee members' attitudes and willingness to have appropriate training are equally important.

Additionally, the committee should have a strong, independently minded chair, displaying a depth of knowledge, skills, and interest and able to:

- promote apolitical open discussion
- manage meetings effectively, encouraging a culture of continuous improvement and learning from all participants
- maintain the committee's focus on matters of greatest priority.

Where the committee is strictly advisory and not subject to other requirements, full council can vote to waive the political balance requirement and specify other criteria to decide who should serve on the committee. The length of tenure will be influenced by the need to maintain political balance (if relevant), in addition to other factors. In principle, establishing continuity on the committee helps to make the best use of knowledge and experience, although some rotation is helpful to bring a new perspective. CIPFA suggests that two full terms on the committee is a reasonable maximum.

CIPFA detail that unless there is specific guidance or legislation in place relating to selecting the committee chair, authorities can determine their own approach. In some cases, it may be that it is specified that the position is occupied by an opposition member to try and emphasise independence and the apolitical nature of the committee. This may not be appropriate for all authorities – for example when there are few opposition members.

2.5 Engagement and outputs

To discharge its responsibilities effectively and enable it to address all its responsibilities detailed in its terms of reference, the committee should:

- meet regularly (at least four times a year), and have a clear policy on items to be considered in private and those to be considered in public
- be able to meet privately and separately with the external auditor and with the head of internal audit
- include, as regular attendees, the chief finance officer(s), the chief executive, the head of internal audit and the appointed external auditor; other attendees may include the

monitoring officer and the head of resources (where such a post exists). These officers should also be able to access the committee members, or the chair, as required

- have the right to call on any other officers or agencies of the authority as required
- support transparency, reporting regularly on its work to those charged with governance
- report annually on how the committee has complied with the CIPFA position statement, discharged its responsibilities, and include an assessment of its performance. The report should be available to the public and the conclusions support the AGS.

2.6 Impact

- The Audit Committee's influence depends on both effectively performing its role and engaging with the leadership team and those charged with governance.
- The committee should consider its impact and identify areas for improvement.

3. SELF-ASSESSMENT OF GOOD PRACTICE FOR AUDIT COMMITTEES

3.1 Using the CIPFA self-assessment tool, a self-assessment was conducted by Internal Audit in January 2023 against the CIPFA guidance (Appendix 2). The overall conclusion from this is that there is partial compliance with the CIPFA guidance with moderate improvement required.

3.3 One of the outcomes from the initial self-assessment review conducted was to propose that the A&G Committee's terms of reference be updated to those suggested by CIPFA for local authorities (see Appendix 1 for the suggested revised terms of reference).

3.4 Whilst it is noted that, generally, the current committee terms of reference address the core areas identified in CIPFA's Position Statement, they would benefit from some updating to reflect increased emphasis in some areas and also the inclusion of some additional areas.

3.5 Areas for possible increased emphasis include organisational risk profile, value for money and an oversight role on fraud and anti-corruption and a broadened reference to internal controls beyond consideration annually as part of the Annual Governance Statement (AGS) and financial management beyond focusing on the financial statements.

3.6 Possible areas for specific inclusion in the terms of reference include review of governance and assurance arrangements for significant partnerships/collaborations, considering the assurance framework and whether it adequately addresses the Council's risks and priorities, detailing that both the Chief Auditor and External Audit have unrestricted access to the committee chair and an opportunity to meet privately with the committee and also a number of areas relating to internal audit, including approval of their charter, confirming their independence, inquiring about scope limitations on their work, reviewing and approving any safeguards to limit impairments for any additional roles taken on by the Chief Auditor and receiving their external quality assessment report.

3.7 It should be noted that whilst various areas are either not detailed or not specifically detailed within the current terms of reference, this does not necessarily mean that they are not already undertaken by the committee (for example A&G Committee annually reviews and approves the internal audit charter and internal and external audit has the opportunity to meet privately with the committee and its chair).

4. Contribution to Strategic Aims

4.1 An effective audit committee enables the Council to meet its statutory responsibilities in relation to governance and internal control arrangements, financial management, financial reporting and internal audit, which are fundamental to the delivery of the Council's strategic aims, vision and Corporate Plan priorities.

4.2 The Council's new Corporate Plan has established three themes for the years 2022/25. These themes are:

- Healthy Environment

- Thriving Communities
 - Inclusive Economy
- 4.3 These themes are underpinned by “Our Foundations” explaining the ways we work at the Council:
- People first
 - Digital transformation
 - Building self-reliance
 - Getting the best value
 - Collaborating with others
- 4.4 Full details of the Council’s Corporate Plan and the projects which will deliver these priorities are published on the [Council’s website](#). These priorities and the Corporate Plan demonstrate how the Council meets its legal obligation to be efficient, effective and economical.

5. Environmental and Climate Implications

- 5.1 The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers).
- 5.2 There are no environmental or climate implications arising from the report.

6. Community Engagement

- 6.1 N/A

7. Equality Implications

- 7.1 No equalities impact implications have been identified as arising from this report.

8. Other Relevant Considerations

- 8.1 None

9. Legal Implications

- 9.1 The CIPFA Position Statement on Audit Committees in Local Authorities 2022 is guidance; however, it is noted that “CIPFA expects that all local government bodies should make their best efforts to adopt the principles, aiming for effective audit committee arrangements.”

10 Financial Implications

- 10.1 Some likely indirectly as a result of the self-assessment - for example, training. In addition, remuneration might be necessary for appointed independent members.

11 Timetable for Implementation

- 11.1 This will be dependent on the recommendations made as a result of this report.

Appendices

The following documents are appended:

- Appendix 1 – proposed revised Audit & Governance Committee’s terms of reference
- Appendix 2 - Self-assessment of good practice against the CIPFA Practical Guidance for Local Authorities on Audit Committees

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APPENDIX 1

TERMS OF REFERENCE

Statement of purpose

The committee's purpose is to provide an independent and high-level focus on the adequacy of governance, risk and control arrangements. Its role in ensuring there is sufficient assurance over governance, risk and control gives greater confidence to all those charged with governance that those arrangements are effective.

The committee has oversight of both internal and external audit, together with the financial and governance reports, helping to ensure there are adequate arrangements in place for both internal challenge and public accountability.

Governance, risk and control

- To review the council's corporate governance arrangements against the good governance framework, including the ethical framework, and consider the local code of governance.
- To monitor the effective development and operation of risk management in the council.
- To monitor progress in addressing risk-related issues reported to the committee.
- To consider reports on the effectiveness of internal controls and monitor the implementation of agreed actions.
- To consider reports on the effectiveness of financial management arrangements, including compliance with CIPFA's **Financial Management Code**.
- To consider the council's arrangements to secure value for money and review assurances and assessments on the effectiveness of these arrangements.
- To review the assessment of fraud risks and potential harm to the council from fraud and corruption.
- To monitor the counter-fraud strategy, actions and resources.
- To review the governance and assurance arrangements for significant partnerships or collaborations.

Financial and governance reporting

Governance reporting

- To review the AGS prior to approval and consider whether it properly reflects the risk environment and supporting assurances, including the head of internal audit's annual opinion.
- To consider whether the annual evaluation for the AGS fairly concludes that governance arrangements are fit for purpose, supporting the achievement of the authority's objectives.

Financial reporting

- To monitor the arrangements and preparations for financial reporting to ensure that statutory requirements and professional standards can be met.
- To review the annual statement of accounts. Specifically, to consider whether appropriate accounting policies have been followed and whether there are concerns arising from the financial statements or from the audit that need to be brought to the attention of the council.
- To consider the external auditor's report to those charged with governance on issues arising from the audit of the accounts.

Arrangements for audit and assurance

To consider the council's framework of assurance and ensure that it adequately addresses the risks and priorities of the council.

External audit

- To support the independence of external audit through consideration of the external auditor's annual assessment of its independence and review of any issues raised by PSAA or the authority's auditor panel as appropriate.
- To consider the external auditor's annual letter, relevant reports and the report to those charged with governance.
- To consider specific reports as agreed with the external auditor.
- To comment on the scope and depth of external audit work and to ensure it gives value for money.
- To consider additional commissions of work from external audit.
- To advise and recommend on the effectiveness of relationships between external and internal audit and other inspection agencies or relevant bodies.
- To provide free and unfettered access to the audit committee chair for the auditors, including the opportunity for a private meeting with the committee.

Internal audit

- To approve the internal audit charter.
- To review proposals made in relation to the appointment of external providers of internal audit services and to make recommendations.
- To approve the risk-based internal audit plan, including internal audit's resource requirements, the approach to using other sources of assurance, and any work required to place reliance upon those other sources.
- To approve significant interim changes to the risk-based internal audit plan and resource requirements.
- To make appropriate enquiries of both management and the head of internal audit to determine if there are any inappropriate scope or resource limitations.
- To consider any impairments to the independence or objectivity of the head of internal audit arising from additional roles or responsibilities outside of internal auditing and to approve and periodically review safeguards to limit such impairments.
- To consider reports from the head of internal audit on internal audit's performance during the year, including the performance of external providers of internal audit services. These will include:
 - updates on the work of internal audit, including key findings, issues of concern and action in hand as a result of internal audit work
 - regular reports on the results of the QAIP
 - reports on instances where the internal audit function does not conform to the PSIAS and LGAN, considering whether the non-conformance is significant enough that it must be included in the AGS.
- To consider the head of internal audit's annual report, including:
 - the statement of the level of conformance with the PSIAS and LGAN and the results of the QAIP that support the statement (these will indicate the reliability of the conclusions of internal audit)
 - the opinion on the overall adequacy and effectiveness of the council's framework of governance, risk management and control, together with the summary of the work supporting the opinion (these will assist the committee in reviewing the AGS).

- To consider summaries of specific internal audit reports as requested.
- To receive reports outlining the action taken where the head of internal audit has concluded that management has accepted a level of risk that may be unacceptable to the authority or there are concerns about progress with the implementation of agreed actions.
- To contribute to the QAIP and in particular to the external quality assessment of internal audit that takes place at least once every five years.
- To consider a report on the effectiveness of internal audit to support the AGS where required to do so by the accounts and audit regulations.
- To provide free and unfettered access to the audit committee chair for the head of internal audit, including the opportunity for a private meeting with the committee.

Accountability arrangements

- To report to those charged with governance on the committee's findings, conclusions and recommendations concerning the adequacy and effectiveness of their governance, risk management and internal control frameworks, financial reporting arrangements and internal and external audit functions.
- To report to full council on a regular basis on the committee's performance in relation to the terms of reference and the effectiveness of the committee in meeting its purpose.
- To publish an annual report on the work of the committee, including a conclusion on the compliance with the CIPFA Position Statement.

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Self-assessment of good practice

This appendix provides a high-level review that incorporates the key principles set out in CIPFA's Position Statement and this publication. Where an audit committee has a high degree of performance against the good practice principles, it is an indicator that the committee is soundly based and has in place a knowledgeable membership. These are the essential factors in developing an effective audit committee.

A regular self-assessment should be used to support the planning of the audit committee work programme and training plans. It will also inform the annual report.

Good practice questions	Does not comply	Partially complies and extent of improvement needed*			Fully complies
	Major improvement	Significant improvement	Moderate improvement	Minor improvement	No further improvement
Weighting of answers	0	1	2	3	5

Audit committee purpose and governance

- 1 Does the authority have a dedicated audit committee that is not combined with other functions (eg standards, ethics, scrutiny)?
- 2 Does the audit committee report directly to the governing body (PCC and chief constable/full council/full fire authority, etc)?
- 3 Has the committee maintained its advisory role by not taking on any decision-making powers?
- 4 Do the terms of reference clearly set out the purpose of the committee in accordance with CIPFA's 2022 Position Statement?
- 5 Do all those charged with governance and in leadership roles have a good understanding of the role and purpose of the committee?
- 6 Does the audit committee escalate issues and concerns promptly to those in governance and leadership roles?
- 7 Does the governing body hold the audit committee to account for its performance at least annually?

* Where the committee does not fully comply with an element, three options are available to allow distinctions between aspects that require significant improvement and those requiring minor changes.

Good practice questions	Does not comply					Partially complies and extent of improvement needed					Fully complies														
	Major improvement					Significant improvement					Moderate improvement					Minor improvement					No further improvement				
Weighting of answers	0					1					2					3					5				
8 Does the committee publish an annual report in accordance with the 2022 guidance, including:																									
<ul style="list-style-type: none"> compliance with the CIPFA Position Statement 2022 																									
<ul style="list-style-type: none"> results of the annual evaluation, development work undertaken and planned improvements 																									
<ul style="list-style-type: none"> how it has fulfilled its terms of reference and the key issues escalated in the year? 																									
Functions of the committee																									
9 Do the committee's terms of reference explicitly address all the core areas identified in CIPFA's Position Statement as follows?																									
Governance arrangements																									
Risk management arrangements																									
Internal control arrangements, including:																									
<ul style="list-style-type: none"> financial management value for money ethics and standards counter fraud and corruption 																									
Annual governance statement																									
Financial reporting																									
Assurance framework																									
Internal audit																									
External audit																									
10 Over the last year, has adequate consideration been given to all core areas?																									
11 Over the last year, has the committee only considered agenda items that align with its core functions or selected wider functions, as set out in the 2022 guidance?																									
12 Has the committee met privately with the external auditors and head of internal audit in the last year?																									

Good practice questions	Does not comply					Partially complies and extent of improvement needed					Fully complies														
	Major improvement					Significant improvement					Moderate improvement					Minor improvement					No further improvement				
Weighting of answers	0					1					2					3					5				

Membership and support

13 Has the committee been established in accordance with the 2022 guidance as follows?

- Separation from executive
- A size that is not unwieldy and avoids use of substitutes
- Inclusion of lay/co-opted independent members in accordance with legislation or CIPFA's recommendation

14 Have all committee members been appointed or selected to ensure a committee membership that is knowledgeable and skilled?

15 Has an evaluation of knowledge, skills and the training needs of the chair and committee members been carried out within the last two years?

16 Have regular training and support arrangements been put in place covering the areas set out in the 2022 guidance?

17 Across the committee membership, is there a satisfactory level of knowledge, as set out in the 2022 guidance?

18 Is adequate secretariat and administrative support provided to the committee?

19 Does the committee have good working relations with key people and organisations, including external audit, internal audit and the CFO?

Effectiveness of the committee

20 Has the committee obtained positive feedback on its performance from those interacting with the committee or relying on its work?

21 Are meetings well chaired, ensuring key agenda items are addressed with a focus on improvement?

22 Are meetings effective with a good level of discussion and engagement from all the members?

23 Has the committee maintained a non-political approach to discussions throughout?

Good practice questions	Partially complies and extent of improvement needed				Fully complies
	Does not comply	Major improvement	Significant improvement	Moderate improvement	Minor improvement
Weighting of answers	0	1	2	3	5
24 Does the committee engage with a wide range of leaders and managers, including discussion of audit findings, risks and action plans with the responsible officers?					
25 Does the committee make recommendations for the improvement of governance, risk and control arrangements?					
26 Do audit committee recommendations have traction with those in leadership roles?					
27 Has the committee evaluated whether and how it is adding value to the organisation?					
28 Does the committee have an action plan to improve any areas of weakness?					
29 Has this assessment been undertaken collaboratively with the audit committee members?					
Subtotal score					
Total score					
Maximum possible score					200**

Our overall assessment of the CIPFA Guidance for Audit Committees is partial compliance with moderate improvement needed. Evidence to support our subjective conclusion for each of the questions is detailed over the next few pages as a description and can be cross referenced to the questions above.

** 40 questions/sub-questions multiplied by five.

Audit committee purpose and governance

Audit Committees are key in an authority's governance framework, providing an independent and high-level focus on the adequacy of governance, risk and control arrangements and giving greater confidence to those charged with governance i.e., full Council that the arrangements are effective.

Does the authority have a dedicated audit committee that is not combined with other functions (e.g., standards, ethics, scrutiny)?

- 1 There is a dedicated Audit and Governance Committee, with the scrutiny and overview roles carried out by Standing Committees, as detailed in their terms of reference. There is a separate Standards Committee.
-

Does the audit committee report directly to the governing body?

- 2 The Committee does not have a formal reporting line and does not report (regularly) to either Council or Policy Committee.
-

Has the committee maintained its advisory role by not taking on any decision-making powers?

- 3 The Audit and Governance Committee does have some decision-making powers. As detailed within its current terms of reference, it has delegated responsibility from Council to approve the annual statement of accounts. However, CIPFA's guidance indicates that the Audit Committee should remain an advisory committee and does not recommend that it be delegated decision-making powers such as the approval of the financial statements, which ultimately are the responsibility of all those charged with governance i.e., full Council.
-

Do the terms of reference clearly set out the purpose of the committee in accordance with CIPFA's 2022 Position Statement?

- 4 Generally, the current terms of reference for the Audit and Governance Committee set out the purpose of the Committee in accordance with CIPFA's Position Statement, although there is not a specific section on the purpose of the committee contained within the existing terms of reference.
-

Do all those charged with governance and in a leadership role have a good understanding of the role and purpose of the committee?

- 5 Senior Officers (CMT) and Lead Members understand the role and purpose of the Audit and Governance Committee. Members' induction training includes a section on the Council's constitution and committee structure. Training provided by Internal Audit to A&G Committee members in 2022 included a section on the role of the Audit Committee.
-

Does the audit committee escalate issues and concerns promptly to those in governance and leadership roles?

- 6 Where a nil assurance internal audit report was received by the Committee as part of the Chief Auditor's quarterly update report, both the Executive Director of Social Care and the Deputy Director of Commissioning and Transformation attended the meeting to answer members' questions and provide details of progress on implementing recommendations. The Committee also verbalised their ability to call managers and Executive Directors to meetings to explain any non-implementation or delays in the implementation of audit recommendations, although this option had not been taken up within the last year.
-

Does the governing body hold the audit committee to account for its performance at least annually?

- 7 As noted previously, there is no formalised reporting line between the Committee and full Council.

Does the committee publish an annual report in accordance with the 2022 guidance including:

- 8
- a) compliance with the CIPFA Position Statement 2022**
 - b) results of an annual evaluation, development work undertaken and planned improvements**
 - c) how it has fulfilled its terms of reference and the key issues escalated in the year**

There is no formal, annual report published by the Committee at present to include details of compliance with the CIPFA Position Statement, results of an annual evaluation (not currently undertaken), development work undertaken and planned improvements or how it has fulfilled its terms of reference and key issues escalated during the year.

Functions of the committee

The audit committee's core functions are to provide oversight of a range of governance and accountability arrangements, responses to recommendations of assurance providers and help ensure robust arrangements are maintained.

Do the committee's terms of reference explicitly address all the core areas identified in CIPFA's Position Statement, as follows:

- 9
- a. governance arrangements**
 - b. risk management arrangements**
 - c. internal control arrangements**
 - d. Annual Governance Statement (AGS)**
 - e. financial reporting**
 - f. assurance framework**
 - g. internal audit**
 - h. external audit**

Generally, the A&G Committee's terms of reference (TORs) address the core areas identified in CIPFA's Position Statement. However, they would benefit from some updating, to include increased emphasis in some areas and inclusion of some additional areas. Possible areas for increased emphasis include organisational risk profile, value for money and an oversight role on fraud and anti-corruption, broadening the reference to internal controls beyond annually considering them as part of the AGS, financial management beyond focusing on the financial statements and linked to CIPFA's financial management code, specifically detailing review of the governance and assurance arrangements for significant partnerships/collaborations and considering the assurance framework and assessing whether it adequately addressed Council's risks and priorities

Over the last year, has adequate consideration been given to all core areas?

A significant amount of committee time has been spent on finance, financial management, the financial statements, financial performance, treasury management and associated areas in the last three years. It might be beneficial to give consideration as to whether it is appropriate for some areas contained within the CIPFA Position Statement and associated TORs to have either more or less focus going forward. Some suggestions for areas of increased focus include:

- 10
- Corporate governance including governance and assurance arrangements for significant partnerships or collaborations and ethics
 - arrangements to secure value for money
 - review the assessment of fraud risks (as part of risk management) and monitor the counter-fraud strategy, actions and resources including whistleblowing
 - consideration of the council's assurance framework and whether there were arrangements in place to secure adequate assurance across the Council's operations, that it adequately addressed the Council's risks and priorities as well as the effectiveness of relationships between external audit, internal audit and other inspection agencies or relevant bodies.

Over the last year, has the committee only considered agenda items that align with its core functions or selected wider functions, as set out in the 2022 guidance?

- 11 Generally, the A&G Committee has only considered items that aligned with its core and wider functions for example treasury management. However, it was noted that it regularly receives financial performance and monitoring reports that have already been received and considered by Policy Committee and also receives the annual financial statements for approval (as currently detailed in its terms of reference as a delegated power granted by Council). As detailed in Q3 above, CIPFA's guidance indicates that the Audit Committee should remain an advisory committee and does not recommend that it be delegated decision-making powers such as the approval of the financial statements, which ultimately is the responsibility of all those charged with governance i.e., full Council.

Has the committee met privately with the external auditors and the Head of Internal Auditor in the last year?

- 12 The Chief Auditor usually meets privately with the committee chair on a quarterly basis. External Audit also has the option of private meetings as and when required.

Membership and support

Committee members need to be of high calibre to provide the required level of expertise and understanding and have an appropriate level of influence within the authority. Selection should include consideration of aptitude in addition to relevant knowledge, skills and experience.

Has the committee been established in accordance with the 2022 guidance as follows:

- a. separation from the executive**
- b. a size that is not unwieldy and avoids the use of substitutes**
- c. Inclusion of lay/co-opted independent members in accordance with legislation or CIPFAs recommendation**

- 13 Reading Borough Council operates a Committee system rather than an executive form of governance. Since adopting the Committee system, the Council has continued to appoint a Leader, Deputy Leader and eight other Lead Councillors. The retention of Lead Councillors means there has been a departure from the 'traditional' committee system to what Reading Borough Council describes as a hybrid model of governance. These ten Lead Councillors do not have any executive powers which can be exercised individually or collectively. However, they are all members of the Policy Committee, which is the main decision-making body of the Council. In accordance with the proportionality rules required by the committee system, there are also five councillors on the Policy Committee who are not members of the controlling political group. There is not a directly elected executive Mayor for Reading.

The CIPFA guidance details that authorities should try to ensure that their audit committee is no more than eight members. The A&G Committee currently has eight members so falls within this, although it was noted that this is without independent members. A substitute was used at one meeting in 2020.

There are currently no lay/co-opted independent members on the committee, although it is noted that the Constitution does allow for people to be appointed as co-opted onto committees as long as they do not have any voting rights on the committee.

Have all committee members been appointed or selected to ensure a committee membership that is knowledgeable and skilled?

- 14 No assessment is made on this area without input from Committee members, so an average rating of moderate improvement was assumed.

Has an evaluation of knowledge, skills and the training needs of the chair and committee members been carried out within the last 2 years?

15

No evidence was found of an evaluation of knowledge, skills and training needs of the A&G Chair and committee members being carried out within the last two years.

Have regular training and support arrangements been put in place covering the areas set out in the 2022 guidance?

16

Although A&G Members have been offered a range of training sessions focusing on specific areas within the last year, this has not been held on a regular basis. Audit Committee members should have regular, ongoing training and support to enable them to fulfil their role on the Committee. Training should cover all key areas as identified in the CIPFA guidance, including good governance and ethical framework, partnerships and collaborations, the Annual Governance Statement, targeted support for members where required, updates on new developments/changes at the authority, in addition to updates /refreshers on areas such as risk management, internal controls, financial management, counter fraud and corruption, assurance framework and treasury management.

Across the committee membership, is there a satisfactory level of knowledge, as set out in the 2022 guidance?

17

No assessment is made on this area without input from Committee members.

Is adequate secretariat and administrative support provided to the committee?

18

Secretarial and administrative support is provided to the Committee by the Committee Services Team. There are standing agenda items to be considered and a bring-forward list detailing reports due to be received at forthcoming meetings; senior Officers and the A&G Committee chair and members are asked for their input on the agenda.

The committee ordinarily meets four times per financial year; the only recent exception to this was in 2020/21 when the April 2020 meeting was cancelled due to the onset of the coronavirus pandemic.

Where agenda enclosures or items are restricted, it is stated why they are restricted. There is a provision at the start of the committee meeting for questions from the public, restricted to one agenda item per person. Meetings are also recorded and available on the Council's website after the meeting.

Does the committee have good working relations with key people and organisations, including external audit, internal audit and the CFO?

19

Representatives from external audit and internal audit (Chief Auditor) attend every meeting, together with a senior Finance and a senior Information Governance representative (usually the Director of Finance and Assistant Director of Legal and Democratic Services) and a CIPFA representative in relation to the Finance Transformation Programme. Other Officers (for example the Executive Director of Social Care and Health, the Health and Safety Lead and the Revenues and Benefits Manager) have attended on an ad hoc basis as appropriate.

Effectiveness of the committee

The Audit Committee is an advisory committee that should have sufficient standing within the authority so that its recommendations and opinions carry weight and have influence with the leadership team i.e., CMT, and those charged with governance i.e., full council, and effectively perform its role.

Has the committee obtained positive feedback on its performance from those interacting with the committee or relying on its work?

20

No assessment is made on this area without input from Committee members, so an average rating of moderate improvement was assumed.

Are meetings well chaired, ensuring key items are addressed with a focus on improvement?

21

It should be noted that only a limited assessment has been able to be made in relation to this as the committee chair changed after the 2022 elections, so at the time of our assessment the current incumbent had only been in post for two meetings. However, a review of recordings of the two meetings to date identified that the meetings have been well chaired. There has been clarification about public speaking in meetings and it was also highlighted that the meeting was non-political. The chair kept the public question on track, highlighted the roles and responsibilities of the committee, opened each agenda item to questions and queries, and often had questions or queries of his own.

Are meetings effective with a good level of discussion and engagement from all the members?

22

Review of recordings of the last four committee meetings identified that generally there had been discussion/questions/queries on items; however, questions predominately emanate from the chair.

Has the committee maintained a non-political approach to discussions throughout?

23

No evidence was observed from the meeting recordings reviewed that a political approach to discussions has been taken.

Does the committee engage with a wide range of leaders and managers, including discussion of audit findings, risks and action plans with the responsible officers?

24

The Chief Auditor, representatives from external audit, finance, information governance, CIPFA and the Director of Resources/Deputy Chief Executive are involved regularly in meetings to discuss audit findings, risks and actions. There has been less recent, direct engagement with service managers, Assistant Directors and Executive Directors in relation to audit findings, although the Executive Director of Social Care & Health and the Deputy Director of Commissioning and Transformation had attended a committee meeting to discuss the findings from payments to care providers and voluntary sector payments audits and the interim Assistant Director of Finance had attended a meeting to address findings from finance-focused audits.

Does the committee make recommendations for the improvement of governance, risk and control arrangements?

25

It was noted that whilst this is within the committee's remit, it does not currently exercise this function.

Do audit committee recommendations have traction with those in leadership roles?

26

It was identified that where the committee requests that a director attends a meeting to answer questions and queries on a specific area, this takes place. An example of this was when the Executive Director of Social Care & Health and the Deputy Director of Commissioning and Transformation attended a committee meeting to discuss the findings from payments to care providers and voluntary sector payments audits after a no assurance opinion had been given by internal audit. There appears to be a good relationship between the committee and officers, with a variety of key officers attending meetings on a regular basis

Has the committee evaluated whether and how it is adding value to the organisation?

- 27 The committee has not evaluated its performance at present including whether it added value to the organisation.

Does the committee have an action plan to improve any areas of weakness?

- 28 As no evaluation of committee performance has been conducted to identify possible areas for improvement, no action plan is currently in place.

Has this assessment been undertaken collaboratively with audit committee members?

- 29 At this stage, the assessment has been undertaken by internal audit, although it is proposed that audit committee members are involved and take ownership of the assessment, review and action plan going forward.
-

APPENDIX 2

Policy Committee

10 July 2023



Reading
Borough Council
Working better with you

Title	Food Service Plan 2023-24
Purpose of the report	To make a decision
Report status	Public report
Report author	Katie Heath, Principal Environmental Health Officer, Food & Safety
Lead Councillor	Cllr Ruth McEwan – Education & Public Health
Corporate priority	Healthy Environment
Recommendations	1. That the Committee approve the content of the draft statutory Food Service Plan for 2023-2024

1. Executive Summary

- 1.1. This report sets out the updated Food Service Plan for the period 2023-2024. The Food Service Plan is a statutory requirement for all Local Authorities who undertake official food controls and is detailed within the Food Law Code of Practice set by the Food Standards Agency (FSA). The Food Service Plan outlines the Local Authorities commitment to development of the food service
- 1.2. The FSA set a standard template for the Food Service Plan which must be drawn up in accordance with the FSA Framework Agreement on Official Feed and Food Controls by Local Authorities. The Food Service Plan must include qualitative and quantitative performance reviews of delivery against previous plans and outline how national priorities and standards will be addressed and delivered locally. The Food Service Plan serves to assist Local Authorities in aligning with the principles of good regulation, focus on key delivery issues, provide an essential link with corporate and financial planning, set objectives, manage performance and provide information on service delivery to key stakeholders.
- 1.3. The Local Authority must put in place arrangements for the regular review and update of the Food Service Plan. We find it useful to complete this on an annual basis after the close of year figures have become available (End of April).
- 1.4. It is recommended that the Food Service Plan must be submitted for approval by Members in addition to Senior Officers.
- 1.5. This Food Service Plan outlines the Food Services key achievements for 2022-23 and outlines service objectives and work plans for 2023-24.
- 1.6. There remains a backlog of inspections, particularly Food Hygiene inspections, following Covid-19. At present there is a deficit of resources in order to meet the requirements of the Food Law Code of Practice, clear the backlog of inspections and maintain the required number of inspections and complete other work identified within the Food Service Plan, including statutory requirements that fall to the Food & Safety Team. There is additional work that falls within the remit of the Food Service which is priority and falls outside the scope of the Food Service Plan. Further details on this area is detailed within the Food Service Plan, including full details on the total number of inspections that are due/overdue. We need to constantly prioritise and reprioritise the

work assigned to the Food Service in order to deal with high-risk matters arising and ultimately, we are accountable to the Food Standards Agency (FSA).

2. Policy Context

- 2.1. The FSA is an independent Government department responsible for protecting public health and consumers' wider interests in food. Part of their role is to ensure that local authorities comply with the 'Framework Agreement on Official Feed and Food Controls by Local Authorities'. This agreement details:
- That publicly available local service plans to increase transparency of local enforcement services should be published (i.e. the Food Service Plan).
 - agreed food law enforcement standards for local authorities
 - enhanced monitoring data with greater focus on inspection outcomes and which provides more detailed information on local authority performance
 - an audit scheme aimed at securing improvements and sharing good practice.
- 2.2. The Framework agreement recognises that all Food officers should be correctly authorised and a documented procedure must be in place for the authorisation of officers based on qualifications, competence and in accordance with the Food Safety Act Code of Practice and centrally issued guidance.
- 2.3. Food Officers carry out inspections of food premises, undertake food sampling, investigate complaints about food premises including infectious diseases or food poisoning cases. Environmental Health Officers consider the hygiene of food premises (including operating the Food Hygiene rating Scheme) and ensure that food is microbiologically fit and safe for consumption while Trading Standards and Environmental Health Officers consider food standards. Food Standards includes ensuring food is described accurately and not in a misleading manner as well as ensuring food is not chemically contaminated.

3. The Proposal

3.1. Current Position:

- 3.1.1. As part of the Framework Agreement, the Council submits monitoring data to the Food Standards Agency, this is carried out quarterly with more detailed monitoring provided at the end of the year. Monitoring data is used to form the basis of the Food Service Plan and review of the previous year's performance. It also informs the forthcoming targets and Key Performance Indicators (KPI).
- 3.1.2. The Food Service Plan 2023/24 outlines that within the Borough there are currently 1616 premises producing, retailing or serving food. Over the past 10 years there has been an 480% increase in the number of new food premises registering with the Council. 2022/23 saw a 6% increase on new business registrations from the previous year. As a result, the need to inspect new premises in addition to the existing planned inspections has increased significantly.
- 3.1.3. Throughout 2022-23 the Food Service focussed its resources on carrying out priority work in line with the FSA's Recovery Plan and internal key performance indicators:

Objective	Priority/Source	Target (%)	Set	Achieved (%)	Met/Not Met
Inspection of Food Hygiene Premises risk rated A (due/overdue)	FSA Recovery Plan Corporate KPI	100		100	Met

Inspection of Food Hygiene Premises risk rated B (due/overdue)	FSA Recovery Plan Corporate KPI	100	100	Met
Inspection of Non-Broadly Compliant Food Hygiene Premises risk rated C (overdue)	FSA Recovery Plan	100	100	Met
Inspection of Non-Broadly Compliant Food Hygiene Premises risk rated D (overdue)	FSA Recovery Plan	100	100	Met
Inspection of Food Standards Premises risk rated A (due/overdue)	FSA Recovery Plan Corporate KPI	100	100	Met
Unrated (newly registered) Food Hygiene Premises	Corporate KPI	75	76	Met
Inspection of high risk unrated (newly registered) Food Hygiene premises	FSA Recovery Plan	100	Unable to report. Number outstanding - 33	Not Met
Prioritisation (high/low) of all unrated (newly registered) Food Hygiene Premises	FSA Recovery Plan	100	100	Met
Inspection of Food Hygiene Premises risk rated C	FSA Recovery Plan	100	56	Not Met
Prioritisation of all unrated (newly registered) Food Standards Premises	FSA Recovery Plan	100	0	Not Met
Proactive and reactive sampling for	FSA Recovery Plan	N/A	N/A	Met

food hygiene and food standards				
Reactive enforcement in cases of non-compliance	FSA Recovery Plan	N/A	N/A	Met
Reactive Management of food incidents and food hazards reported to the borough	FSA Recovery Plan	N/A	N/A	Met
Investigation and management of food hygiene and food standards complaints	FSA Recovery Plan	N/A	N/A	Met

Key –

Risk Rating A – These are the premises presenting the highest risk to consumers either from the methods of processing, distribution reach and clientele served, poor levels of compliance or a combination of the above. Food Hygiene premises risk rated A require an intervention/inspection every 6 months. For Food Standards this is every 12 months.

Risk Rating B – the risk rating is again determined through scores awarded under the categories of processing methods, distribution, clientele served and level of compliance. For food hygiene those premises rated B require an intervention/inspection every 12 months.

Risk Rating C – for Food Hygiene these premises require an inspection every 18 months.

Non-Broadly compliant means premises that receive individual scores higher than 10 in any of the three categories of food hygiene compliance, structural compliance, and confidence in management. Premises that are not broadly compliant are provided a Food Hygiene rating score of 0, 1 or 2.

N.B. The risk rating categories are set nationally by the FSA in the Food Law Code of Practice.

- 3.1.4. Please see paras 6.4.2 and 6.4.3 of the Food Service Plan for further details on inspections completed in 2022-23.
- 3.1.5. From the total number of inspections due and overdue in 2022-23 the Food Service achieved 31% of the total number of Food Hygiene Inspections due and 31% of the total Food Standards Inspections due, both excluding new registrations.
- 3.1.6. An increase in the number of non-compliant premises was anticipated. Of those inspections conducted in 2022/23 the number of premises that were found to be non-compliant was 16% for Food Hygiene Premises, a 330% increase in non-compliance overall and 32% for Food Standards Premises. These are both a substantial increase on our general levels of non-compliance (see para 3.1.7 below) and are significant because non-compliant premises require a substantial amount of follow-up intervention and work in order to bring about compliance.
- 3.1.7. The total level of non-compliance across the borough portfolio of 1616 premises is 4% non-compliant for food hygiene and 11% non-compliant for Food Standards. This is an increase of 1% overall for food hygiene and a decrease of 1% overall for Food Standards.

3.1.7.1. Non-compliance for Food Hygiene is categorised as premises that score less than 3 (Generally Satisfactory) against the scoring criteria of Food Hygiene practices, structure and Confidence in Management.

3.1.7.2. Non-compliance for Food Standards is determined as premises that score general failure in current compliance and have little or no basic or technical knowledge of food law.

3.1.8. The current breakdown of food hygiene ratings of food premises (falling within the rating scheme) in the borough is:

Food Hygiene Rating	Descriptor	Number of Premises
5	Very Good	1060
4	Good	266
3	Generally Satisfactory	147
2	Improvement Necessary	33
1	Major Improvement Necessary	25
0	Urgent Improvement Necessary	3

3.2. Options Proposed

3.2.1. The FSA withdrew the Recovery Plan on 31st March 2023 and is encouraging full application of the Food Law Code of Practice for Local Authorities. The Food Service continues to prioritise their resources into higher risk areas of work and will maintain a focus on inspection of A, B and Unrated food hygiene premises and A and unrated Food Standards premises, however this does mean that it will be unable to meet the full requirements of the Code of Practice. The implications of this are:

3.2.1.1. A number of lower risk rated premises (C, D and E) for food hygiene, including some which remain overdue due to service disruption in Covid, will remain uninspected.

3.2.1.2. A number of unrated premises which are categorised as low risk for food hygiene will not be inspected.

3.2.1.3. Lower risk rated premises (B and C) for Food Standards, including a large number of premises overdue an inspection, will remain uninspected

3.2.1.4. Complaints and reactive requests of the service will continue to be triaged resulting in low priority requests not being fully investigated.

3.2.1.5. Escalated enforcement action will be targeted to the most non-compliant premises.

3.2.1.6. We are conscious that the rating of premises shifts over time and that those which have not been inspected for a substantial period may pose a higher risk than implied by their current risk rating.

3.2.2. The Food Service Plan identifies that there remains a deficit of resources to undertake all work allocated to the Food Service. The ongoing workforce review has prevented permanent recruitment to the Team in 2022-23 however contractors were put in place on a temporary basis. In 2023/24 the Food Service will be going out to advert for existing qualified officer posts and will seek to fill the existing Apprentice post that we have been previously unable to fill. There is a profession wide issue with hiring suitably qualified and competent environmental health staff so locally we are reviewing available options including consideration of national initiatives. The full remit of the Food Services work is outlined in Appendix 5 of the Food Service Plan and identifies that with all posts filled there remains a deficit of resources to complete all required work. Due to unfilled

posts the Food Service currently has a salary underspend and contractors will be appointed to assist in the delivery of priority work within the Food Service Plan. Theoretically the short-term resource required to clear the backlog would equate to 18 months FTE for Food Hygiene and 15 months FTE for Food Standards.

- 3.2.3. There are national shortages of qualified officers across a number of professions including Environmental Health. The Food Law Code of Practice requires specified qualification and competency benchmarks to be met in order to undertake areas of work, including interventions of A to D risk rated premises. This presents an ongoing challenging to recruitment and the Food Service has previously struggled to employ experienced and qualified officers.
- 3.2.4. In line with corporate and service priorities the Food Service is supporting and participating in the development and implementation of ARCUS MIS, the back-office system which will help deliver the service. Once delivered, it is anticipated that the system will better support mobile working which in itself will increase the efficiency of the service.
- 3.2.5. The Food Service will continue to prioritise the following key pieces of work which align with the Councils corporate objectives:
 - Carry out a planned inspection programme focussed on high-risk activities which keep consumers safe, whilst supporting the business to improve.
 - Continue to operate a food hygiene and standards sampling programme to support interventions carried out within Reading's premises and ensure that the food sold is safe to eat and not misleading to the consumer whilst supporting wider national programmes to achieve this across England.
 - Continue to advertise our paid advice service for food hygiene and standards within our local community and Reading based businesses.
 - Improving digital access to our Food Service through our webpages and enabling interaction through social media platforms.
 - Undertaking a review of officer authorisations in line with a larger corporate piece on delegations and enforcement to ensure that all officers are appropriately and correctly authorised to carry out their remit of work.
 - Ensuring that all officers are appropriately qualified, trained which documented competency in line with Food Law Code of Practice.
 - Ensuring that the service works to correct and updated standard operating procedures to ensure consistency and to work within the parameters of the Food Law Code of Practice and Practice Guidance.

3.3. Other Options Considered

- 3.3.1. The Food Service is conducting a benchmarking project against regional Local Authorities to ascertain the levels required across the service to deliver the full requirements of the Food Service Plan and to ensure that the delivery of work by its individual officers is optimised.
- 3.3.2. The Food Service has a number of other responsibilities beyond delivery of Food Hygiene and Food Standards Services, this includes but is not limited to investigation of infectious disease, health and safety accidents, sports ground safety work at our designated stadium and regulated stand and registration and inspection of Special Treatments. A number of these work streams are also high priority to ensure the safety of residents and visitors to Reading. A full breakdown of the Service's work responsibilities can be found in Appendix 5 of the Food Service Plan.
- 3.3.3. The Service is risk assessing incoming and existing work in order to focus resources on priority matters.
- 3.3.4. The Service is planning to undertake a project actively targeting our non-broadly compliant premises and improving the food hygiene ratings in Reading. This project will include an educational visit, spot check and food hygiene re-rating inspection.

4. Contribution to Strategic Aims

- 4.1. The Food Service Plan 2023-24 supports the Council's Vision 'To help Reading realise its potential – and to ensure that everyone who lives and works here can share the benefits of its successes at its core. The Service Plan supports and aligns with the following corporate objectives and the Food & Safety Team Plan has prioritised work activities around these objectives:

Healthy Environment	Undertaking food hygiene and standards inspections, revisits to non-compliant premises and enforcement action where necessary. Investigation of food safety, labelling and composition complaints Investigation of allegations of food borne illness and outbreak management. Management of the Food Hygiene Rating Scheme and encouraging higher food hygiene ratings through the re-rating process. Providing advice to existing and potential food businesses Encouraging the adoption of good hygiene practices at all stages of the food chain
Thriving Community	Encouraging the adoption of good hygiene and safety practices at all stages of the food production chain Contributing to statutory consultation on new and existing food businesses Management of the Food Hygiene Rating Scheme and encouraging higher food hygiene ratings through the re-rating process. Providing advice to existing and potential food businesses. Supporting food hygiene and safety at Reading Festival and other local events.
Inclusive Economy	Providing advice to existing and potential food businesses. Providing a paid advice service for complex and bespoke business needs. Responding to complaints and service requests within our statutory response times. Developing our social media and web presence to ensure our services are accessible to all.

- 4.2. These themes are underpinned by "Our Foundations" explaining the ways we work at the Council:

- People first
- Digital transformation
- Building self-reliance
- Getting the best value
- Collaborating with others

- 4.3 Full details of the Council's Corporate Plan and the projects which will deliver these priorities are published on the [Council's website](#). These priorities and the Corporate Plan demonstrate how the Council meets its legal obligation to be efficient, effective and economical.

5. Environmental and Climate Implications

- 5.1. The environmental or climate implications arising from the Food Service Plan 2023-24 or its implementation is 'Net Nil'. Consideration has been given to the potential implications that could arise from this plan and there are no additional points outside of general Council working practice that apply.

5.2. The most significant activity from the plan is inspection activity. The Food Service have access to pooled bus passes and a large number of premises are based within Reading Town Centre where inspections can be carried out by foot. In general, use of public transport and travel by foot or bicycle is encouraged over the use of personal or pool vehicles. Interventions are recorded on paper which requires a copy to be left at the premises at the time of the intervention. The Food Service Plan supports the wider request for mobile working solutions which will reduce the Council's carbon footprint.

6. Community Engagement

6.1. There is no requirement to consult the community on the Food Service Plan.

7. Equality Implications

7.1. Not required. Agreement to and implementation of the Food Service Plan 2023-24 does not have a differential impact on; racial groups; gender; people with disabilities; people of a particular sexual orientation; people due to their age; people due to their religious belief.

8. Other Relevant Considerations

8.1. The work of the Food Service contributes to positive public health outcomes by ensuring that food businesses operating in the borough are required to comply with relevant food law and are safe places for residents and visitors to dine. The Service investigates incidents of infectious disease, complaints and food incidents to ensure that businesses are legally compliant and do not pose a risk to consumers. Where businesses are found to be non-compliant a staged enforcement approach is undertaken to reach compliance. The Service also undertakes health and safety investigation work to reduce the risk to employees and visitors health, safety in welfare, within business.

8.2. The Food Service Plan 2023-24 has due regard for the relevant legal provisions, Food Law Code of Practice and other statutory guidance. The Food Service Plan comments upon regulatory changes that are arising from the European Union (Withdrawal Agreement) Act. Work streams commented on within the Food Service Plan are prioritised in accordance with public health implications.

9. Legal Implications

9.1. The Food Service plan is written in accordance with the nationally agreed Framework Agreement with the FSA. No delegation is required to implement the recommendations of this report or the Food Service Plan. The plan sets out how the authority will meet its statutory obligations.

10. Financial Implications

10.1. The Food Service Plan sets out the service budget and resources required to deliver the Council's statutory services.

10.2. The revenue implications arising from running the service are set out below:

	2022/23 £000	2023/24 £000	2024/25 £000
Employee costs (see note1)	533	528	536
Other running costs	39	42	42
Capital financings costs			
Expenditure	572	570	578
Income from:			
Fees and charges (see note2)	-24	-24	-24
Grant funding (specify)			
Other income	-2	-2	-2

Total Income	-26	-26	-26
Net Cost(+)/saving (-)	546	544	552

- 10.3. There are no capital implications arising from implementation of the Food Service Plan or operation of the Food Service.
- 10.4. The current resource allocation does not permit full delivery of the requirements of the Food Law Code of Practice and other work allocated to the Food & Safety Team. The Team is therefore focussed on delivering an effective service, focussed on risk.

Value for Money (VFM)

The Food Service Plan 2023-24 outlines statutory work required to be undertaken by the Council. The Food & Safety Team Plan, forming appendix 5 of the Plan, details additional non-statutory work which is required to deliver a fit for purpose service. As part of this, revenue generating activities including expanding our paid advice service for local businesses, have been including within priority work.

11. Timetable for Implementation

- 11.1. Not Applicable

12. Background Papers

- 12.1. There are None.

Appendices

1. Food Service Plan 2023-2024
2. Climate and Impact Assessment

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Reading
Borough Council

Working better with you

Food Service Plan 2023-2024

1. FOOD SERVICE AIMS AND OBJECTIVES

- 1.1 The council has a statutory duty to enforce food law, overseen and audited by the Food Standards Agency (FSA). The council must produce a plan setting out how it will deliver its functions. This document aims to discharge the duty for Reading Borough Council and has been written in accordance with the FSA Framework Agreement (Amendment 5), which is based on statutory Codes of Practice.

It is the council's aim to protect the health of residents, visitors and those working in the town through the efficient and effective enforcement of food safety laws in the Borough.

- 1.2 Key to the way the service is delivered is consideration of the five principles of good regulation:

- Targeting, via risk-based approach
- Proportionality
- Accountability
- Consistency
- Transparency

1.3 Objectives

To ensure that standards required by legislation are met and that preventative health measures are adopted and maintained by businesses.

To achieve the key aims, the following objectives have been adopted:

- To prevent unsafe food reaching the public through the application of mandatory duties and discretionary powers.
- To ensure food is correctly labelled and complies with appropriate compositional requirements.
- To direct resources to the highest risk food premises and activities and to improve standards by the effective use of the enforcement powers available.
- To ensure a consistent approach to food inspections by officers.
- To ensure that officers are qualified, adequately trained and competent.
- To highlight bad practice in food businesses.
- To ensure consumers are given information as to the hygiene conditions at food premises in the Borough through the use of the Food Hygiene Rating Scheme.
- To encourage and support the training of food handlers and proprietors of food businesses.
- To encourage and facilitate the improvement of food safety and food standards by the use of a paid service for bespoke advice.

- To proactively respond to changes and proposals for improvement in UK legislation.
- To work with our partners including the UK Health Security Agency.

1.4 Links to Corporate Objectives and Plans

1.4.1 The Council has a number of priorities which sit within the Corporate Plan 2022-2025. The delivery of the Food Service plan links to the following priorities:

Priority	How will we work toward this?
Healthy Environment	<p>Undertaking food hygiene and standards inspections, revisits to non-compliant premises and enforcement action where necessary.</p> <p>Investigation of food safety, labelling and composition complaints</p> <p>Investigation of allegations of food borne illness and outbreak management.</p> <p>Management of the Food Hygiene Rating Scheme and encouraging higher food hygiene ratings through the re-rating process.</p> <p>Providing advice to existing and potential food businesses</p> <p>Encouraging the adoption of good hygiene practices at all stages of the food chain</p>
Thriving Community	<p>Encouraging the adoption of good hygiene and safety practices at all stages of the food production chain</p> <p>Contributing to statutory consultation on new and existing food businesses</p> <p>Management of the Food Hygiene Rating Scheme and encouraging higher food hygiene ratings through the re-rating process.</p> <p>Providing advice to existing and potential food businesses including operation of food hygiene training courses.</p> <p>Supporting food hygiene and safety at Reading Festival and other local events.</p>
Inclusive Economy	<p>Providing advice to existing and potential food businesses.</p>

	<p>Providing a paid advice service for complex and bespoke business needs.</p> <p>Responding to complaints and service requests within our statutory response times.</p> <p>Developing our social media and web presence to ensure our services are accessible to all.</p>
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To achieve this aim, the Food & Safety Team and Trading Standards Team will:

- Inspect food premises and businesses, prioritising and delivering our resources in accordance with the Food Law Code of Practice as far as practicable.
- Participate in the national Food Hygiene Rating Scheme (FHRS) in order to enable members of the public to make informed choices about where they eat or purchase food
- Initiate appropriate enforcement action to secure compliance with the relevant legal requirements
- Prepare, participate and implement national, regional and local sampling programmes for food that is produced, stored, distributed, handled or consumed
- Aim to effectively discharge the Council's statutory duties, functions and responsibilities relating to the enforcement of Food Safety legislation
- Aim to effectively discharge the Council's statutory duties, functions and responsibilities in relation to the control of spread of communicable disease and food poisoning.

1.4.2 The following KPIs are in place for the Food & Safety team for 23-24:

- 100% of Food Hygiene Premises rated A due before 31 March 24 to be completed
- 80% of Food Hygiene Premises rated B due before 31 March 24 to be completed
- 70% of new registrations (those awaiting inspection) to be completed before 31 March 24
- 100% of Food Standards Premises rated A due before 31 March 24 to be completed.

1.4.3 The Council also recognises the risks associated with failing to deliver this plan and this is detailed in the Directorate's risk register. A local risk register can be found within Appendix 5, the Food & Safety Team Work Plan for April 2023 – March 2024.

2. BACKGROUND

2.1 Profile of the Authority

2.1.1 Reading Borough Council was created as a unitary authority in April 1998 and currently has a population of 174,200 (ONS Census 2021). The Unemployment (those claiming job seekers allowance) rate is 4.2% (ONS October 2022) within the town, higher than the national average of 3.8% (ONS February 2023). 77 languages are spoken across Reading. Reading is classed as the 3rd most unequal city in terms of wealth and 5 of our neighbourhoods are within the 10% most deprived in the country.

Reading is an urban authority and the town centre is one of the largest in the South of England, attracting many shoppers and visitors to the area. Reading is a University and college town, with many of the small food businesses around the University do the bulk of their trade during term time.

2.1.2 Manufacturing industry has declined over the years and the area is now the centre of high technology within the Thames Valley. There are no large food manufacturers in the town.

2.1.3 There is excellent access to the road system via the M4 (East/West) and the nearby M3 and A34 (North/South). Reading train station continues to provide excellent transport links to the town including the new Elizabeth line (between Reading and London Paddington) which placed Reading on the TFL underground map. Works remain underway to open a new train station at Green Park, which will improve commuter access to business in that area.

2.1.4 Businesses in Reading utilises its good transport links and close proximity to Heathrow Airport to transfer their raw ingredients and products. There are also UK distribution centres for Waitrose frozen products and Tesco ambient products within the town, further highlighting its excellent geographical location and communication links.

2.1.5 Reading is a market town, the market operating four days per week, and has a flourishing twice monthly Farmers' market where producers from the surrounding locality sell their own produce. There are also 2 weekly food markets as well as an annual chilli festival and specialist food festival.

2.1.6 The town hosts a number of festivals and cultural events which bring visitors and itinerant traders to the area. The most significant music festival is Reading Festival which is the 2nd largest festival in the UK after Glastonbury.

2.2 Organisational Structure

2.2.1 The Council has an approved constitution setting out how the Council operates, how decisions are made and the procedures followed to ensure that these are efficient, transparent and accountable to local people. A copy of the Council's constitution is available at:

[Constitution of the Council October 2022 \(reading.gov.uk\)](https://www.reading.gov.uk/constitutions/constitution-october-2022)

2.2.2 The Scheme of Delegations sets out who is responsible for making decisions, including the authority for the service of enforcement notice. A copy of the Scheme of Delegations is available at:

[200210-Delegations-Register.pdf \(reading.gov.uk\)](https://www.reading.gov.uk/constitutions/200210-Delegations-Register.pdf)

- 2.2.3 The Council operates a Committee Structure, with the Food & Safety Team reporting to the Housing, Neighbourhoods & Leisure (HNL) Committee and Policy Committee. The councillors with responsibility for Food & Safety are the Lead Councillor for Environmental Services and Community Safety and the Lead Councillor for Education and Public Health.
- 2.2.4 Appendix 1 sets out the Team structure of Public Protection. Public Protection sits under the Assistant Director for Planning, Transport and Public Protection within the Directorate for Economic Growth and Neighbourhood Services.
- 2.3.5 The officer with lead responsibility for food matters (and whose contact details have been notified to the FSA) is Katie Heath, Principal Environmental Health Officer, Food & Safety, supported by Rob Abell, Consumer Protection Group Manager and Matthew Golledge, Public Protection Manager.
- 2.3.6 Provisions have been made for the outsourcing of public services including the analysis of food and water samples for composition and microbiology. Please see section 3.5 below.

2.3 Scope of the Food Service

- 2.3.1 The Food & Safety Team deals with food safety, some aspects of food standards relating to caterers, infectious disease, special treatments, safety at sports grounds licensing, statutory planning, building control and licensing consultation and health and safety at work including accident investigation. Trading Standards has responsibility for activities such as food standards relating to manufacturing and retail, fair trading, product safety, metrology, animal health, animal feed, petroleum and consumer advice.
- 2.3.2 As of June 2022 the Food & Safety Team are no longer involved in the Primary Authority Partnership Scheme. This remains an area of work for the Trading Standards Team who continue to provide assured business advice and support in Food Standards matters.
- 2.3.3 The Principal Environmental Health Officer – Food & Safety is responsible for managing the topic area of food within Public Protection. Approximately 50% of the Food & Safety Team is directed at official controls for food safety and approximately 16% of the Trading Standards Service is directed at food standards work (including work allocated through Primary Authority).
- 2.3.4 The Food & Safety Team are currently experiencing significant recruitment and resourcing challenges with only 59% posts filled. This is a slight increase on the number of posts that were in post throughout 22-23 which stood at 56%.
- 2.3.5 The service is based at:
- Public Protection
Floor 1 South Rear
Reading Borough Council
Civic Offices
Reading
RG1 2LU

Tel: Food Safety Enquiries 0118 937 3787

Food Standards Enquiries 03454 040506 (c/o Citizens Advice Bureau

E-mail: consumer.protection@reading.gov.uk

Website: www.reading.gov.uk.

The office is open Monday to Friday from 0900 to 1700 hours. There is no standard emergency out of hours cover available for Food matters except for the Christmas period where the office is routinely closed. emergency 'out of hours' telephone number is 0118 937 3737.

2.4 **Demands on the Food Service**

2.4.1 There are annual variations on demand based on a broad range of factors. The Borough has seen the overall number of businesses increase and there is a relatively high turnover, particularly in the takeaway sector. The table below details the number of food premises contained in each category at the time of writing this plan:

Type of premises	Number of Premises
Primary Producer	0
Manufacturer/Packer	9
Food Importer/Exporter	7
Food Distributor/Transporter	26
Supermarket/Hypermarket	45
Small Retailer	228
Retailer Other	99
Restaurant, Café, Canteen	556
Hotel, Guest House	34
Pub, Club	119
Takeaway	191
Caring Establishment	144
Schools, Colleges	76
Mobile Unit	82
Restaurant, Caterer Other	0

Total	1616
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- 2.4.2 There are currently 7 businesses which have received approval (including conditional approval) under one or more of the product specific regulations. These premises handle a combination of namely fishery products, minced meat & meat preparations, meat products and cold store/rewrapping activities. These premises are inspected in line with their risk rating.
- 2.4.3 There are number of outdoor events per year, mainly during May to September, where Food & Safety staff and/or Trading Standards staff attend and carry out inspections including food inspections and food sampling. These events occur during weekdays and weekends. Attendance at these events is determined by risk and the number of food traders likely to be present. Particular attention is paid to events where food businesses that are due an intervention or yet to have been inspected.
- 2.4.4 Reading Borough Council works in collaboration with Festival Republic at Reading Festival annually. During this period the Food & Safety Team attend site and conduct food hygiene and safety inspections in addition to other safety checks. Throughout the festival weekend the Food & Safety team will typically carry out approximately 150 inspections.
- 2.4.5 The Borough is multi-cultural and contains a wide range of food premises managed and run by many diverse ethnic groups. Many retail premises specifically cater for these populations and many registered home caterers prepare food dishes from their home countries. There are an increasing number of food brokers and the Council is endeavouring to identify them.
- 2.4.6 Many businesses operate outside office hours and in which case will be inspected during those periods.
- 2.4.7 The service has seen a rise in businesses that trade online as part of a High Street model. There is also a trend for customers to order food online from/via Facebook, Amazon, Deliveroo, Uber Eats and Just Eat and have it delivered to their house thus the customer has no idea where the food is produced or where the wrapped food is stored.
- 2.4.8 The service has also seen a rise in businesses trading as 'Dark Kitchens', where a single premises/business trades as multiple business online. This way of trading has an impact on consumer information and raises questions about listings on the food hygiene rating scheme and requirement for businesses to register.

2.5 Regulation Policy

- 2.5.1 The Council has previously adopted the Enforcement Concordat, which has subsequently been updated to the Regulators Compliance Code. The Corporate Enforcement Policy is attached as Appendix 2. This policy is supplemented by a specific food law enforcement policy that can be found in Appendix 3.
- 2.5.2 The Regulators' Code sets out the following main provisions:

- Regulators should carry out their activities in a way that supports those they regulate to comply and grow
- Regulators should provide simple and straightforward ways to engage with those they regulate and hear their views
- Regulators should base their regulatory activities on risk
- Regulators should share information about compliance and risk
- Regulators should ensure clear information, guidance and advice is available to help those they regulate meet their responsibilities to comply
- Regulators should ensure that their approach to their regulatory activities is transparent.

3. SERVICE DELIVERY

3.1 Premises Inspections

- 3.1.1 The Council's general policy is to inspect all food premises that are due for inspection based on the minimum frequency as set by in the Food Law Code of Practice. However, resources will always be directed towards higher risk activities, and this may result in some lower risk activities being delayed. The aim is to ensure compliance with the legal requirements covering the safe handling and production of food, the quality, composition, labelling, presentation and advertising of food and of the materials or articles in contact with food.
- 3.1.2 Following Covid-19 and loss of team resources our inspection services are still facing substantial challenge and we have been unable to complete all tasks required by the FSA Recovery Plan to date. There remains a backlog of overdue and awaiting inspections. There continues to be an increase in newly registered food premises within the borough. The Council is continuing to prioritise work, focussing on high-risk (A & B) unrated and newly registered premises, premises subject to ongoing enforcement action, reactive work and those presenting the highest risk. The Council has been unable to deliver the required milestones of the FSA Recovery Plan and will be unable to carry out all inspections required by the Food Law Code of Practice.
- 3.1.3 As the designated food authority, the Council discharges its duty under the Food Safety Act 1990 and Regulation 2017/625 (retained) by carrying out regular, primary food hygiene and food standards inspections of high-risk premises.
- 3.1.4 The number of new premises that register with the Local Authority is approximately 255 per year making a significant contribution to the number of new premises/ those that have changed ownership on the database. There has been a 480% increase in number of registrations received per year over last 10 years and last year saw a 6% increase from the previous year.
- 3.1.5 The current profile of premises within Reading can be seen at point 2.4.1 above.
- 3.1.6 The Food Law Code of Practice rating scheme is used for Food Safety as well as food Standards.
- 3.1.7 For Food hygiene, 96% of premises are currently rated as 'broadly compliant', a decline in 1% from the previous year. A premises is 'broadly compliant' if none of the individual scores for hygiene, structure or confidence in management

exceed 10. However, inspections which have taken place throughout the past year indicate that currently 16% of premises inspected are not broadly compliant. This figure shows that there has been a 333% increase in the number of non-broadly compliant premises for food hygiene. Non broadly compliant premises are requiring follow up revisits, education and enforcement action.

3.1.8 For Food Standards, 89% of premises are rated as broadly compliant. Premises are considered to be ‘broadly compliant;’ where an individual score for current compliance or confidence in management does not exceed 10. However, inspections which have been carried out across the past year shows that 32% of premises are not considered to be broadly compliant.

3.1.9 The following targets for food premises inspections due to be visited in 2023-24 are:

	Food Hygiene	Food Standards
Category A	100%	100%
Category B	80%	N/A
Category C	N/A	N/A
Category D	N/A	-
Category E	N/A	-
Category Unrated	70%	N/A

3.1.10 There are also a number of food hygiene and food standards inspections that have been given a non-inspectable risk (NIR) score. Examples of these premises include for food hygiene, importers based in the Borough where there is just an office and no storage or distribution of the product in the Borough (food broker) and inspections that are carried out at outdoor events where the trader is registered outside of the Borough.

3.1.11 Category E food hygiene inspections and category C food standards inspections can be carried out via an alternative enforcement strategy or using an official control such as inspection, partial inspection or audit. Where the alternative enforcement strategy is chosen, a visit is made by a Regulatory Support Officer or newly qualified authorised officer who will complete a questionnaire with the business.

3.1.12 Officers will have due regard to the FSA guidelines on the importation of food when carrying out routine inspections, will consider traceability of food products and will be mindful of the implications of food fraud or unauthorised ingredients.

3.1.13 The resource requirements for allocated work is detailed in section 4 below.

Food hygiene

3.1.14 The frequency of food hygiene inspections is determined by the risk rating system stipulated in the code of practice. Risk categories may change if food handling activities change, consumer complaints are received or other non-compliance is identified. The number of inspections due in 2023/24, including those overdue from previous years is:

Category/ Frequency	Number of inspections Due 2023/24
A / at least every 6 months	8
B / at least every 1 year	53
C / at least every 18 months	147
D / at least every 2 years	548
E / Alternative Enforcement Strategy	359
Outside the Programme (incl. Reading Festival)	197
Unrated ¹	65
Total	1,377

¹ This number excludes new premises that will register within the year.

Food Standards – labelling and composition

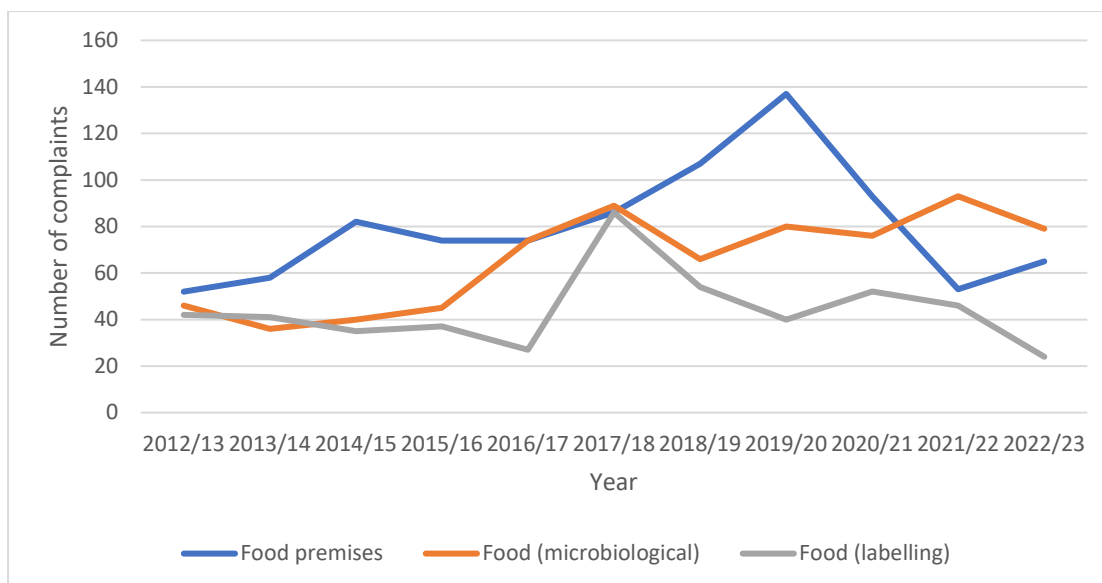
3.1.15 The frequency of food standards inspections is determined by the risk rating system stipulated in the Code of Practice. The number of inspections due in 2023/24 are:

Category/ Frequency	Number of Inspections due 2023/24
A / at least every 1 year	4
B / at least every 2 years	439
C / alternative enforcement strategy	712
Outside the Programme	172
Unrated ¹	284
Total	1,611

¹This number excludes new premises that will register within the year

3.2 Food Complaints

- 3.2.1 There is a documented food complaint procedure. All food complaints are investigated in accordance with the Food Law Code of Practice, practical guidance and in-house procedures. Complaints that are identified as posing an immediate risk to health are responded to within one day. Other food complaints are investigated and responded to within 5 working days. The Primary Authority/home authority principle is employed where the food is manufactured in another borough.
- 3.2.2 The graph below details the trends for food complaints received since 2012/2013:



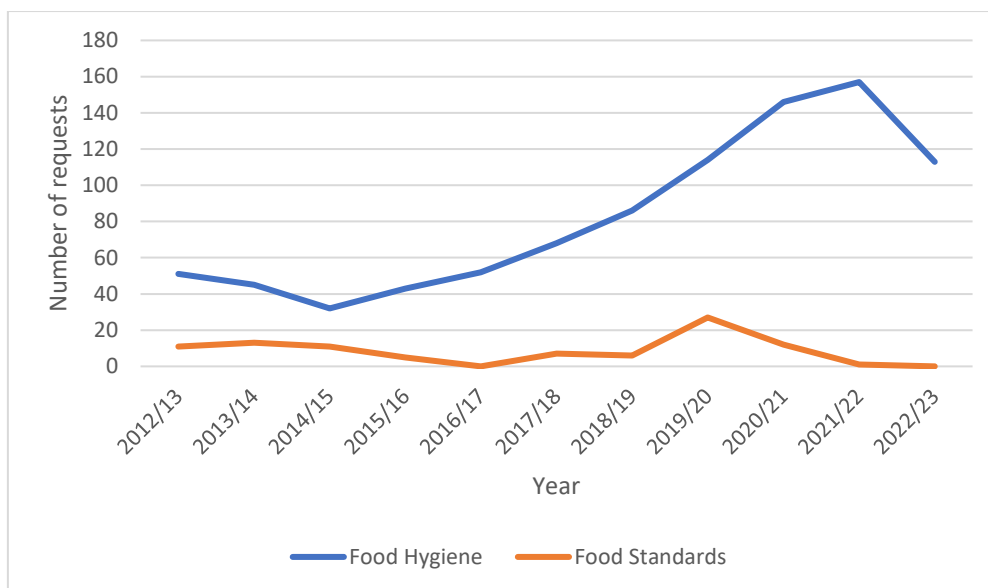
3.2.3 Estimates for this year suggest the figures for microbiological food will remain broadly constant, labelling complaints are likely to continue to reduce whilst the number of complaints about food premises rather than food will continue to rise.

3.3 Advice to Business

3.3.1 The enforcement policy states that the Service will provide advice to businesses in the first instance to assist them in complying with the law and to help them maintain high standards of food safety or standards.

3.3.2 Businesses can contact the Food & Safety Team, where they will be directed to advice leaflets and other information available on the website. If the food business operator requires further advice, a paid for service is offered.

3.3.3 The number of service requests from businesses for advice on food and drink are detailed in the graph below. A substantial amount of business advice is provided during routine interventions and is not accounted for within these numbers:



3.3.4 It is anticipated that the number of requests for food hygiene advice will continue to increase. Food standards advice requests have declined over recent years, therefore review of how this service is advertised and how we record this information would be beneficial.

3.4 **Food Sampling**

3.4.1 Food samples are taken in accordance with the authority's sampling procedure and the joint annual sampling plan. Sampling programmes have been developed and implemented to:

- Assess the microbiological quality of food produced and offered for sale;
- Determine the compositional standards and descriptive integrity of food.

3.4.2 The sampling plan reflects the following requirements:

- (i) the procurement of samples taken during food hygiene and food standards inspections, taking into consideration the FSA guidelines for imported food and feed controls.
- (ii) specifically targeting foods produced and distributed nationally, from producers and manufacturers based in Reading.
- (iii) in response to consumer and business complaints regarding food standards and food hygiene, and
- (iv) the participation in agreed national, regionally co-ordinated and local sampling programmes and in particular projects concerning imported foods.
- (v) Information received via the International Food Safety Authority Network (Infosan) distributed by the FSA.

3.4.3 The plan may be changed from time to time during the year to reflect new or changes in legislation and other local or national issues of concern.

3.4.4 Food samples are procured in accordance with the Code of Practice and legislation as appropriate.

3.4.5 Samples for microbiological analysis are sent to the food examiner at:

UKHSA
Food, Water and Environmental Microbiology Services, Porton
Porton Down
Salisbury
SP4 0JG
Tel 01980 616766

3.4.6 Samples for chemical and compositional analysis are sent to the Public Analyst at:

Hampshire and Kent Scientific Services
Hyde Park Road
Portsmouth
Hampshire
PO5 4LL
Tel. 023 9282 9501

Food Safety – Microbiological Sampling

- 3.4.7 Resources are allocated through the UK Health Security Agency. Microbiological food sampling projects are co-ordinated within the sampling county liaison group. The Porton laboratory carries out the analysis of the samples.
- 3.4.8 For 2023/24 the food sampling budget for microbiological analysis will be approximately £6,000.00 which is held on account by UKHSA. We are still awaiting confirmation of the final award.
- 3.4.9 We will continue to participate in proactive national and regional sampling programmes which align with our premises and priorities. A target of 120 microbiological samples is in place for this year, including samples taken as part of these studies. Reactive samples will be carried out on a risk basis.
- 3.4.10 There are 12 private water supplies in Reading. Most are considered low risk. Two of the boreholes are boreholes that supply a large quantity of people. Sampling is carried out by their commercial owners whilst the other 10 boreholes are for single dwellings.

Food Standards Quality and Compositional Sampling

- 3.4.11 Trading Standards manages a coordinated annual sampling programme through Trading Standards Southeast Group (TSSE) and a local sampling programme. Any local sampling is shared with TSSE and other members of the group are invited to also take part in the sampling.
- 3.4.12 There is no set budget for Food Standards Sampling. Sampling is purchased through our agreement with HKSS.
- 3.4.13 There has been a decline in available grants and sampling projects ran by the FSA over the past year, the Council is currently not participating in any active projects and was allocated minimal funding for imported food sampling in 2022/23. The Council will continue to participate in relevant campaigns ran by the Public Analyst, subject to funds being available and will bid to participate in relevant sampling programmes and campaigns throughout 23-24, including Operation Opson.

3.5 Investigation of Outbreaks and Control of Food Related Illnesses and Infectious Diseases and Food Poisoning Outbreaks

3.5.1 The Service investigates all notifiable food poisoning incidents and outbreaks associated with food occurring in Reading. Officers will liaise with the Consultant in Communicable Disease Control (CCDC) in the investigation of diseases or outbreaks and where it is necessary to exclude infected persons from work or children from school in accordance with the Berkshire Joint Infectious Disease Outbreak Control Plan (2013).

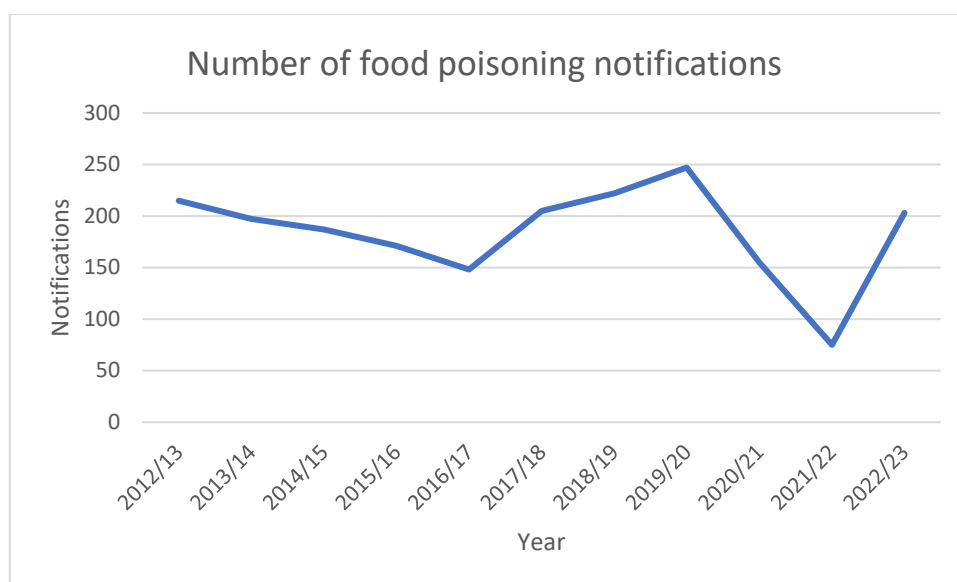
3.5.2 Investigations into infectious disease aim to:

- (i) Determine whether the infected person works with food or cares for others particularly if the others are a vulnerable group.
- (ii) Identify the source of infection
- (iii) Prevent spread or reoccurrence of the infection
- (iv) Take formal action in appropriate cases where breaches of food legislation have contributed to a food poisoning outbreak
- (v) Provide information to affected persons.

3.5.3 The target for response is as follows:

Food Poisoning outbreaks	100% in 1 day
Food Poisoning (cases)	100% in 2 days

3.5.4 The annual number of food poisoning notifications are detailed below:



3.5.5 It is anticipated that the number of notifications for 2023/24 will increase to pre-pandemic levels.. The Local Authority is only called upon for cases of lower risk food poisoning such as Bacillus cereus, Clostridium, Giardia, Salmonella and Shigella as well as to assist TVPHE in finding the source of other cases such as Cryptosporidium.

3.5.6 The number of outbreaks is projected to increase as genome typing of bacteria continues to link cases nationwide, which previously had no common themes.

3.6 Food Safety Incidents

3.6.1 All food safety incidents are dealt with in accordance with the Food Safety Act, Code of Practice and Practical guidance on food hazards and the procedure for food safety incidents. The team is committed to responding to appropriate notifications of food hazards and working with the FSA and food businesses to ensure that food is safe to eat.

3.6.2 The team will receive Food Alerts (FAFA), Product Recall Notices (PRIN) and allergy alerts via an automated daily or weekly digest email alert. The Lead Food Officer or Senior Officer in charge will determine what action needs to be taken on the Food Alert. Generally, such situations are dealt with through voluntary co-operation or surrender of the food.

Food Fraud

3.6.3 The Council is committed to detecting fraudulent activity. This includes various illegal acts committed for economic gain including false labelling, establishments operating illegally, illegal importation of foods and diversion of meat products into the animal feed chain via the bakery production.

3.6.4 Whistle-blower, anonymous complaints or partial information is taken seriously and collated or followed up.

3.7 Liaison with Other Organisations

3.7.1 Arrangements are in place to ensure consistency with other organisations and by officers delegated to represent the Council. This is achieved through membership of local specialist groups.

3.7.2 The Lead Food officer or nominated deputy will attend and participate in the Berkshire, Buckinghamshire and Oxfordshire Food Safety & Health and Safety Liaison Group (BOFSLiG) that meets three times per year. A member of this group attends the National Food Hygiene Focus Group.

3.7.3 The officer with specialist responsibility for sampling attends and participates in the Berkshire Food Sampling Group.

3.7.4 The Trading Standards food specialist or lead food officer attends and participates in the Regional Food Focus Group of TSSE which meets 2 times per year.

3.7.5 The service has regular contact with professional bodies, the Chartered Institute of Environmental Health and the Trading Standards Institute as well as the national regulators FSA and OPSS and will participate in relevant forums as they are available

- 3.7.6 For imported or exported foods, the team liaises with relevant port of entry local authorities where action is required as well as the Animal & Plant Health Agency (APHA).
- 3.7.7 A representative for the Food & Safety Team sits on the Safety Advisory Group (SAG) which covers all festivals and community events within the town and offers support or advice regarding food safety.
- 3.7.8 Officers within the team liaise with Planning and Building Control services as a statutory consultee for Food & Safety matters, providing advice to the teams and applicants regarding food safety matters accordingly.

3.8 Food Promotion/ Projects

Food Hygiene Rating Scheme

- 3.8.1 The Authority has run and issued awards for good standards of hygiene in food premises since 1975. In 2011 the authority joined the national Food Hygiene Rating Scheme (FHRS) run by the FSA. The rating is given at the end of routine or partial inspections in the form of a window/wall sticker including information about the scheme and how their rating is made up. The information is uploaded to the website approximately once every 2 weeks. Premises can request a revisit if they are not satisfied with their rating or lodge an appeal with the Lead Food Officer. On payment of a fee another full inspection will be carried out within 3 months.
- 3.8.2 Since 1999 the Food & Safety team has successfully run, in collaboration with Festival Republic and Central Fusion, a separate Alfresco Award for the food traders at Reading Festival. In 2011 the award was expanded to encompass the principles of the Food Hygiene Rating Scheme and a sticker unique to Reading Festival was designed. Each year any traders achieving 5 rating will be given a unique Reading Festival wall sticker for the duration of the festival and nominated for one of three Al Fresco Awards (Bronze, Silver or Gold). All food traders are inspected at the festival. The cost of this work is funded by the festival organisers. The festival organisers and food service contractor take great interest in the total number of traders in each food rating category and traders who achieve two or less are scrutinised before being allowed to return to the festival in the following year. Al Fresco Award winners are given incentives to attend the following year's festival such as a free pitch at the next year event.

Food Hygiene Education

- 3.8.3 The Authority provide written and verbal advice to food businesses and members of the public upon request and information on common matters can also be found on the authority's webpages. The Authority is not currently running any food hygiene training courses.
- 3.8.4 The Authority have a paid advice service whereby businesses can pay to receive bespoke food hygiene advice to their business, including a site visit, or bespoke food standards/labelling advice.

Improving Food Hygiene Compliance

- 3.8.5 Following a decline in the standards of premises for food hygiene and an increase in the number of non-broadly compliant premises further focus to

improve these premises is required. The Team currently carry out further interventions to assess compliance of these premises and where necessary will undertake enforcement action, including the service of legal notices in order to achieve compliance. The Authority have a paid FHRS re-rating visit scheme and also have a paid food hygiene advice service which is available to businesses. The Authority intend to implement and promote and extension to these schemes whereby businesses can take advantage of an improvement package, this will provide a combination of a paid advice bespoke to the business, pre-rerate spot check and FHRS re-rate visit.

Allergen Information and controls

- 3.8.6 Inspection activity over the past year has demonstrated a decline in broadly compliant premises for Food Standards, areas of non-compliance are predominantly the provision of allergens information, including information provided through PPDS requirements. Further work is required to improve the level of compliance with provision of allergen information to ensure that the local community can make informed choices about the food they buy. Advice is provided directly to businesses during inspection interventions and advice leaflets have been produced and are shared with businesses. Further promotion of these requirements can be disseminated via social media communications. Revisits to assess progress and compliance can be aligned with revisits to non-broadly compliant food hygiene premises however where non compliance is continuing then staff will be supported and encouraged to carry out enforcement action, including service of Improvement Notices.

3.9 Challenges

Cost of Living Crisis

- 3.9.1 The country is facing unprecedented challenge in the cost of living which is affecting consumers and businesses. Supported by recent inspection activity businesses are struggling with rising costs that are impacting on their financial resources and willingness to undertake improvements to comply with requirements under food legislation. This is having a significant impact on the increase in enforcement activity that is required to secure compliance.

Retained EU Law

- 3.9.2 The retained EU law currently in place will be automatically revoked at the end of 2023 unless primary legislation. The EU law which provides detail to food hygiene and standards requirements is not primary law and will therefore be revoked at the end of 2023. There is currently no update or detail available as to whether and how food hygiene and standards provisions will be adopted and implemented going forwards. This creates uncertainty for regulation of business and statutory requirements for Local authorities.

Management Information System (MIS)

- 3.9.3 The authority is currently working to set up and implement a new MIS. Arcus will replace the existing Civica MIS across all services including Food Hygiene and Food Standards. This is a Directorate priority. A member of the Food & Safety Team is currently seconded to this project and further resource and support will be required across the team to provide information, generate template documentation and test the system. The new MIS is due for

implementation in February 2024 which may have a detrimental impact on the authorities statutory reporting capabilities for this year.

Food Standards Delivery Model

- 3.9.4 The new food standards delivery model is due for implementation throughout the year. A phased implementation approach is being rolled out by the FSA and no fixed date for implementation has been provided to RBC to date. The new delivery model will update the risk rating approach undertaken by authorities and has added allergens as a separate category. The new risk rating will provide for an intervention period, based on risk, between 1 month and 10 years as opposed to the current variation of 1 to 3 years, this will provide a structure to increase interventions for high risk and non-compliant premises. Implementation of the new model will require transfer of all premises and intervention data to the new risk rating and scores affixed appropriately. There are currently no MIS modules in place to complete this with. Transfer of data to the new model may increase the number of high-risk premises requiring more frequent interventions. The authority currently has a large number of overdue interventions and an outstanding backlog of unrated premises (including some premises incorrectly recorded as outside of scope) that will require review and prioritisation.

Other Priorities

- 3.9.5 The Food & Safety Team have responsibilities beyond food hygiene and standards. This includes health and safety accident investigation, sports ground safety and special treatment premises. Enforcement of these matters shares the same pool of officers.

4. RESOURCES

4.1 Financial Allocation

The budget for Food & Safety in 2023/24 is £570,000.00 (gross) / £544,000.00 (net). This excludes some Food Standards inspection and complaint work which falls under the Trading Standards budget but does provide for Food Standards Sampling. The Food & Safety budget also covers the provision of other, non-food related work, including safety at sports grounds licensing, special treatments licensing and health and safety enforcement. Financial provision for legal action as part of our enforcement policy is provided centrally and is not included in the above budget.

4.2 Staffing Allocation

- 4.2.1 The Food & Safety team has an allocation of 9.24 FTE (including management). Of these 4.9 FTE are allocated to Food Hygiene work and 2.3 FTE for Food Standards, a further 0.5FTE is provided by the Trading Standards team for Food Standards work. At present there are 2.6 FTE in post (including temporary contracts) for delivery of Food Hygiene work and 1.56 FTE in post for Food Standards work. Public Protection is continuing to undergo a workforce review, moving into phase 3 a review of all job roles under the Principal posts will be carried out. For the duration of this workforce review the team is unable to permanently recruit to vacant posts. The timescale for completion of the workforce review is November 23. The team carry out the full spectrum of food hygiene, food standards, infectious disease, health and safety, special

treatments and certain forms of licensing activities. Officers in the team are broadly multidisciplinary, however certain aspects of their role such as the inspection of high-risk premises are restricted based on their competency and qualifications. For example, an Environmental Health Officer who has not reached specific competency criteria will not be able to prohibit a food premises from operating. This allocation does not include Business Support functions and those officers allocated to carry out that work. There is currently approximately 1 FTE allocated to this work which includes processing food business registrations, inputting and allocating service requests and inputting food hygiene inspections on our MIS.

- 4.2.1 As part of the planning process for ensuring that the Council meets its statutory duties, it must ensure that it has sufficient staffing capacity to deliver its inspection and enforcement programmes. Based on a percentage of each officer's time being spent on food hygiene activities only and including factors such as maternity, part time working hours, competencies etc, there are currently 2.6 FTE officers available against an estimated need of 8.03 FTE for food hygiene. Please see Appendix 5 for further detail on the Food & Safety Teams work priorities and resource requirements. Unfortunately, due to the ongoing workforce review the Council has been unable to recruit to vacant posts across the past year and typically struggles to recruit qualified and competent officers due to national shortages of qualified Environmental Health Officers. The Council did not fully meet the requirements of the FSA's Recovery plan in 2022/23 with respect to Food Hygiene. Due to the current level of resourcing and other challenges (see section 3.9) the Council will be unable to deliver the full requirements of the Code of Practice for inspection schedules of both food hygiene and food standards in 2023/24.

4.3 Staff Development Plan

- 4.3.1 One to one meetings are held for all officers approximately 6-8 times per year where professional and personal development is discussed and encouraged. An annual review is held with each officer once per year. Training and development needs are included in one to ones and annual reviews. Officers are required to complete 20 hours CPD (30 for Chartered Environmental Health Practitioners) of which 10 hours must be carried out in food related matters as specified in the Food Law Code of Practice.
- 4.3.2 Due to changes in circumstances of our staff and greater part time working the Council continues to invest in online training (ABC Food Law) for staff in order to ensure that they meet their CPD requirements.
- 4.3.3 Consistency training for use of the Food Hygiene risk rating scheme will be undertaken as part of the FSA national consistency exercise. Additional consistency training is carried out throughout the year, including specific consistency relating to Reading Festival inspections.
- 4.3.4 Courses will be undertaken according to officer specialisms, as the course becomes available, and according to officer training plans and service needs

- 4.3.5 Newly appointed staff are subject to a Council wide probation scheme and must complete a practical training log within the Team before they are deemed competent and authorised accordingly.
- 4.3.6 Following the change to the Food Law Code of Practice the Council identified that it needs to undertake a review of its staff competency requirements in food hygiene and standards and in line with changes to Council delegations and authorisations. This work was scheduled for 2022/23 but was unable to be carried out, it remains a priority for 2023/24.

5. QUALITY ASSESSMENT AND INTERNAL MONITORING

- 5.1 The Council does not hold any external accreditation, however it conducts a rigorous monitoring procedure to ensure the national and local performance indicators it has set itself are specific, measurable, achievable, realistic and targeted to achieve best value.

The monitoring of the plan is conducted by:

- (i) Regular (minimum bi-monthly) monitoring of achievement of targets, actions and time taken by team managers or delegated officers.
 - (ii) Quarterly monitoring reports and updates to the Group and Service Managers.
 - (iii) Submission of food hygiene and food standards statistical returns to the FSA
 - (iv) Regular one to one meetings
 - (v) Annual reviews of staff
 - (vi) Publication of annual performance achievements
 - (vii) Checks of accuracy of improvement and prohibition notices served.
 - (viii) Ad hoc shadowing of staff to check consistency and review of inspections.
- 5.2 As part of its wider commitment to customer service the Council is taking part in a council wide customer excellence programme to review and streamline its services and to ensure that they are accessible to all.

6. REVIEW

- 6.1 The annual performance achievement is compared with the target set and any underachievement is explored and the appropriate action taken.
- 6.2 The Council is still recovering from the impact of Covid-19 on its services and interventions, as required by the Code of Practice, will continue to be impacted throughout the period 23-24.
- 6.3 The data below details the performance that was achieved in 2022/23.

6.4 Number of Inspections

6.4.1 Where a KPI or target in the Recover has been allocated to the team this has been included in the information below.

6.4.2 Food Hygiene

	Achieved inspections 2021-22	% Of inspections achieved 2021-22	Achieved inspections 2022-23	% Of inspections achieved 2022-23	Target in line with KPI's / Recovery Plan
Premise Rating - A	2	100%	4	100%	100%
Premise Rating - B	28	88%	35	100%	100%
Premise Rating – C	48		148	56%	100%
Of which C – Not Broadly Compliant			13	100%	100%
Premise Rating - D	63		48		
Of which D – Not Broadly Compliant			6	100%	100%
Premise Rating - E	5		14		
Premise Rating - Unrated	124		185 ¹	87%	75%
Premise Rating - Outside	128		153		
Total proactive interventions	398				
Number of revisits	39 ²		69		
Total Interventions	437		674		

¹ As at 01/04/22 there were 212 unrated premises due for inspection. A total of 185 unrated premises have been inspected throughout the year. Throughout the year 294 new premises registered and as of 01/04/23 there are a total of 65 unrated premises still awaiting inspection. The numbers do not account for premises that have registered and been subsequently closed due to not trading.

² This includes revisits carried out at premises outside the scope, i.e. Reading Festival.

6.4.3 Food Standards

	Achieved inspections YTD 2021-22	% Of inspections achieved 2021-22	Achieved inspections 2022-23	% Of inspections achieved 2022-23	Target in line with KPI's / Recovery Plan
Premise Rating - A	4	100%	3	100%	100%
Premise Rating - B	75		115		
Premise Rating - C	60		99		
Premise Rating - Unrated	111		195		

Premise Rating - Outside	19		N/A		
Total proactive interventions	250		412		
Number of revisits	4		5		
Totals	257		417		

6.4.4 Formal Actions

During the period 2018 to 2023 the authority took the following enforcement action:

Enforcement Type	2018/19	2019/20	2020/21	2021/22	2022/23
Voluntary closure	2	0	1	1	2
Seizure, detention & surrender of food	1	2	0	1	2
Suspension/revocation of approval or licence	0	0	0	1	0
Emergency prohibition notice	2	3	0	0	2
Prohibition order	1	3	0	0	1
Simple caution	0	0	0	0	0
No of premises where Improvement notices served	16	11	0	2	5
No of Hygiene Improvement notices served	30	21	0	7	12
No of FIR Improvement notices served	0	1	0	0	0
Remedial action & detention notices	0	1	0	0	0

Written warnings (Food Hygiene)	655	910	129	381	621
Written warnings (Food Standards)	32	75	35	84	117
Prosecutions concluded	1	1	0	0	0

6.4.5 Food Sampling

The following shows the number of samples hygiene and compositional taken and unsatisfactory.

	Number of Food Hygiene Samples	Number of unsatisfactory results	Number of Food Standards Samples	Number of unsatisfactory results
2017/18	63	22	46	19
2018/19	65	23	23	13
2019/20	29	8	30	20
2020/21	42	3	14	4
2021/22	11	0	27	19
2022/23	109	27	13	4 ¹

¹ N.B. Not all results have been received to date.

6.4.6 Food Promotional Activities

The number of inspections carried out at Reading Festival in 2022 have been included in the table above at para 6.4.2. 142 Premises inspections were conducted for food hygiene including all customer facing premises trading within the festival site. The Council undertook two contravention revisits in addition to this with the remainder passed to Reading Festival to carry out this year.

6.5 Variations from the Service Plan

6.5.1 The following items were not met from the 2022/23 service plan and remain outstanding:

- The Council were unable to meet the full requirements of the FSA recovery plan and has not been able to achieve 100% of C food hygiene inspections that were due at 01/04/2022. The FSA recovery plan requested that Local Authorities

move quicker than the plan where possible. It has not been possible to achieve this and little progress has been able to be made into D and E rated food hygiene inspections.

- The FSA recovery plan was unclear as to whether specific actions were required to prioritise unrated food standards premises for inspection. The Council has not carried out prioritisation of unrated food standards premises and had an existing backlog of these premises awaiting inspection prior to Covid-19. Where possible food standards inspections have been carried out at all due premises in conjunction with food hygiene inspections. High risk 'A' rated premises for food standards have been inspected as required by the recovery plan. It has also been identified that the number of unrated premises for food standards is larger than anticipated as a number of premises have been historically miscoded as 'outside of scope'. We are seeking to correct this as we progress through our inspections.
- Internal monitoring of officers has not been fully carried out in accordance with the authority's protocols.
- A number of policies and procedures continue to require updating.

6.6 Areas of Improvement

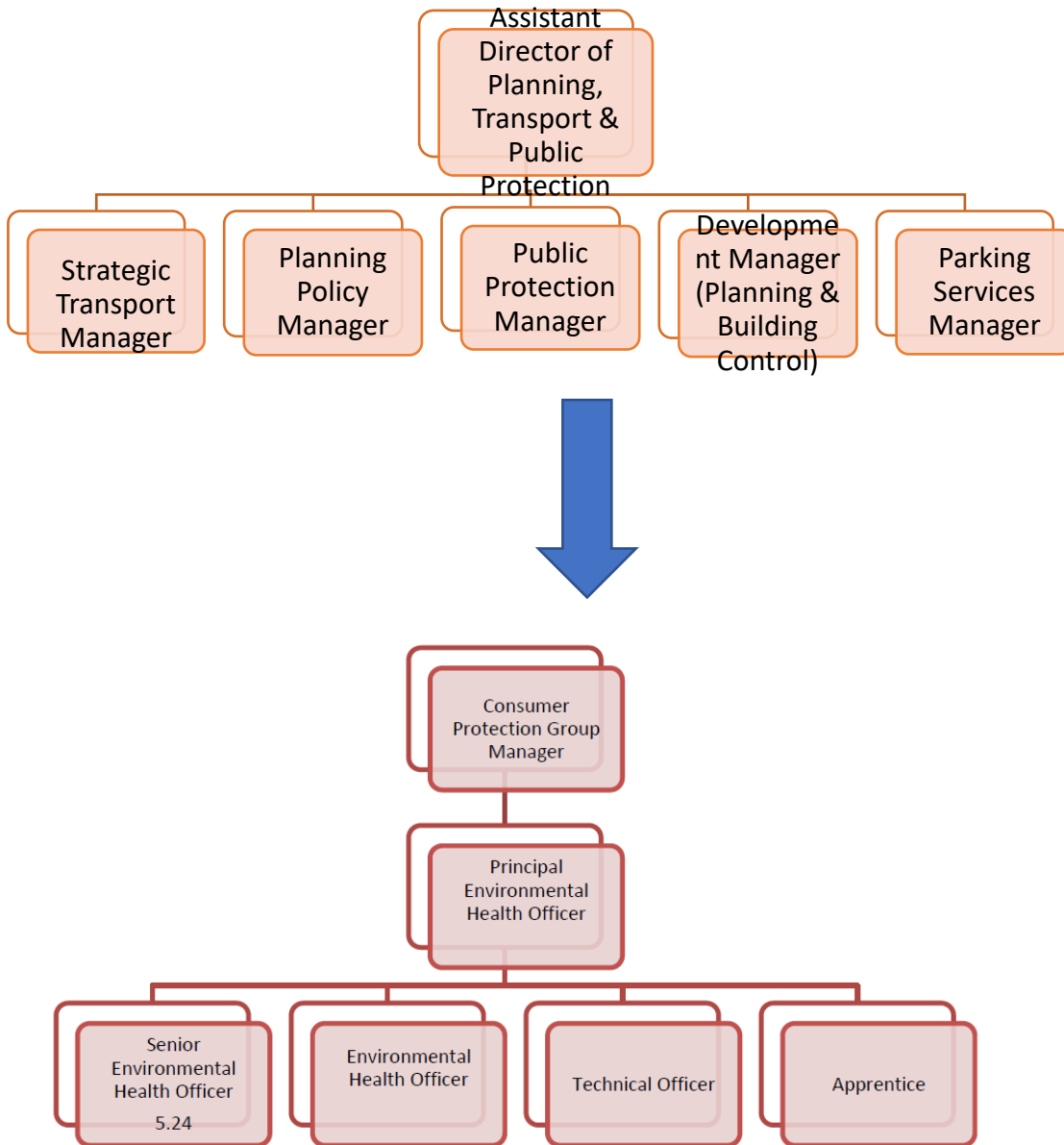
- 6.6.1 As identified above we continue to have deficiencies in the status of policies and procedures in comparison to the Food Law Code of Practice. This is an area where improvement is required, including ensuring that the correct policies and procedures are in place and that those in place are up to date.
- 6.6.2 Further improvement is required in the implementation of internal monitoring procedures to ensure that the council is able to meet the requirements of its protocols and to ensure that officers are appropriately monitored.
- 6.6.3 Further improvement is required in the implementation of the Competency Framework for officers that started with the authority or changed roles within the authority after March 2021.
- 6.6.4 An area of improvement which is underway is to review and update the scheme of delegations and authorisations for officers to exercise their powers. Coinciding with this a review and update of the Council's enforcement and prosecution policies are being carried out.

7.0 Approval

- 7.1 This plan, including its appendices, has been agreed by the Public Protection Manager and Assistant Director for Planning, Transport and Public Protection.

Appendix 1

Public Protection Structure Chart



APPENDIX 2

Corporate Enforcement Policy

Reading Borough Council Corporate Enforcement Policy

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Reading Borough Council

CORPORATE ENFORCEMENT POLICY

1.0 INTRODUCTION

- 1.1 Fair and effective enforcement is essential to protect the economic interests and health and safety of the public, businesses and the environment. This Policy sets out what businesses and individuals being regulated by the Council can expect from Enforcement Officers.
- 1.2 This Policy commits the Council to good enforcement policies and procedures.

2.0 STATUS OF THE ENFORCEMENT POLICY

- 2.1 The Corporate Enforcement Policy was first approved by the Cabinet of Reading Borough on 20th March 2006, and was revised in 2009. The current version of the Policy is effective from February 2012.
- 2.2 In addition to this Corporate Policy, some individual Service Areas may have specific Enforcement Policies relevant to their work.

3.0 SCOPE AND MEANING OF ENFORCEMENT

- 3.1 This Policy applies to all the legislation enforced by officers of the Council.
- 3.2 Enforcement includes any action taken by officers aimed at ensuring that individuals or businesses comply with the law. This is not limited to formal enforcement action such as prosecution; it also includes, for example, the inspection of premises for the purpose of checking compliance with Acts of Parliament or Regulations.

4.0 NEED FOR AN ENFORCEMENT POLICY

4.1 A clear enforcement policy ensures that:

- (a) all those who live and work in Reading are able to have a clear understanding of the Corporate Policy covering the Council's enforcement functions.
- (b) all statutory notices issued by the Council are checked by an experienced officer for appropriateness, legal validity, content and technical information;

- (c) any information given to a business, landlord or individual, whether written or verbal, clearly identifies those requirements which are mandatory and those which are advisory;
- (d) any enforcement action is proportionate to the risks involved; and
- (e) officers follow a consistent approach to enforcement.

5.0 LEGAL PROVISIONS

5.1 The following legislation and guidance will be taken into account in the enforcement activities of the Council:

- a) The Enforcement Concordat (adopted by the Council on 14 March 2000)
- b) Legislative and Regulatory Reform Act 2006
- c) Regulatory Enforcement and Sanctions Act 2008
- d) Regulation of Investigatory Powers Act 2000
- e) Police and Criminal Evidence Act 1984
- f) Criminal Proceedings and Investigation Act 1996
- g) Freedom of Information Act 2000, Data Protection Act 1998 and Environmental Information Regulations 2004
- h) Human Rights Act 1998
- i) Local Government Acts
- j) Race Relations Act 1976 and Equality Act 2010
- k) Crime and Disorder Act 1998
- l) Other relevant Acts e.g. Public Health Acts, Housing Acts, Anti-Social Behaviour Act 2003, Criminal Justice and Public Order Act 1994, Clean Neighbourhoods and Environment Act 2005, Proceeds of Crime Act 2002, Localism Act 2011 etc.
- m) The Code for Crown Prosecutors
- n) Home Office Guidance on use of simple cautioning
- o) Local Service Plans
- p) Guidance from the Local Better Regulation Office
- q) Regulators' Compliance Code

Any other relevant Governmental Guidance or professional advice

6.0 GENERAL PRINCIPLES

6.1 Each case is unique and must be considered on its own merits. However, there are general principles that apply to the way each case must be approached. These are outlined in this Policy, and are based on the Enforcement Concordat, which was adopted by the Council on 14th March 2000. The Concordat is a voluntary Code of Practice developed by the Government in

partnership with local authorities and representatives of consumer and business interests.

The Enforcement Concordat contains the following principles:

- (a) **Standards:** set clear standards for the level of service and performance which the public and businesses can expect to receive;
 - (b) **Openness:** provide information and advice in plain language on the legislation and rules the Council applies, and disseminate this as widely as possible;
 - (c) **Helpfulness:** actively work with businesses and individuals, especially small and medium sized businesses, to advise on and assist with compliance; and provide an opportunity for discussion and for compliance before formal enforcement action is taken
 - (d) **Complaints about the Council's enforcement service:** provide well publicised, effective and timely complaints procedures which are easily accessible to businesses, the public and community groups;
 - (e) **Proportionality:** minimise the costs of compliance for businesses by ensuring any enforcement action required is proportionate to the risks; prosecute when appropriate
 - (f) **Consistency:** carry out our duties in a fair, equitable and consistent manner.
- 6.2 In addition to the principles of the Enforcement Concordat, the Council is required to carry out its regulatory activities relating to trading standards, environmental health and licensing in a way which is consistent, transparent, accountable, proportionate and targeted, in accordance with the Principles of Better Regulation.
These principles underpin how Reading Borough Council's regulatory services work with businesses. The Council sees businesses - whether compliant or not - as its customers, and builds appropriate relationships. Any advice and support given to customers is authoritative and accessible, focussing on the needs of specific business sectors.
- 6.3 The Council will also have regard, where appropriate, to the priority regulatory outcomes published by the Local Better Regulation Office, which is a statutory body set up in 2008 to improve enforcement and regulatory activity in certain sectors. It has a statutory duty to specify matters to which local authorities must give priority when allocating resources, and is responsible for publishing priority regulatory outcomes, which assist local authorities in focussing their enforcement activities.
- 6.4 The Council is also under a duty to have regard to the Regulators' Compliance Code, which again applies to trading standards, environmental health and licensing, and which is largely based on the Principles of Better Regulation. The Code applies when determining general policy or setting standards, but not to individual cases.
- 6.5 The Council also operates the Primary Authority scheme and will have regard to guidance issued by the Local Better Regulation Office in carrying out enforcement activity within the scope of the scheme.

- 6.6 Further details of the Principles of Better Regulation, the Regulators' Compliance Code, the Primary Authority scheme and priority regulatory outcomes can be found in the relevant Departmental Enforcement Policies.
- 6.7 The Code, the priority regulatory outcomes, the primary authority scheme and the Principles of Better Regulation do not apply to enforcement activity relating to planning, listed buildings, advertisements, protected trees or building control.

7.0 EXPECTATIONS OF BUSINESS

- 7.1 In their own interests, and in order to avoid the need for enforcement action, businesses are expected:
- to be proactive in seeking advice
 - to be open in disclosing information to the Council when required
 - to be cooperative and willing to discuss problems

8.0 OBSTRUCTION OF OFFICERS AND OFFICERS' POWERS OF ENTRY

- 8.1 Enforcement Officers have a wide variety of duties, many of which need them to act as investigators similar to Tax Inspectors, Revenue and Customs officers and police officers. To enable them to act effectively, the law has given strong powers of entry, seizure and inspection. If individuals or companies obstruct officers or do not provide the requested information, the law also imposes punishments. Officers rarely have to use these powers, but for them to be effective the Council will continue to uphold and support them.
- 8.2 Officers will use their powers of entry only when necessary to effect an inspection of the premises or in the process of an investigation. The Council will **always** actively support officers acting in good faith, including prosecuting those individuals who obstruct or assault officers during investigations or inspections.
- 8.3 When the legislation allows, an officer may examine premises and articles, take photographs, remove articles, take samples or require information and may in some instances be accompanied by other persons. In appropriate cases an officer may seek a warrant from a Magistrates' court to gain entry into premises.
- 8.4 An officer will be expected to explain both the justification and the legal basis for the above actions upon demand.

9.0 APPOINTMENT OF OFFICERS AND IDENTIFICATION

- 9.1 All enforcement officers are required to carry identification in the form of an "Authority to Enter" card bearing their photograph. If an officer does not show his/her card, he or she may be asked to show it by anyone who is

requested to allow entry. If no card is produced, entry may be legitimately refused. If a member of the public has any doubt about the officer's identity, he/she may telephone the Council on 0118 937 3737 to confirm this.

10.0 SHARED ENFORCEMENT ROLE

10.1 Enforcement officers investigating breaches of the law must consider whether there is a shared or wider enforcement role. In some instances Council Officers from one Section work closely with officers of other Sections, or the Police, the Fire and Rescue Service, the Health and Safety Executive, the medical profession and others. Officers will respect confidentiality so far as it is appropriate to do so, and will not divulge any information which is not relevant to the case in question. However, the Council has a duty to inform certain government bodies of statutory notifications, for example, reporting certain accidents or occupational diseases to the Health & Safety Executive, or notices of intended prosecutions to the Office of Fair Trading.

10.2 If another agency or authority is the enforcing authority for a particular activity, officers will inform them of any contraventions they observe during the performance of their duties; for example, officers must consult the Fire Authority before serving a statutory notice to provide or improve means of escape in a house in multiple occupation. When appropriate, enforcement issues are referred to other agencies. For example:

Health and Safety Executive
Emergency Services
Thames Water
Royal Society for Prevention of Cruelty to Animals
Other Local Authorities
The Environment Agency, Department of Environment, Food and Rural Affairs,
Department for Work and Pensions, the UK Border Agency and other
Government Departments and Agencies

10.3 Confidentiality, data-protection and information-sharing are covered in detail in separate Council policies with reference to the Data Protection Act 1998 and Freedom of Information Act 2000, and the Environmental Information Regulations 2004.

11.0 PROVISION FOR INTERESTS OF CONSUMERS AND BUSINESSES

11.1 This enforcement policy has taken into account the interests of consumers and businesses in Reading. Visits to businesses sometimes occur out of normal working hours to cope with their extended operating hours. Similarly, many residents are only available in the evenings and visits are often arranged for mutual convenience. Where possible, interpreters and translators will

accompany officers where business persons, consumers and residents are unable to communicate in English.

12.0 CHOICE OF APPROPRIATE ENFORCEMENT PROCEDURES

12.1 Compliance should normally be achieved through informal action such as letters or giving advice. Where this does not result in compliance, or in more serious instances, formal enforcement action will be considered, e.g. issuing a statutory notice, offering a formal caution, or prosecution. The Code for Crown Prosecutors will be taken into account, among other factors, in deciding whether a caution or prosecution is appropriate.

12.2

(a) Informal action includes:

- (i) Educational Courses
- (ii) Giving Advice
- (iii) Visits to Check
- (iv) Warning Letters
- (vi) Consideration Notices
- (vii) Undertakings

(b) Formal Action includes:

- (i) Notice of Intention
- (ii) Works Notices
- (iii) Abatement Notices
- (iv) Improvement Notices
- (v) Works in default
- (vi) Prohibition Notices
- (vii) Control orders
- (viii) Closing Orders
- (ix) Seizure and Detention
- (x) Simple Cautions
- (xi) Enforcement Notices and other Notices under the Town and Country Planning Acts
- (xii) Injunction
- (xii) Revocation of licence
- (xiii) Fixed Penalty Notices
- (xiv) Anti-Social Behaviour Orders and Contracts
- (xiv) Prosecution

12.3 More information on different types of enforcement action can be found within each Service's enforcement Policy where appropriate.

13.0 WHO DECIDES WHAT ENFORCEMENT ACTION IS TAKEN?

- 13.1 For less serious infringements of the law, decisions about the most appropriate course of action may be made by the enforcement officer(s). Decisions are based upon professional judgment, legal guidelines, statutory codes of practice and priorities set by the Council and/or Central Government.
- 13.2 For more serious offences (where the nature of the offence points towards prosecution, simple caution and/or seizure), decisions about enforcement, may be taken by Enforcement / Investigating Officer(s) and/or senior managers from the relevant Section, and the Head of Legal Services where appropriate.

14.0 MONITORING AND REVIEW OF POLICY

- 14.1 All officers are required to adhere to this policy. Managers, including Team Leaders, are required to monitor the implementation of the policy by enforcement officers and make any necessary suggestions and recommendations for improvement. Any variance from the policy should be reported to the appropriate Service Manager who will ensure that it is addressed in the Service Plan, and that the necessary training is given to the officer(s) concerned.
- 14.2 This Policy will be reviewed when there is any significant change in legislation or other circumstances which affect its effectiveness and validity.

15.0 APPEALS, COMPLAINTS AND COMMENTS

- 15.1 The Council has published its Corporate Appeals and Complaints Procedures, which can be found on the Council's web-site: www.reading.gov.uk, where copies of this Policy are also available. In addition, most legislation that we enforce has an in-built appeals procedure whenever formal enforcement action is taken. These procedures will be explained as appropriate. Complaints may also be made to the Local Government Ombudsman (www.lgo.org.uk).
- 15.2 In addition to the corporate complaints procedure any person can take up their complaint with the Service Manager or Service Director in the first instance, should they so wish. Paper copies of this Policy may also be obtained from the relevant Service Director, and comments on the Policy should also be made to the Director. Copies will be made available on request in Braille, large type or in languages other than English where this is a reasonable requirement.

APPENDIX 3
FOOD ENFORCEMENT POLICY
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1. INTRODUCTION

- 1.1 Reading Borough Council, as a “food authority”, has a duty to enforce within its area the provisions of the Food Safety Act 1990 (the Act) (as amended), the Food Safety and Hygiene (England) Regulations 2013 (FSHER 2013), a series of regulations made under the European Communities Act 1972 being implemented into UK legislation and other associated legislation. The Council carries out this duty by employing suitably qualified staff who are authorised to enforce the requirements of the legislation listed above. In developing this enforcement procedure, the Council has had regard to the guidance in the Codes of Practice issued by The Food Standards Agency (FSA).
- 1.2 While the Corporate enforcement policy sets out the general approach to enforcement throughout the council, and recommends that specific procedures should be developed to enforce particular pieces of legislation, this Food Enforcement Policy outlines how council officers will enforce Food law.
- 1.3 The policy covers the following:
- (a) Policy Statement
 - (b) The Approach to Enforcement
 - (c) Practical Arrangements for Implementing the Policy
 - (d) Maintaining a High Quality Service
 - (e) Enforcement Procedure

2. POLICY STATEMENT

- 2.1 The Council has made effective arrangements to enforce the Act, the FSHER 2013 and all associated regulations and codes of practice, with the aim of ensuring that all food and drink intended for human consumption which is produced, stored, distributed, handled or consumed within the Borough is without risk to the health and safety of consumers, and is packaged and marketed within labelling and compositional requirements.
- 2.2 Should a member of the public or business wish to seek advice or make a complaint under the provisions of the Act, the Council will provide a prompt, courteous and efficient service for the handling of the enquiry in accordance with the Council’s service standards.

3. THE APPROACH TO ENFORCEMENT

- 3.1 The introduction of the FSHER 2013 formalises the requirement for enforcing authorities to ensure that operators of food businesses produce an effective documented management system for food that takes into account hazard analysis and critical control points (HACCP) when dealing with food issues.
- 3.2 This has resulted in increased demands on enforcement officers who have to assess the effectiveness of the documented system, and also on the operators of food businesses and food handlers who are now required to demonstrate their knowledge of how to prepare, store and present food in a safe manner so as not to pose a risk to health. A wide variety of statutory and non-statutory guidance exists to assist in the interpretation and compliance of the law.

- 3.3 The Council carries out its duties on a risk rating basis and applies the law in a proportionate and transparent manner. To this end the Council will:
- 3.3.1 Enforce and execute the provisions of the Act, the FSHER 2013 and associated Regulations.
 - 3.3.2 Register all food businesses as required by legislation.
 - 3.3.3 Inspect food premises with a frequency determined by an assessment of the potential risks guided by the Food Law Code of Practice issued by the FSA.
 - 3.3.4 Make consistent enforcement decisions in accordance with the procedure detailed in Section 6 of this policy.
 - 3.3.5 Comply with official guidance issued by FSA and where applicable, Department of the Environment, Food and Rural Affairs (DEFRA) and the Department of Health (DH).
 - 3.3.6 Liaise with the other food authorities in the area through the Berkshire and Oxfordshire Food Liaison Group, and through the Trading Standards South East (TSSE) Food Focus Group to ensure a consistent and agreed approach in dealing with food safety and food standards issues respectively.
 - 3.3.7 Participate in an inter authority auditing programme with other Local Authorities in the region for food safety and food standards.
 - 3.3.8 Liaise with the Food, Water and Environmental Microbiology Services, Porton Food Sampling Group to agree a national, regional and local sampling programme of microbiological food sampling. Liaise with TSSE, Hampshire and Worcestershire laboratories to participate in regional and where available national food standards sampling programmes. The Council also shares its local sampling programmes with TSSE.
 - 3.3.9 Investigate all cases and outbreaks of food poisoning based on risk and the single case protocol which details which organisation (the Local Authority or Thames Valley Public Health England (TVPHE)) will investigate which each organism. Liaison with the Thames Valley Infectious Disease Group ensures a consistent approach when dealing with individual cases or outbreaks of food poisoning.
 - 3.3.10 Follow the principles of the Primary Authority (PA) scheme as set out in the Regulatory Enforcement and Sanctions Act 2008.
 - 3.3.11 Where a business with an outlet in Reading has a PA in another area then the Authority will search the PA register for any additional information about the business, an inspection plan which directs the inspection, any PA advice given to the business which indicates that this area of the inspection has been approved by the PA. Feedback will be provided to the PA as it directs. Any business with a PA where enforcement is required will be carried out with the knowledge of the primary authority. Depending on the type of enforcement action an enforcement notification will be made to the primary authority register.
 - 3.3.12 Actively promote the PA scheme, engage new PA businesses, allocate officers to work with them who will create a work plan for each business to achieve their goals. The Authority will work with other enforcement authorities to

ensure businesses are protected from inconsistent or unreasonable enforcement, provided with a critical friend and a communication bridge to other enforcement authorities. Where there is a local failure at the business or deviation from the agreed policy, the authority cannot defend the business against enforcement action.

- 3.3.13 Where there is no primary authority for food standards then the home authority principle is applied to complaints and enquiries where food does not originate in Reading.
- 3.3.14 Businesses based in Reading with no PA arrangements will be actively encouraged to have one and only a basic Home Authority service is provided where food is unsafe to stay on the market.
- 3.3.15 Ensure the continued development of all its enforcement officers and encourage officers to keep up to date on food safety and food standards issues.
- 3.3.16 Deal effectively and appropriately with all food incidents including food hazards and food fraud on a localised and non- localised scale to ensure the appropriate persons are notified of incident and the incident is reduced to a safe level.
- 3.3.17 Provide training and education to food businesses to help them comply with their legal requirements and ensure their food is safe.
- 3.3.18 Follow the brand standard guidance for the operation of the Food Hygiene Rating Scheme. Issue a Food Hygiene Rating Scheme (FHRS) sticker to those businesses that fall within the scheme. Consider appeals of ratings, provide a mechanism for rerating on payment of a fee

4. PRACTICAL ARRANGEMENTS FOR IMPLEMENTING OF THE POLICY

4.1 The Council carries out its duties in the following manner:

4.1.1 Pro-active Inspections

- (a) Pro-active inspections are carried out in the form of a rolling risk-based programme. At the beginning of each financial year, the Licensing, Food & Safety Manager will produce a report identifying those premises that are due for inspection during the year. The percentage of premises that are not broadly compliant at the beginning of the year and at three monthly intervals. Once the Authority has determined the extent of the relative risk and categorised the premises, inspections are made on the minimum frequency basis detailed in 3.1.10 of the food service plan for food hygiene and 3.1.15 of the food service plan for food standards.
- (b) Most food businesses serving open food or high risk food will be given a rating sticker at the end of the visit of between zero and 5 to reflect the food hygiene at the premises based on the code of practice risk rating for hygiene, structure and confidence in management. This information is available on the web and also a sticker on the window /door. New businesses will be inspected and rated as usual. Unannounced re-ratings will be made within 3 months of payment of a fee.

- (c) Category A, B or not broadly compliant C food hygiene and category A or not broadly compliant category B food standards will be inspected using the existing system of inspection, partial inspection or audit approach. The parameters of the risk rating can be changed during an inspection, partial inspection or audit.
- (d) Category C food hygiene or category B food standards premises that are considered broadly compliant for food hygiene or food standards may, at every other inspection date have an intervention such as a verification or surveillance visit rather than a full inspection, partial inspection or audit. At the verification /surveillance visit premises can be moved on to show a new inspection date but the values of the parameters which make up the risk rating will remain unchanged. As a new Food Hygiene Rating assessment cannot be made on these visits, it is unlikely that verification/surveillance visits will be made as a proactive visit.
- (e) Category D food hygiene premises may receive an official control such as a full inspection, partial inspection, audit or verification/surveillance visit and on every other visit a non-official control such as education and advice. As the FHRs score cannot be changed or altered in the way it is made up as a result of a verification/surveillance or non-official control visit then it is unlikely that these forms of proactive inspection will be used unless the business does not fall within the FHRs scheme.
- (f) Category E food hygiene or category C food standards can be subject to an alternative enforcement strategy such as a self-assessment questionnaire. Where the business is still required to have a FHRs score an inspection will be carried out by an authorised officer. Where the business does not fall within the FHRs then a Regulatory Support Officer or a newly qualified authorised officer will visit the premises to assess if the type of food served at the business has changed and complete a low risk questionnaire with the business. Childminders are also not part of the FHRs scheme. These businesses are sent a low risk questionnaire. Any business that does not return its questionnaire is visited by a Regulatory Support Officer. Premises where large quantities of food are prepared or stored or high standards of food control are maintained may be subject to inspection or verification and surveillance visits to ensure the premises has not substantially changed.
- (g) Certain premises that produce meat, fish, dairy or egg based food for other businesses will be covered by the product specific establishment regulations in EC Regulation 853/2004 for food hygiene. These premises are inspected as dictated by the risk rating.
- (h) Food Brokers are inspected for traceability documentation of the food.

4.1.2 Reactive Inspections

Reactive Inspections of food businesses will be carried out following the receipt of a complaint, which could be regarding a food complaint, for example concerning contamination of a food, complaint about hygiene standards of a food premises or via the notification of a suspected food poisoning.

4.1.3 Food Incidents

There are 3 ways in which the FSA categorises food incidents. These are Food Alert For Action (FAFA) where immediate action will be taken on receipt of the notification; Product Recall Notices (PRIN) and Allergy Alerts where no action is required.

4.1.4 Sampling

Food sampling as agreed by FSA, PHE at Porton, TSSE Group and the Berkshire Food Sampling Group is carried out on a national, regional and local basis, focusing on the specific needs of Reading. Proprietors of those food businesses involved in the sampling programme are informed of the outcome and are required to take remedial action where laboratory analysis of samples show unsatisfactory levels of hygiene. Formal sampling as guided by the FSA Code of Practice will be restricted to occasions where formal action is anticipated.

4.1.5 Imported Food

- (a) As an inland authority for the sale of imported food, the authority could carry out inspection of the food as part of the food premises inspections.
- (b) Imported food may fail to have the correct documentation or labelling or the authorised officer may suspect the food is unfit for human consumption. In cases where there is insufficient documentation or labelling officers will make sufficient reasonable enquiries to ascertain correct documentation and labelling. Where an authorised is satisfied that the food is suspected of failing to meet the requirements of the food safety legislation, the food will be sampled.
- (c) Where sufficient documentation and labelling is produced to satisfy the requirements of the authorised officer the food will be released. Where there is insufficient documentation the action will be taken on a risk to public health based approach.
- (d) Where food fails to meet food safety requirements steps will be taken to ensure it does not re enter the food chain in its current state in the UK.

4.1.6 Education & Training

Officers actively encourage food handlers to participate in food hygiene training to expand their knowledge and understanding of food safety issues. All inspections involve some form of education/training, which is to be provided during on-site discussions concerning food preparation procedures and by offering advice and information on matters requiring attention. We run regular training courses for food businesses in food hygiene. Additionally, where significant changes are made to food legislation the team will work with the Communications Team to update food businesses on legislative changes and local initiatives.

4.1.7 Enforcement Action

To ensure an effective, transparent and consistent approach to enforcement of food safety legislation, officers will follow the guidance in Section 6.

4.2 Enforcement in Council-owned food premises

Any contraventions of food law found at businesses that are owned and run by the Council will be brought to the attention of the appropriate Head of Service and the Service Director who will be required to rectify the defect or

deficiency within an agreed timescale where there is a significant breach or ongoing breaches of food law.

4.3 Who will implement the policy?

4.3.1 Responsibility for implementing the policy rests with the Licensing, Food & Safety Manager delegated through the Regulatory Services Manager under the authority of the Head of Planning, Development and Regulatory Services. Day to day activities are carried out by authorised officers. The Food Lead Officers are responsible for the planning, organisation and subsequent monitoring of all aspects of the policy. Inspections, sampling, investigations relating to food and training will be carried out by officers authorised under the Act and FSHER 2013 and as detailed in the FSA Code of Practice.

4.3.2 Trading Standards Officers, Environmental Health Officers and some Technical Officers in the Regulatory Services Department are authorised to deal with aspects of food legislation in accordance with the competency matrix and authorisation scheme of the Service.

5. MAINTAINING A HIGH QUALITY SERVICE

5.1 The Council is committed to ensuring that the highest practicable standard of customer service is integrated into all aspects of service delivery within a reasonable cost. All staff will adopt a professional approach, and performance monitoring will be carried out to ensure compliance with agreed targets. The service will also be audited by peer authorities and by reviewing any complaints against the service that may be received.

5.1.1 Professionalism

- (a) The Council ensures that all authorised officers have access to appropriate professional training and other resources required in order to maintain a high level of professionalism and competence.
- (b) The Lead Food Officers (Licensing, Food & Safety Manger and Principal EHO (Food)) will monitor the performance of authorised officers.

5.1.2 Monitoring the implementation of the policy

- (a) The Licensing, Food & Safety Manager and Principal EHO (Food) will monitor the following aspects of the Policy:
 - (i) Compliance with agreed targets for pro-active inspections
 - (ii) Compliance with agreed targets for reactive inspections/complaints
 - (iii) Compliance with agreed targets for written reports following inspections
 - (iv) The number of requests for service received year to year
 - (v) The number of food incidents received year to year
 - (vi) The number of sampling initiatives carried out year to year
 - (vii) The number of training courses and candidates run year to year
 - (viii) The results of course evaluation sheets from year to year
 - (ix) The results of inter-authority auditing

- (x) The number and nature of complaints made against the service
 - (xi) The results of specific target monitoring i.e. Number of businesses that have implemented a documented food safety management system.
- (b) Specific actions to achieve these aims are detailed in the Food Service Plan.

6. ENFORCEMENT PROCEDURE

6.1 Local authorities have a variety of options available to them when implementing food safety legislation. Action can be either informal (persuasive) or formal (compulsory). The various options available are detailed below.

6.2 Any general information, inspection plans, PA advice available on the PA register will be considered before any intervention in a business with a PA. Where formal action is considered because of ongoing local failures then a formal notification through the PA website will be made. In the majority of but not all of the cases, this will negate the need for formal enforcement action.

6.2 INFORMAL ACTION

Authorised officers may use informal procedures if they are satisfied that such procedures will secure compliance with the requirements of food safety legislation within a reasonable time scale.

6.2.1 No action

In certain circumstances contraventions may not warrant any action. This can be where the cost of compliance outweighs the benefit to public health. A decision to take no action must be recorded in writing and must take into account the public health implications of the contravention.

6.2.2 Verbal Advice

For minor breaches of the law we verbally advise the offender clearly identifying the contravention and including a deadline by which the action must be taken. This might be done when the authorised officer has confidence in the food business operator that the work would be carried out. Failure to comply would result in more severe enforcement action.

6.2.3 Written Warning and advice

- (a) During or on completion of an inspection the authorised officer will discuss as far as possible with the operator of the business, any problems that are identified and will explain what is necessary to rectify the problem.
- (b) After all visits to food businesses an inspection report form will be left with the person in charge of the business at the time of the visit. The inspection report form will detail the main findings and make a clear distinction between legal requirements and recommendations. The form will contain details of areas inspected, person seen at the premises, visiting authorised officer, their contact details, date/ time of the visit and clear contact details regarding an Officers manager to allow a food business operator to take a matter further if they are not happy with the response of an officer.

- (c) In certain circumstances and particularly if the food business operator was not present at the visit to the food premises and it is known that the food business operator is not based at this premises a letter or a copy of the inspection report form will be sent to his office. This is particularly appropriate where there are legal requirements that must be carried out and it is a multi site business.
- (d) Where a letter is sent out after the visit, the letter will detail the hazards identified by enforcement officers during their inspection and the remedial action required. A clear distinction will be made between matters that are legal requirements and those that are recommendations and the measures that are required to secure compliance with the legislation.
- (e) It will be clear from both the inspection report and any subsequent letter that the operator can approach the Section for additional advice/assistance should it be necessary.

6.2.4 Follow up visits

Where significant breaches of the legislation have been identified during a previous visit to the premises, a revisit will be carried out to monitor progress towards compliance. Wherever practicable, and in all cases where a formal notice has been served or prosecution instituted the revisit will be undertaken by the same officer who carried out the original inspection.

6.3 FORMAL ACTION

6.3.1 In deciding what enforcement action is necessary, an authorised officer will have regard to the nature and severity of the contravention and the effects on public health. Regard will also be given to the food safety history of the business and attitude of the food business operator in complying with legislative requirements. Formal action will be instigated where informal action has failed to ensure that a food business operator has performed the duties imposed on them by relevant food safety legislation. A decision on what type of action to take may not necessarily be made at the time of the inspection.

6.3.2 Improvement Notices & Hygiene Improvement Notices

- (a) An authorised Officer may consider the use of an Improvement Notice or Hygiene Improvement Notice as appropriate in any of the following or combination of the following situations:
 - (i) where there is a history of non-compliance or delay in compliance of food safety legislation;
 - (ii) where formal action is proportionate to the risk to public health; or
 - (iii) where it is believed that for an informal approach is not likely to be effective.
- (b) A Hygiene Improvement Notice gives the food business operator on whom the notice is to be served a minimum of 14 days in which to make a representation in respect of works improvement required. An Improvement Notice sets no minimum time for compliance with the notice and is designed to be used with the Food Information Regulations 2014

- (c) An Improvement Notice or Hygiene Improvement Notice will clearly detail which regulations have been contravened and what remedial action is necessary. Information will be sent explaining the recipient's right to appeal. The notice will specify the time within which compliance is required. The time allotted will be dependent on the nature of the problem, the public health risks involved and the availability of the solution.
- (d) An authorised officer serving an Improvement Notice or Hygiene Improvement Notice must be satisfied that they have adequate evidence to successfully prosecute for non-compliance should the situation arise.
- (e) The authorised officer will visit as soon as is reasonably practicable following expiry of the time allowed for compliance to check whether the contraventions of food safety legislation have been remedied. If they have not, an offence has been committed and the investigating officer shall prepare a report for the Head of Planning, Development and Regulatory Services.
- (f) The Head of Planning, Development and Regulatory Services will decide whether it is necessary and appropriate to instigate prosecution proceedings in respect of the food business operator subject to the Head of Legal Services being satisfied as to the available evidence.

6.3.3 Prohibition Procedures: Formal closure of a food premises using Emergency Prohibition Notice/Order or Hygiene Emergency Prohibition Notice/Order

- (a) Authorised Officers may serve the above notices where there is an imminent risk to public health. The notice will either:
 - (i) prohibit the use of the entire premises or part of the premises;
 - (ii) prevent the use of certain equipment; or
 - (iii) prohibit a particular process or treatment
- (b) The notice and subsequent order will require immediate closure of the premises, or the cessation of a process or use of specific equipment.
- (c) Following the service of an Emergency Prohibition Notice (EPN) or Hygiene Emergency Prohibition Notice (HEPN) the local authority must within three days apply to a Magistrates' Court for an Emergency Prohibition Order (EPO) or Hygiene Emergency Prohibition Order (HEPO) respectively. Where an order is not applied for the proprietor may claim compensation for loss of earnings arising as a result of the EPN or HEPN. The food business operator will have one complete day's notice of the Council's intention to make the application to the court. During the closure period frequent checks will be made to the business to ensure that it has not reopened without the permission of the authorised officer.
- (d) The EPN, HEPN, EPO, HEPO and accompanying notes will contain the following information:
 - (i) The name of the business and its address;
 - (ii) The matters that are considered to pose an imminent risk;

- (iii) Details as to how to request that the premises may be allowed to open following the service of the EPO or HEPO;
- (iv) The circumstances that will entitle the Food Business Operator to compensation for any losses following the service of the Emergency Prohibition Notice or Hygiene Emergency Prohibition Notice.
- (e) The Council will apply to the Court for its costs from the Food Business Operator in making the application and the work carried out beyond that of a normal inspection.
- (f) An authorised officer may serve a Notice seeking voluntary closure of the food business if the officer believes there is an imminent risk of injury to health as in the emergency prohibition procedures and he has confidence in the management of the business that they will not reopen until the imminent risk to health is removed. In these circumstances there is no opportunity for the business to seek compensation from the Council for loss of earnings as there is no need to apply to the court for confirmation of the notice in the form of an order.
- (g) The voluntary closure will be confirmed in writing and frequent checks will be made to the business to ensure that it has not reopened without the permission of the authorised officer.

6.3.4 Closure of food business after prosecution & prohibiting the food business operator from managing it - Prohibition Order/ Hygiene Prohibition Order

- (a) If a food business operator is successfully prosecuted for breaches of relevant food law and satisfactory evidence is provided to the court that the business continues to pose a risk of injury to health, the food authority can apply to the Magistrates' Court for a Prohibition Order. If successful, the food business operator and/or manager are prohibited from running a food business.
- (b) If a person is prohibited from managing a food business the information is circulated nationally via the Chartered Institute of Environmental Health (CIEH) to reduce the likelihood of that person setting up business in another area. If the Prohibition Order has been lifted the food authority will notify the CIEH as soon as is reasonably possible.

6.3.5 Inspection, Detention and Seizure of Suspect Food

- (a) Any food that fails to meet food safety requirements or has not been produced, processed or distributed in compliance with the hygiene regulations may be detained to allow further time for investigation or seized. When food has been detained or seized the food business operator will be provided with written notice as soon as is reasonably practicable.
- (b) The food will be presented to a JP as soon as possible but within two days, when a decision on further action will be made. This two day period may be extended if necessary to ensure that parties attend and be represented if they choose.
- (c) A food condemnation notification will be given to the person in charge of the food when the officer intends to have the food dealt with by a Justice of the Peace (JP).

6.3.6 Suspension/withdrawal of approval or conditional approval

- (a) Any premises that has received approval under EC Regulation 853/2004 by the Food & Safety Team is given an approval number based on the stem of RG followed by the next numerical value which is notified to the FSA.
- (b) The approval will be suspended or withdrawn if the business fails to comply with the relevant hygiene regulations.
- (c) The business may be given a conditional approval (including approval number) rather than full approval on the first inspection after application. The conditional approval allows the businesses to trade provided if it meets certain conditions within six months. In order to obtain conditional approval the business must meet the structural requirements and produces a commitment to implement the other issues specified in writing within six months of the granting of the conditional approval. When all the requirements have been met an approval will be granted. If the requirements of the conditional approval are not met within six months of the granting of the conditional approval, the conditional approval for the business will be suspended or withdrawn.
- (d) The suspension, withdrawal of approval or conditional approval will be given in writing to the business and an appeals mechanism will be available to the business.

6.3.7 Remedial Action Notice

- (a) Authorised Environmental Health staff can serve a Remedial Action Notice on a food business operator that operates a food premises that is subject to approval. The notice will provide provision for prohibiting the use of equipment, any part of the establishment, the imposition of conditions upon, or prohibiting or reducing the rate of processing of the food. This Notice may be used in the following situations:
 - (i) When the rate of operation is detrimental to the ability of the business to comply with the regulations;
 - (ii) On a continuing serious breach of the hygiene regulations that gives rise to a risk to public health.

6.3.8 Prosecution

- (a) Food handlers and the owners of food businesses found to be contravening food safety and food standards legislation will be given reasonable opportunity to comply. However, in some situations the seriousness of the offence may be such that prosecution is appropriate. The following circumstances may result in prosecution proceedings being brought:
 - (i) The alleged offence involve a serious breach of the law such that public health, safety or wellbeing is or has been put at risk;
 - (ii) The alleged offence involves a failure to correct a serious potential risk potential risk to food after a reasonable opportunity to correct the matter;
 - (iii) The offence involves a failure to comply in full or part with the requirements of a statutory Notice;

- (iv) There is a history of similar offences relating to risk to public health
- (b) In such cases, the Council will consider:
 - (i) The seriousness of the offence;
 - (ii) The previous history of compliance with relevant legislation;
 - (iii) The ability of the defendant to establish a due diligence defence;
 - (iv) The availability and capability of witnesses and the evidence available.

6.3.9 Deciding Whether to Prosecute

- (a) Not every contravention of the law should be prosecuted through the Courts. The Authority will weigh the seriousness of the offence (taking into account the harm done or the potential for harm arising from the offence) with other relevant factors, including the financial circumstances of the defendant, mitigating circumstances and other public interest criteria.
- (b) The Council will have regard to The Code for Crown Prosecutors issued under Section 10 of the Prosecution of Offences Act 1985 in deciding whether to prosecute in any particular case. Thus, before starting proceedings, the Head of Legal Services must be satisfied that there is a realistic prospect of a conviction based on the evidence (that is, there must be sufficient admissible, substantial and reliable evidence to secure a conviction). In addition, the Council will balance, carefully and fairly, the various public interest criteria against the seriousness of the offence. These public interest criteria include:-
 - (i) the likely sentence (if convicted);
 - (ii) previous convictions and conduct of the defendant;
 - (iii) whether there are grounds for believing the offence is likely to be repeated;
 - (iv) the prevalence of the offence in the area;
 - (v) whether the offence was committed as a result of a genuine mistake or misunderstanding;
 - (vi) any delay between the offence taking place and the date of trial;
 - (vii) the likely effect the prosecution will have on the defendant;
 - (viii) whether the defendant has put right the loss or harm caused.
- (c) The Council will have regard to the Regulators Code which came into force in 2014 and must be applied to food law. The enforcement approach must be reasonable, proportionate, risk based and consistent with good practice. It must consider the economic impact and minimise costs as well as encourage compliance.
- (d) If a number of offences have been committed and prosecution is deemed to be appropriate, then in selecting the offences for prosecution, regard will be had to the need to reflect the seriousness of the matter and to give the Court adequate sentencing powers to deal with the matter appropriately.

6.3.10 Simple Caution

- (a) A simple caution may be issued instead of a prosecution. The Council will have regard to the guidance contained in the Ministry of Justice circular Simple Cautions for Adult Offenders (November 2013) in deciding whether or not to offer alleged offenders the chance of a formal caution.
- (b) The following conditions should be fulfilled before a caution is administered:
 - (i) There must be evidence of the alleged offender's guilt sufficient to give a realistic prospect of conviction;
 - (ii) The alleged offender must admit the offence;
 - (iii) The alleged offender must understand the significance of a simple caution and give an informed consent to being cautioned.
- (c) If there is insufficient evidence to consider taking a prosecution, then a simple caution must not be considered.
- (d) There is no legal obligation for a person to accept the offer of a simple caution and no pressure should be applied to the Food Business Operator to accept one. If the alleged offender refuses to accept a simple caution a prosecution will normally be pursued.

7. REVIEW OF THE POLICY

This enforcement policy will be reviewed annually or when changes in legislation or centrally issued guidance makes this necessary.

Appendix 4

Food & Safety Team Work Plan Apr 22 - Mar 23 - Progress Review

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
S	<p>Food Hygiene Inspection Programme Until 31 March 2023. Premises inspected in accordance with FSA Guidance on Service return No of premises due/overdue inspection for this year = 1410 New registered premises per year = c. 230</p>	<p><i>Requirement of Food Law COP.</i> <i>Service Plan Priority / Target</i></p>	<p><i>Premises subject to hygiene requirements inspected and compliant to ensure safe food.</i> <i>Education of local businesses</i></p>	<p><i>In line with FSA guidance priority inspections up to 31/03/23 are - Unrated, Cat A, Cat B (overdue) High Risk Cat C/D Overdue.</i> <i>Due to Covid targets will remain under review.</i> <i>Aim:</i> <i>100% A premises</i> <i>90% B Premises</i> <i>50% Unrated premises inspected</i></p>	<p>No of inspections completed: 445 (31.5% of all inspections due, excluding new registrations) No of new premises registered in year: 294. Achieved: 100% A 100% B 67% C 87% Unrated against existing unrated premises at start of year however this does not account for all premises registered during the year.</p>
S	<p>Food Hygiene Revisits and subsequent enforcement of non-compliant premises. Approximately 40% of premises are being found to be non-compliant. Estimate 656 premises. Ongoing non-compliance will require issue of formal notices and potentially lead to prosecution.</p>	<p><i>Food Law COP</i></p>	<p><i>Staged enforcement action in line with the Corporate Enforcement policy to improve food hygiene standards and ensure safe food.</i></p>	<p><i>Increase in FHRS at re-rate or next inspection. NC premises will be noted as Compliant on database and Notices will be complied with.</i> <i>Premises revisited on time in accordance with notice expiry date.</i> <i>Any court proceedings to be brought within time limit.</i></p>	<p>Number of revisits carried out: 69 This equates to approximately 16% of premises being non broadly compliant and requiring follow up action.</p>

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
S	Ongoing Enforcement including issue of notices. Resulting from ongoing or immediate non-compliance where a risk to public health and safety is presented. Approx 55 per annum	Food Law COP	Staged enforcement action in line with the Corporate Enforcement policy to improve food hygiene standards and ensure safe food.	Increase in FHRS at re-rate or next inspection. NC premises will be noted as Compliant on database and Notices will be complied with. Premises revisited on time in accordance with notice expiry date. Any court proceedings to be brought within time limit.	Number of food enforcement notices issued in year: 23 HIN - 12 HEPN - 2 NOI - 2 HEPO - 1 Food Detention - 1 Illegal import (POAO) - 3 Vol Closure - 2
S	Approval of Premises Process applications for new approval activities. Inspect and review existing approved premises.	Food Law COP	Approval activities authorised and published. Food products accurately labelled and traceable.	Applications and inspections carried out within SOP timeframe. Full approval awarded after max 6 months or removed.	No of approval applications received: 1 No of approval visits carried out: 3 Conditional approvals issued: 2
S	Food Hygiene Re-Rating visits (FHRS) for premises not overdue/due inspection Avg 30 requests received per year	FHRS Brand Standard	Increase in FHRS and improved compliance with FH requirements. Increased consumer confidence in premises	All inspections carried out within 3 months. Applications for premises that are overdue/due inspection will be refunded to business.	Re-ratings received - 33
S	Respond to FHRS Appeals Estimate 10 per annum	FHRS Brand Standard	Appeals handled in accordance with Brand Standard. Maintain confidence in Food Hygiene Inspections	Appeals responded to within timeframe. Appeals resolved without moving to Corporate Complaint.	Number of FHRS Appeals received - 2
S	Food Standards Inspection Programme Until 31 March 2023. No of due and overdue inspections = 1326	Food Law COP. Service Plan Priority / Target	Premises subject to standards requirements inspected and compliant to ensure safe, correctly	In line with FSA guidance priority inspections up to 31/03/23 are - Unrated, Cat A, Due to Covid targets will remain under review.	Number of Food Standards Inspections completed - 412 (31% of total due, excl. new premises)

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
	New registered premises per annum approx. 230		<i>labelled food which does not mislead the consumer. Education of local businesses</i>	Aim: 100% A premises	Number of new registered businesses received in year - 294
S	Food Standard Revisits. Estimate 30% of premises required revisits following decline in standards and new legislation. Approx. 467	<i>Food Law COP</i>	<i>Staged enforcement action in line with the Corporate Enforcement policy to improve the level of information provided to consumers and ensure they can make an informed choice.</i>	<i>Increase in compliance and confidence in management at next inspection. Revisits carried out in line with contravention deadline. Notices reassessed for compliant within identified timescale. NC premises will be noted as Compliant on database and Notices will be complied with. Any court proceedings to be brought within time limit.</i>	Number of Food Standards Revisits - 5 1.2% of premises inspected have been revisited. This does not accord with the number of non-broadly compliant premises marked in section 3.1.8 of the plan above.
S	Food, Water & Environmental Sampling (Microbiology) Average 150 samples per annum.	<i>Food Law COP Sampling Plan Local/National sampling programme</i>	<i>Ensuring food offered for sale is microbiologically safe and does not present a risk to health. Reduction in incidence of food borne illness.</i>	<i>Unsatisfactory samples followed up with further intervention and re-sampling where necessary.</i>	Number of microbiological samples conducted: 109 Number of unsatisfactory samples: 27
S	Food Standards Sampling Estimate 50 samples per annum	<i>Food Law COP Sampling Plan Local/National sampling programme</i>	<i>Ensuring food offered for sale is correctly labelled, safe and does not mislead the consumer. Reduction in food complaints and referrals.</i>	<i>Unsatisfactory samples followed up with further intervention and re-sampling where necessary.</i>	Number of Food Standards Samples conducted: 13 Number of unsatisfactory results: TBC

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
N S	National Food Hygiene Rating Scheme (FHRS) Administration	Discretionary function to take part in scheme. All LA's in England participate. Expectation of Customers.	Enabling consumer to assess food hygiene and safety. Provide consumer confidence in Reading businesses	Premises details uploaded to FHRS website fortnightly. Display of correct premises information	Uploads to FHRS rating website carried out fortnightly. Business appeal period waived on written submission from business. Database does not permit for FHRS re-rates to be recorded correctly. Local bypass implemented.
S	Annual FSA Return (LAEMS) Temperature check returns	Food Law COP	Transparent Food Hygiene and Standards performance.	LAEMS Return or equivalent accurately completed within time limit	Completed in April 2022. Temperature check responses completed and submitted in July 22, October 22 and January 2023.
S	Drafting, Implementation and maintenance of Policies and Procedures, plus ongoing annual review. Following update and reissue of the new COP in March 2021 a full review and update of all documented procedures must be carried out including drafting and implementation of those not previously in place.	Food Law COP requires each LA to have written policies and procedures in place for the following: <ul style="list-style-type: none"> • Approval • Food Business Establishment Database • Food Incidents and Alerts • Authorisation • Control Verification • Corporate Complaints • Food Complaints • Sampling • Equipment 	Enabling staff to efficiently, fairly and transparently conduct their role and respond to service requests and complaints. Provision of good customer service.	Documented procedures in line with Food Law COP.	Little progress made. Minor amendments completed to Schools SOP, Notice SOPs (service of notices) and inspection procedure to accommodate recent changes.

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
		<ul style="list-style-type: none"> • Official food controls and other activities • Enforcement • Control and investigation of outbreaks and food related infectious disease • Information • Registration • Conflict of Interest • Sampling Policy • Enforcement Policy • Complaints Policy • Contingency Plan 			
S	<p>Annual review and inspection of Cooling Towers for the prevention and control of Legionella spp. 3 premises</p> <p>Development, maintenance and implementation of SOPs</p>	Statutory duty under HSWA1974	Inspected, managed and maintained cooling towers reducing the likelihood of legionnaires disease.	All cooling towers registered and inspected. Cooling Towers risk rated 'A' inspected annually.	<p>One new evaporative condenser registered and inspected.</p> <p>No statutory requirement at present to inspect all cooling towers.</p>
	<p>Inspection and certification of registering special treatment premises. New registrations Operator and/or premises) per year = Approx. 30</p>	Local Govt Miscellaneous Provisions Act	Compliant premises. Reduced incidence of blood borne infection.	Mobile and domestic premises inspected and compliant prior to certificate being issues. Backlog of commercial premises awaiting inspection removed.	<p>No of inspections completed: 10</p> <p>No of new registrations: Premises (incl. 1 operator) - 17 Additional operators - 79</p> <p>Number of outstanding (backlog) inspections: 60</p>

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
	Backlog of existing premises = 81				
S	Special Treatment Revisits. Approx 20% of premises are found to be non-compliant requiring further attention and enforcement action.	Local Govt Miscellaneous Provisions Act Health and Safety at Work Etc Act 1974	Compliant premises. Reduced incidence of blood borne infection.	Revisits carried out within timeframe. Legal notices complied with in accordance	Number of revisits for Special Treatment premises - 1 (10% of inspections)
N S	Review of Special Treatment certification and inspection regime. Removal of tacit consent	Certification is currently issued without inspection of premises. Certification is timely and costly to remove once issued. Businesses should be assessed for compliance before certification to ensure risk to public health is minimised	Improved compliance in premises, reduction of revisits and further enforcement action. Reduced incidence of blood borne infection.	New system implemented. All newly registered premises receive inspection within timeframe prior to registration certificate being issued.	In progress. New inspections now carried out but further research shows tacit consent cannot be fully removed. Wider issue with special treatments require further work
S	Investigation of Infectious diseases and outbreaks including: Food borne illness & Legionnaire's disease. (Excl. Covid 19) Estimate 250 cases per year	National and Local Policy	Reduced incidence of infectious disease and outbreaks including food borne illness	Cases investigated in line with internal SOPs and Thames Valley single case protocol. Outbreaks investigated in line with National Guidance. Service requests responded to within internal standards.	Number of cases notified: 203
S	Statutory H&S return to HSE	National Enforcer requirement for the compilation of statistics and	Contribute to national enforcement statistics. Inform and develop future	Return completed accurately and by deadline.	Completed

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
		interventions with poor performing authorities	interventions and national policy		
S	Sports Ground Safety - Complete SGSA Audit	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Annual audit completed within timeframe. Actions addressed and completed within timeframe.	Completed. Recommendations for improvement are unable to be implemented within the required timescale.
S	Sports Ground Safety Inspection programme	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Min. 3 during match inspections carried out following risk assessment process. Inspection reports provided within SOP timeframe and enforcement action taken accordingly.	Designated Sports Ground - 3 DPI's completed Regulated Stand - no current Safety Certificate in place, not currently in operation. No DPI's completed.
S	Annual review and issue of Safety Certificate for Reading FC	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Annual issue of Safety Certificate. Annual review of updated Operations Manual.	Not completed
S	Complete Review of Reading FC Operations Manual	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Review of Operations Manual completed with written report of review issued to Reading FC. Follow up action taken in accordance with time frame.	No longer required.
S	Review of Operations Manual and Issue of new Safety Certificate for Palmer Park Regulated Stand Plus initial engagement and sent up of SAG meetings	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Established SAG Meeting schedule Clear and consistent lines of communication. Issue of new Safety Certificate.	No application for Safety Certificate received. Unable to complete.
S	SAG attendance Reading FC	Statutory requirement Safety at Sports	Structurally safe and well managed sports ground	Quarterly meetings carried out with wide attendance. TOR in place.	All meetings have taken place with attendance by the Food & Safety Team.

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
		Ground Act 1975 and associated legislation		Meetings Minuted and actions taken within timeframe.	TOR's up to date. Meetings and actions minuted.
S	Drafting, implementation and maintenance of SOPs for Sports Ground Safety	Requirement of SGSA and sports ground safety regulation. Identified requirement of annual SGSA audit	Improved performance at annual SGSA audit. Officer consistency will improve customer service	Documented procedures for sports ground safety work.	No progress.
S	Review and respond to Licensing consultations concerning premises licences, events and street trading. Including attendance at SAG. Approx 100 consults per annum	Statutory consultee	Safer Events	Representation at and contribution to Safety Advisory Group Meetings Proactive review of Event documentation Liaison with Event operators and objection to events where deemed necessary.	No of consultations received: 126. (25% increase on estimate) All SAG meetings attended. Further work on role in SAG and procedures require.
N S	Undertake review of FH role in licensing consultations and align team, including draft and implementation of new SOPs	Current procedure does not align with licensing objectives. Inconsistent approach to license reviews.	Improved customer service through officer consistency. Contribution to Public Safety.	New SOP implemented Database actions reflect new SOP	In progress.
S	Review and respond to consultations from planning, building control. Including liaison with departments, draft and implementation of new procedures.	Statutory Consultee. Current procedures do not allow for a consistent or collaborative approach. Safe and compliant premises	Active contribution to consultations. Collaboration with neighbouring teams to ensure safe and compliant premises.	New SOP implemented Database actions reflect new SOP Referral of relevant premises through to Planning, Building Control Consultation on Planning and building control consultations.	No consultations received. No progress with new procedures
S	Imported Food (Official Controls)	Food Law COP	Food products offered for sale will be legally compliant, properly labelled and safe to eat.	Service requests actioned within timeframe. Targeted sampling	SR's responded to. 3 TARP notices served. No progress on SOPs to date

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
S	Feed Inspection of Feed Premises. Approx. 37 premises.	Feed Law Code of Practice	Safety and security in the food chain. Compliant feed premises.	Feed premises inspected. Revisits and enforcement action for non- compliant premises.	Number of inspections completed: 20
N S	Food Hygiene Training Courses.	Improve knowledge and skills of local businesses to increase compliance with food hygiene legislation, improve FHRS score and improve local public safety	Accessible learning opportunities to local businesses, Improved food hygiene knowledge and FHRS scores. Reduction in non-compliant premises	Minimum 4 Food Hygiene Courses (Internal/External) to be carried out per year. 75% candidates successfully passed Exam.	Courses are currently suspended
S	Reactive food & Safety work (service requests) (excl. Infectious disease/accidents, including Covid-19) • Dirty food premises • Microbiological, chemical & labelling • Allergens • Health, safety & Welfare • Business advice • Covid-19 Approximately 1263 per annum.	Food Law COP and FSA guidance on service return. HWSA/EAR	Ensure food on sale is safe to eat, produced hygienically, correctly labelled and does not mislead the consumer. Ensure premises are safe to work in and visit.	90% Service requests responded to within service response time.	Number of Service requests received (including licensing consultations and Food Standards complaints - 952 SR's responded to within response time: 91%
N S	Paid advice visits - Food Hygiene. Approx 10 requests per year.	Improve food hygiene compliance of businesses.	Improved hygiene standards and compliance at first and subsequent inspection.	Requests for business advice carried out within 28 days. Premises subject to paid advice will be broadly compliant or	No of requests received: 1 No carried out: 1

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
		Provision of support and advice to local businesses Income generation		better after first formal inspection	
N S	Food Standards and bespoke labelling advice (paid) Approximately 1 request per annum	Improve food standard compliance of businesses. Provision of support and advice to local businesses Income generation	Improved standards and compliance of labelling and consumer information. Reduction in further interventions.	Requests for business advice carried out within 28 days. Premises subject to paid advice will be broadly compliant or better after next inspection. Premises subject to paid advice will require less enforcement action.	Number received: none
N S	Improve Food Hygiene & Health & Safety presence on RBC website and social media	Modernise and improve communications with customer. Enhance transparency and accessibility of service.	Improved communications to and accessibility of service to customers. Reduction in service requests and enquiries. Improved compliance of food businesses.	Develop H&S page on RBC webpage. Improve complaints service for customers. FSA complaints page removed. Publication of cooling tower register. Food Team posts on corporate Facebook/Twitter Feeds regarding food hygiene & Safety.	Improvements made to Food Hygiene page, contact forms, food registration form, re-rate requests and chargeable visit forms. No progress made on Health and Safety webpage. Alterations made to Special Treatments applications.
S	Ensure all officers appropriately authorised and competent. Full review of all staff competency required under new COP and new training scheme to be implemented	Food Law COP.	Service wide review of officer authorisations and delegations Review of officer competencies and skills in line with FSA new competency framework	Competent/authorised/ skilled and knowledgeable staff	Competency review under FLCOP postponed to 23-24. Required competency for new officers, contractors and role changes not completed.

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
S	Authorisation and Delegations Review including implementation of new authorisation system for staff	Food Law COP / HSWA Delegations Register. Service Plan Priority	Review the delegations register and ensure officer authorisations are up to date - as part of the corporate review of the constitution and delegations register	Delegations register is up to date There are clear lines of delegated authority for officers to have the necessary powers and authority	Updated list of all applicable legislation provided. Work in progress across Public Protection.
N S	Administration of PAPs - invoicing Updating and management of PAP register	Service Plan Priority / Target	Cost recovery Transparency of PAP management and published advice	Invoices issued within timeframe. PAP register maintained up to date. Display of correct personnel. Enquiries and enforcement requests responded to within timeframe.	Completed. PAP service fully withdrawn for Food & Safety in June 2022. No further work required.
N S	Servicing of PAPs - Annual work plan, meetings, response to queries & enforcement, review of policies/procedures, issue of assured advice, review and update of published out of date advice 15 PAPs for FH/FS/H&S Issue of PAP export Certificates	Service Plan Priority / Target of £66,000 per annum [75% EH / 25% TS]. Projected target of £33,000.00 in 22-23	Well managed PAP service compliant with statutory guidance	Level of service aligns with requirement of statutory guidance. PAP advice up to date and reviewed within timeframe. Enquiries and enforcement actions responded to within timeframe.	PAP service fully withdrawn for Food & Safety in June 2022. No further work required.

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
N S	Reading Festival - Delivery of Alfresco Award, H&S monitoring & inspection, SAG Meetings and preparation. Review of Alfresco Award and future festival delivery.	Service Target	Safeguarding RBC residents and visitors	100% of festival food premises inspected and scored under Alfresco rating. Gold, Silver & Bronze nominees made. Non-compliant traders revisited and referred to home authority. Food Team attendance at SAG Meetings prior to and during event. H&S hazards referred to Licensing	Completed. All pre and during event SAGs attended as required by Food & Safety. All public facing traders inspected and Alfresco Award issued. H&S review of pyrotechnic and special effects carried out in line with premises licence.
N S	Undertake SR review, including response time, and implement triage system.	Service requests require prioritisation to ensure that these are effectively dealt with in line with available resources.	Resources directed to highest public health risk. Improve efficiency.	Service requests responded to in accordance with public health risk presented. Increase in service requests responded to within timeframe.	No progress. Existing triage system in place.
N S	Issue of Export certificates, including development of SOPs and administration of authorisation. Estimate <5 per annum	Chargeable service. Support of local businesses and neighbouring LAs	Export certificates issued for local businesses for fishery and limited animal products following EU Exit.	Zero rejection of export certificates at EU border.	Number of certificate applications received: 0 SOPs have not been drafted for this area of work at present. Premises attestations to support export of product have been issued.
S	Covid Response - response to service complaints, proactive inspections and provision of business advice in line with Covid restrictions.	Coronavirus regulation Service Plan Priority	Ensure that businesses and facilities are covid secure to support a safe return to 'normal	Businesses are supported to ensure they are compliant with covid restrictions. Effective action is taken for non-compliance.	All allocated work completed. None outstanding based on current enforcement measures.

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
	Revisits to non-compliant premises. Attendance at internal & external meetings. Ongoing learning needs due to rapid changes in legislation.		Respond to outbreaks in line with the management control plan	Covid infections and outbreaks are kept to a minimum. Breaking chains of transmission and preventing and containing outbreaks	
S	Development, Implementation and Maintenance of Health and Safety SOPs. Training and development of staff in Health and Safety	Health and Safety has taken a backseat for more than a decade. Control measures required to be implemented by businesses during the pandemic have identified gaps in business knowledge and skills and required more focused work in health and safety.	Competent, knowledgeable and confident staff. Improved business compliance with health and safety legislation, safer work places.	Documented and implemented SOPs. Staff training records. Staff authorisation.	No Progress made.
S	Food Service Plan	Food Law Code of Practice Service Plan priority	Plan to demonstrate how the council will deliver its functions to protect the health of residents, visitors and those working in the town through the efficient and effective enforcement of food safety laws in the Borough	Plan drafted and agreed through committee.	Completed
N S	Proactive project targeting unregistered	Existing and increasing problem. Active	Few complaints about unregistered food	Online monitoring of Reading based premises operating as	Not completed. FSA yet to publish updated advice for dealing with

S / N S	Action, [what are going to change deliver or improve]	Reason	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	End of Year Update
	online food businesses; Requirement to registered, provision of FH/FS advice, follow up enforcement action.	consideration being given by FSA ABC programme. Public Health Issue.	businesses. Increased confidence in hygiene and safety of online food traders.	food businesses would should reduced number of unregistered premises.	online premises including aggregator role.
S	Respond to FOI Request	Statutory function - Freedom of Information Act 2000	Customer service Legally compliant Council	FOI responded to and closed within 20 days	28 FOI's received. 89% responded to within service response time. All received FOI's responded to.

APPENDIX 5

Food & Safety Work Plan Apr 2023 Mar 24

This Work plan identifies the work streams currently undertaken by the Food & Safety Team which sits within Public Protection. This work plan covers both annual recurring work (A) and individual, one off projects (O) that fall within the remit of the Food & Safety team and have been identified as action required. In collating this plan consideration has been given to present and emerging risks including those arising from known legislative changes. It does not account for future legislative changes that have not been published at this time. This work plan covers the period April 2023 through to March 2024.

Work streams have been identified as Statutory (S) or Non-statutory (NS).

Work streams have been prioritised 1-3 with 1 considered highest priority.

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S / NS	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will we know we have delivered]	Resources	Training Needs			Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]				Start	Finish	Lead				
S	Food Hygiene Inspection Programme Until 31 March 2024. Premises inspected in accordance with FSA Guidance	Requirement of Food Law COP.	Premises subject to hygiene requirements inspected and compliant to ensure	Aim: 100% A premises 80% B Premises 70% Unrated premises inspected	PEHO - Management of inspection lists, monitoring of inspection and consultation with officers - 20 Days (0.08 FTE)	Induction training of new officers in line with Food Law COP.	01/04/23	31/03/24	PEHO	1	Healthy Environment	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Lead	Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
						Start	Finish	Lead				
	<p>on Service return No of premises due/over due inspection for this year = 1207</p> <p>New registered premises per year = c. 255</p> <p>Total 1462 inspections due.</p>	safe food. Education of local businesses		Inspections (avg 3 hours incl officer administration) = 4386 Hours (2.6 FTE)	training and available courses							
S	Food Hygiene Revisits and subsequent	Food Law COP	Staged enforcement action in line	Increase in FHRS at re-rate or next inspection.	PEHO - Consultation/Review of notices -	Induction training of new officers in line with	01/04/23	31/03/24	PEHO	1	Healthy Environment	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
						Start	Finish	Lead			
	<p>nt enforcement of non-compliant premises . Approximately 20% of premises are being found to be non-compliant . Estimate 292 premises. Ongoing non-compliance will require issue of formal notices</p>	<p>with the Corporate Enforcement policy to improve food hygiene standards and ensure safe food.</p>	<p>NC premises will be noted as Compliant on database and Notices will be complied with. Premises revisited on time in accordance with notice expiry date. Any court proceedings to be brought within time limit.</p>	<p>5 days (0.02 FTE) Inspecting Officers (1 day per premises avg) = 2161 Hours (1.27 FTE)</p>	<p>Food Law COP. All officers to maintain Food CPD through ABC online training and available courses</p>						

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
	and potentially lead to prosecution.											
S	Ongoing Enforcement including issue of notices. Resulting from ongoing or immediate non-compliance where a risk to public health and safety is presented.	<i>Food Law COP</i>	<i>Staged enforcement action in line with the Corporate Enforcement policy to improve food hygiene standards and ensure safe food.</i>	<i>Increase in FHRs at re- rate or next inspection. NC premises will be noted as Compliant on database and Notices will be complied with. Premises revisited on time in accordance with notice</i>	Officers (incl review by second officer) 1.5 Days per Notice/Pr emises 0.16 FTE	All officers to maintain Food CPD through ABC online training and available courses. Introducti on and shadowing for new officers prior to authorisat ion. Refresher training	01/ 04/ 23	31/ 03/ 24	PEHO	1	Healthy Environment	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Lead	Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
						Start	Finish	Lead				
	Approx 25 per annum		expiry date. Any court proceedings to be brought within time limit.		for existing							
S	Approval of Premises Process applications for new approval activities . Inspect and review existing approved premises .	Food Law COP	Approval activities authorised and published. Food products accurately labelled and traceable.	Applications and inspections carried out within SOP timeframe . Full approval awarded after max 6 months or removed.	Average 1 new premises a year (min 5 days for each new premises) Inspection to existing premises (6) at 1 day each. Total 11 days / 80 Hours (0.05 FTE)	Induction training of new officers in line with Food Law COP. All officers to maintain Food CPD through ABC online training and available courses	01/04/23	31/03/24	PEHO	1	Healthy Environment	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will know we have delivered]	Resource s	Training Needs	Start			Service Plan Priority (1- 3)	Annual Requirement [A]/ One off project [O]	
						Start	Finish	Lead			
S	Food Hygiene Re-Rating visits (FHRS) for premises not overdue/ due inspection Avg 35 requests received per year	FHRS Brand Standard	Increase in FHRS and improved compliance with FH requirements. Increased consumer confidence in premises	0.5 days per premises (pre & post admin, inspection and liaison with business) 18 officer Days = 130 Hours (0.08 FTE)	Review of updated Brand Standard	01/04/23	31/03/24	PEHO	2	Healthy Environment Thriving Community	A
S	Respond to FHRS Appeals Estimate 5 per annum	FHRS Brand Standard	Appeals handled in accordance	PEHO - 1 day per appeal (5 days) Officer time -	Familiarisation with updated Brand Standard.	01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Service Plan Priority (1-3)	Annual Requirement [A]/ One off project [O]		
						Star	Fin	Lead				
		with Brand Standard. Maintain confidence in Food Hygiene Inspections	Appeals resolved without moving to Corporate Complaint.	0.5 day per appeal (2.5 days) = 54 Hours (0.03 FTE)								
S	Food Standards Inspection Programme Until 31 March 2024. No of due and overdue inspections = 1050	Food Law COP. Service Plan Priority / Target	Premises subject to standards requirements inspected and compliant to	Aim: 100% A premises	EH/TS Officers - 1.5 hours per inspection (including officer administration) Total officer hours - 1958	Training to all officers in new PPDS and calorie labelling requirements. Training for all unauthorised/new officers in	01/04/23	31/03/24	PEHO SCPO	1	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Pri ori ty (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off projec t [O]	
		Outco me [what differ ence will this make]				Star t	Fin sh	Lead				
	New registre d premises per annum approx. 255 Total Inspectio ns due - 1305		<i>ensure safe, correc tly labelle d food which does not mislea d the consu mer. Educat ion of local busine sses</i>		Hours (1.15 FTE)	Food Standards inspectio ns						
S	Food Standard Revisits. Estimate 10% of premises required revisits following decline in	<i>Food Law COP</i>	<i>Staged enforc ement action in line with the Corpor ate Enforc</i>	<i>Increase in compliance and confidence in managem ent at next inspection. Revisits carried out</i>	(EH/TS) 0.5 days per inspectio ns. = 471 Hours (0.28 FTE)	Training to all officers in FIRIN Notices	01/ 4/2 3	31/ 03/ 24	PEHO SCPO	1	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]				Start	Finish	Lead			
	standards and new legislation. Approx. 130		ement policy to improve the level of information provided to consumers and ensure they can make an informed choice .	in line with contravention deadline. Notices reassessed for compliant within identified timescale. NC premises will be noted as Compliant on database and Notices will be complied with. Any court proceedings to be brought							

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
						Start	Finish	Lead			
S	Food, Water & Environmental Sampling (Microbiology) Average 150 samples per annum.	Food Law COP Sampling Plan Local/National sampling programme	Ensuring food offered for sale is microbiologically safe and does not present a risk to health. Reduction in incidence of food borne illness.	<p>within time limit.</p> <p>S/EHO's - 25 days preparation and sampling = 185.5 Hours</p> <p>SEHO - Quarterly Meetings attended. (0.5 days) = 14.84 Hours</p> <p>PEHO - Allocation and monitoring (3 days) = 22.26 Hours</p> <p>Total = 222.6</p>	<p>Practical training and authorisation for new officers.</p> <p>All officers to undertake sampling to maintain competence</p>	01/04/23	31/03/24	PEHO	2	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Pri ori ty (1- 3)	Corporate Plan Priority	Annual Requir ement [A]/ One off projec t [O]	
		Outco me [what differ ence will this make]				Start	Fin ish	Lead				
					Hours (0.13 FTE)							
S	Food Standard s Sampling Estimate 50 samples per annum	Food Law COP Sampli ng Plan Local/N ational samplin g progra mme	Ensuri ng food offere d for sale is correc tly labelle d, safe and does not mislea d the consu mer. Reduct ion in food compl aints and referr als.	Unsatisfact ory samples followed up with further interventio n and re- sampling where necessary.	SCPO - 20 days preparati on and sampling = 148.4 Hours PEHO - 2 days monitorin g = 14.84 Hours Total = 163 Hours (0.1 FTE)	Practical training and authorisat ion for new officers. All officers to undertake sampling to maintain competen ce	01/ 04/ 23	31/ 03/ 24	PEHO SCPO	2	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
NS	National Food Hygiene Rating Scheme (FHRS) Administration	Discretionary function to take part in scheme . All LA's in England participate. Expectation of Customers.	Enabling consumer to assess food hygiene and safety . Provide consumer confidence in Reading businesses	Premises details uploaded to FHRS website fortnightly . Display of correct premises information	Business Support - Fortnightly submission of ratings 24 days per annum PEHO - 5 days per annum housekeeping. = 37 Hours (0.02 FTE)	New Business support staff trained in data maintenance and upload. Officers refreshed on data maintenance and recording	01/04/23	31/03/24	PEHO Business Support Manager	1	Healthy Environment Thriving Community	A
S	Annual FSA Return (LAEMS) Temperature	Food Law COP	Transparent Food Hygiene and Standards	LAEMS Return or equivalent accurately completed within time limit	PEHO - Housekeeping & reporting (10 days) = 74 Hours	Training on Civica App and LAEMS required for PEHO and	01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
	check returns		performance		(0.04 FTE)	Business Support						
S	Drafting, Implementation and maintenance of Policies and Procedures, plus ongoing annual review. Following update and reissue of the new COP in March 2021 a full review and	Food Law COP require s each LA to have written policies and procedures in place for the following: • Approval • Food Business Establishment	Enabling staff to efficiently, fairly and transparently conduct their role and respond to service requests and complaints.	Documented procedures in line with Food Law COP.	PEHO/SE HO - 5 days per procedure, plus additional days for sub-procedures, e.g. enforcement. Estimate 777 Hours (0.45 FTE)	Officer familiarisation with new areas of work.	01/ 04/ 23	31/ 03/ 24	PEHO	2	Healthy Environment Thriving Community Inclusive Economy	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
						Start	Finish	Lead			
	update of all documented procedures must be carried out including drafting and implementation of those not previously in place.	Database • Food Incidents and Alerts • Authorisation • Control Verification • Corporate Complaints • Food Complaints • Sampling • Equipment • Official	Provision of good customer service.								

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
		food contr ols and other activi ties										
		<ul style="list-style-type: none"> • Enfor ceme nt • Contr ol and inves tigati on of outbr eaks and food relat ed infect ious disea se 										

S / N S	Reason Action, [what are going to change deliver or improve]	Outco me [what difference will this make]	Success Measures [how will we know we have delivered]	Resource s	Training Needs	Start			Service Plan Pri ori ty (1-3)	Corporate Plan Priority	Annual Requir ement [A]/ One off projec t [O]
						Start	Fin ish	Lead			
	<ul style="list-style-type: none"> • Infor mation • Regis tratio n • Confli ct of Inter est • Samp ling Polic y • Enfor ceme nt Polic y • Comp lains Polic y • Conti ngenc y Plan 										

S / N S	Reason Action, [what are going to change deliver or improve]	Outco me [what difference will this make]	Success Measures [how will we know we have delivered]	Resource s	Training Needs	Start			Service Plan Pri ori ty (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off projec t [O]
						Star t	Fin ish	Lead			
N S	Inspection of notified cooling towers and evaporative condensers for the prevention and control of Legionella spp. Est. 1 premises per annum Development, maintenance and implementation of SOPs	HSWA1974 Inspected, managed and maintained cooling towers reducing the likelihood of legionnaires disease.	All cooling towers registered and inspected. Cooling Towers risk rated 'A' inspected annually.	Officers - Inspections (including shadowing) 2 days PEHO/SEHO - SOPs, training & authorisation 5 days 0.04 FTE	Training of new, unauthorised officers in the risks and controls relating to Legionella. Shadowed/shadowing inspections. Refresher training for existing staff.	01/04/23	31/03/24	PEHO/SEHO	2	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Outcome [what difference will this make]	Success Measures [how will know we have delivered]	Resources	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]			
							Start	Finish	Lead						
S	Inspection and certification of registering special treatment premises · New registrations Operator and/or premises) per year = Approx. 20 Backlog of existing premises = 60	Local Govt Miscellaneous Provisions Act		Compliant premises. Reduced incidence of blood borne infection.	Mobile and domestic premises inspected and compliant prior to certificate being issued. Backlog of commercial premises awaiting inspection removed.	Inspecting officers - 3 hours per premises. 240 Hours 0.14 FTE				1	Healthy Environment Thriving Community Inclusive Economy	A			
S	Special Treatment	Local Govt Miscellaneous	Compliant	Revisits carried out		1 day per premises. 29 Hours				01/04/23	31/03/24	PEHO	1	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Outcome [what difference will this make]	Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
							Start	Finish	Lead			
	nt Revisits. Approx 5% of premises are found to be non- compliant requiring further attention and enforcement action.	neous Provisio ns Act Health and Safety at Work Etc Act 1974	premis es. Reduc ed incide nce of blood borne infecti on.	within timeframe. Legal notices complied with in accordance	0.04 FTE							
N S	Review and replacem ent of Byelaws for Special Treatme nts	Byelaw s do not confor m with nationa l guidanc e and templat e. RBC does	Up to date byela ws adheri ng to nation al templ ates. Reduc ed	New byelaws in place.	PEHO/SE HO - Legal process to implemen t new byelaws Committee adoption.					3	Healthy Environment Thriving Community Inclusive Economy	O

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]	burden for low risk activities.			Start	Finish	Lead				
		not have a full copy of the signed byelaws .	burden for low risk activities.		Estimate 30 days (222Hours) (0.14FTE)							
S	Investigation of Infectious diseases and outbreaks including : Food borne illness & Legionnaire's disease. (Excl. Covid 19) Estimate 225	National and Local Policy	Reduced incidence of infectious disease and outbreaks including food borne illness	Cases investigated in line with internal SOPs and Thames Valley single case protocol. Outbreaks investigated in line with National Guidance. Service requests responded to within	S/EHO - 2 Hours per case 450 Hours Outbreak - PEHO/SEHO x 2 at 10 days each = 148 Hours (0.35 FTE)	New officers trained in internal and local SOPs. ABC training available to all officers.	01/04/23	31/03/24	PEHO	1	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Outcome [what difference will this make]	Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
							Start	Finish	Lead				
	cases per year Outbreak s: Estimate 1 per year			internal standards.									
S	Statutory H&S return to HSE	National Enforcement requirement for the compilation of statistics and interventions with poor performing authorities	Contribute to national enforcement statistics. Inform and develop future interventions and national policy	Return completed accurately and by deadline.	PEHO Housekeeping and return (3 days (0.01 FTE)		Training in Civica App (or alternative) to compile relevant data reports.	01/ 04/ 23	31/ 03/ 24	PHO	1	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
S	Sports Ground Safety - Complete SGSA Audit	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Annual audit completed within timeframe. Actions addressed and completed within timeframe.	Service Manager - 0.5 days PEHO - 3 days Total - 0.02 FTE	Familiarisation of new staff with relevant SOPs.	01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community Inclusive Economy	A
S	Sports Ground Safety Inspection programme	Statutory requirement Safety at Sports Ground Act 1975 and associated	Structurally safe and well managed sports ground	Min. 3 during match inspections carried out following risk assessment process. Inspection reports provided within SOP	Service Manager - 1.5 day PEHO - 6 days SEHO - 6 days Inspection, pre & post admin. Total 100.17	Familiarisation of new staff with relevant SOPs. Shadowed visits to be completed .	01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community Inclusive Economy	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]	timeframe and enforcement action taken accordingly .									
		legislation			Hours (0.06 FTE)	New staff to undertake LCB Safety at Sports Ground training.						
S	Annual review and issue of Safety Certificate for Reading FC	Statutory requirement Safety at Sports Ground Act 1975 and associated legislation	Structurally safe and well managed sports ground	Annual issue of Safety Certificate . Annual review of updated Operations Manual.	PEHO/SE HO 5 days Each = 74 Hours (0.04 FTE)	New staff to undertake LCB Safety at Sports Ground training.	01/ 04/ 23	31/ 03/ 24	PEHO	1	Healthy Environment Thriving Community Inclusive Economy	A
S	Review of Operations Manual	Statutory requirement Safety	Structurally safe and well	Established SAG Meeting schedule	PEHO/SE HO 121 Hours (17 days)	New staff to undertake LCB Safety at	01/ 04/ 23	31/ 03/ 24	PEHO	1	Healthy Environment Thriving Community Inclusive Economy	A/O

S / N S	Action, [what are going to change deliver or improve]	Reason		Outcome [what difference will this make]	Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
							Start	Finish	Lead				
	and Issue of new Safety Certificate for Palmer Park Regulated Stand Plus initial engagement and sent up of SAG meetings	at Sports Ground Act 1975 and associated legislation	managed sports ground	Clear and consistent lines of communication. Issue of new Safety Certificate .	for first review Follow up reviews and amendments - 7.5 days. SAGs - 20 hours per annum. Engagement 2 days Total = 0.13 FTE		Sports Ground training.						
S	SAG attendance Reading FC	Statutory requirement Safety at Sports Ground	Structurally safe and well managed	Quarterly meetings carried out with wide attendance . TOR in place.	PEHO & SEHO - attendance, pre and post admin incl. action		New staff to undertake LCB Safety at Sports Ground training.	01/ 04/ 23	31/ 03/ 24	PEHO	1	Healthy Environment Thriving Community Inclusive Economy	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
		Act 1975 and associated legislation	sports ground	Meetings Minuted and actions taken within timeframe.	review and minutes. Est. 74 Hours per annum (0.04 FTE)	Safety Advisory Group Training for allocated officers.						
S	Drafting, implementation and maintenance of SOPs for Sports Ground Safety	Requirement of SGSA and sports ground safety regulation. Identified requirement of annual SGSA audit	Improved performance at annual SGSA audit. Officer consistency will improve customer service	Documented procedures for sports ground safety work.	PEHO/SEHO - Est. 20 days (research, drafting, implementation, review). 0.09 FTE	New staff to undertake LCB Safety at Sports Ground training.	01/04/23	31/03/24	PEHO	3	Healthy Environment Thriving Community Inclusive Economy	A/O

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]				Start	Finish	Lead				
S	Review and respond to Licensing consultations concerning premises licences, events and street trading. Including attendance at SAG. Approx 125 consults per annum	Statutory consultee	Safer Events	Representation at and contribution to Safety Advisory Group Meetings Proactive review of Event documentation Liaison with Event operators and objection to events where deemed necessary.	PEHO/SEHO - attendance at monthly SAG - 9 days, incl. preparation. 27 days = 261 Hours All officers - review and respond to consultations (1 hour each) = 125 Hours Total = 386 Hours		01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]				Start	Finish	Lead				
					(0.23 FTE)							
N S	Undertake review of FH role in licensing consultations and align team, including draft and implementation of new SOPs	Current procedure does not align with licensing objectives. Inconsistent approach to license reviews.	Improved customer service through officer consistency. Contribution to Public Safety.	New SOP implemented Database actions reflect new SOP	PEHO/SEHO - 5 days. (0.02 FTE)	Familiarisation of all staff on new SOPs	01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community	O
S	Review and respond to consultations from planning,	Statutory Consultee. Current procedures do not	Active contribution to consultations.	New SOP implemented Database actions reflect new SOP	PEHO - 5 days / 37 Hours S/EHO - Review & Response to	Familiarisation of all staff on new SOPs	01/04/23	31/03/24	PEHO	2	Healthy Environment Thriving Community	O/A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Pri ori ty (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off projec t [O]	
		Outco me [what differ ence will this make]				Star t	Fin ish	Lead				
	building control. Including liaison with departments, draft and implementation of new procedures.	allow for a consistent or collaborative approach. Safe and compliant premises	Collaboration with neighbouring teams to ensure safe and compliant premises.	Referral of relevant premises through to Planning, Building Control Consultation on Planning and building control consultations.	consultations. Referral of non-compliant premises. Est. 10 per annum at 2 hours each. Total 0.03 FTE							
S	Imported Food (Official Controls)	Food Law COP	Food products offered for sale will be legally compliant, properly labelled	Service requests actioned within timeframe. Targetted sampling	Resourcing for individual cases included in inspections & SRs above. PEHO/SEHO - Draft and	Familiarisation of all staff on new SOPs. Training of new and existing officers on notices	01/04/23	31/03/24	PEHO	1	Healthy Environment Thriving Community	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
			d and safe to eat.		implemen- tation of Procedur- es - included above.							
S	Reactive food & Safety work (service requests) <ul style="list-style-type: none"> • Dirty food premises • Microbiological, chemical & labelling • Allergens • Health, safety & Welfare 	Food Law COP and FSA guidance on service return. HSWA/ EAR	Ensure food on sale is safe to eat, produced hygienically, correctly labelled and does not mislead the consumer. Ensure premises	All Service requests responded to.	All officers - 2 hour per SR on average. 2100 Hours (1.23 FTE)	Familiarisation of new officers with SOPs New officers shadow/s hadowed visits to complex complaints.	01/04/23	31/03/24	PEHO	1	Building Relationships Thriving Community Inclusive Economy Services	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]		
		Outcome [what difference will this make]				Start	Finish	Lead					
	<ul style="list-style-type: none"> Business advice Approximately 1050 per annum.		es are safe to work in and visit.										
N S	Paid advice visits - Food Hygiene. Approx 10 requests per year. (Subject to promotion)	Improve food hygiene compliance of businesses. Provision of support and advice to local businesses Income generation	Improved hygiene standards and compliance at first and subsequent inspection.	Requests for business advice carried out within 28 days. Premises subject to paid advice will be broadly compliant or better after first formal inspection	S/EHO - 0.5 days per premises (incl. correspondence and preparation) 0.02 FTE	N/A		01/04/23	31/03/24	PEHO	2	Thriving Community Inclusive Economy	A
N S	Food Standards and	Improve food standards	Improved standards	Requests for business	SCPO -5 days per annum	N/A		01/04/23	31/03/24	PEHO	2	Thriving Community Inclusive Economy	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]				Start	Finish	Lead				
	bespoke labelling advice (paid) Approximately 5 requests per annum (subject to promotion)	d compliance of businesses. Provision of support and advice to local businesses Income generation	rds and compli ance of labelli ng and consu mer inform ation. Reduct ion in furthe r interv entions.	advice carried out within 28 days. Premises subject to paid advice will be broadly compliant or better after next inspection. Premises subject to paid advice will require less enforcement action.	0.02 FTE							
N S	Improve Food Hygiene & Health & Safety presence on RBC	Modern ise and improv e commu nications with	Improv ed commu nications to and access	Develop H&S page on RBC webpage. Improve complaints service for	PEHO - initiation, review and implemen tation - 10 days	Nominate d officer(s) require familiarisa tion with corporate	01/ 04/ 23	31/ 03/ 24	PEHO /SEH O	1	Healthy Environment Thriving Community	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs			Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
							Start	Finish	Lead			
	website and social media	customer. Enhance transparency and accessibility of service.	ibility of service to customers. Reduction in service requests and enquiries. Improved compliance of food businesses.	customers. FSA complaints page removed. Publication of cooling tower register. Food Team posts on corporate Facebook/ Twitter Feeds regarding food hygiene & Safety.	SEHO/SC PO - 15 days 0.1 FTE	standards for publications and website						
S	Ensure all officers appropriately authorise	Food Law COP.	Service wide review of officer author	Competent /authorised/ skilled and knowledgeable staff	PEHO - 20 days / 740 Hours Officers - 5 days	PEHO review of new COP standards PEHO to attend	01/04/23	31/03/24	PEHO	1	N/A Legal requirement	O / A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
	d and competent. Full review of all staff competen cy required under new COP and new training scheme to be implemen ted		isation s and delega tions Revie w of officer compe tencie s and skills in line with FSA new compe tency frame work		per officer (x8) = 296 Hours 0.6 FTE	FSA webinar(s) regarding new competen cy requireme nts.						
S	Authorisa tion and Delegatio ns Review including impleme ntation	Food Law COP / HSWA Delegat ions Registe r.	Revie w the delega tions registe r and ensure officer	Delegatio ns register is up to date There are clear lines of	PEHO - 10 days SEHO - 10 days 0.09 FTE	N/A	01/ 04/ 22	31/ 03/ 23	PPM/ CPGM	1	N/A - Legal Requirement	0

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
	of new authorisation system for staff	Service Plan Priority	authorisation s are up to date - as part of the corporate review of the constitution and delegations register	delegated authority for officers to have the necessary powers and authority								
N S	Servicing of PAPs (Food Standards Only) - Annual work plan, meetings		Well managed PAP service compliant with statut	Level of service aligns with requirement of statutory guidance. PAP advice up to date	Food Standards Officer (SCPO) - 0.1 FTE	Inexperien ced officers to complete OPSS training and familiarisa tion.	01/ 04/ 23	30/ 06/ 24	PTSO /SCP O	3	N/A	A

S / N S	Reason Action, [what are going to change deliver or improve]	Outcome [what difference will this make]	Success Measures [how will we know we have delivered]	Resources	Training Needs	Start			Service Plan Priority (1-3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
						Start	Finish	Lead			
	, response to queries & enforcement, review of policies/procedures, issue of assured advice, review and update of published out of date advice Issue of PAP export Certificates	ory guidance	and reviewed within timeframe. Enquiries and enforcement actions responded to within timeframe.		Officer handovers for PAP changes						

S / N S	Reason Action, [what are going to change deliver or improve]	Outco me [what difference will this make]	Success Measures [how will we know we have delivered]	Resource s	Training Needs	Start			Service Plan Pri ori ty (1-3)	Corporate Plan Priority	Annual Requir ement [A]/ One off projec t [O]
						Star t	Fin ish	Lead			
N S	Service Target Reading Festival - Delivery of Alfresco Award, H&S monitoring & inspection, SAG Meetings and preparation. Review of Alfresco Award and future festival delivery.	Safeguarding RBC residents and visitors	100% of festival food premises inspected and scored under Alfresco rating. Gold, Silver & Bronze nominees made. Non-compliant traders revisited and referred to home authority. Food Team attendance at SAG Meetings prior to	PEHO - 15 days (incl. SAG, team meetings, admin, preparation) = 181 Hours Officers - 63 onsite days. 5 days H&S document review = 504 Hours Training - Officers - 20 Hours 0.4 FTE	Event Safety training across Food & Safety & Licensing Teams. Nominated officers to received training in Safety Advisory Groups. Annual food hygiene consistency exercise. Pyrotechnic training.	01/04/23	31/03/24	PPM/CPGM/PEHO	1	Healthy Environment Thriving Community Inclusive Economy	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Start	Finish	Lead	Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
		Outcome [what difference will this make]										
				and during event. H&S hazards referred to Licensing								
NS	Undertake SR review, including response time, and implement triage system.	Service requests require prioritisation to ensure that these are effectively dealt with in line with available resources.	Resources directed to highest public health risk. Improve efficiency.	Service requests responded to in accordance with public health risk presented. Increase in service requests responded to within timeframe.	PEHO 1 day SEHO 2 days Officers - 10 hours 0.02 FTE	N/A	01/ 04/ 23	31/ 03/ 24	PEHO	2	Healthy Environment Thriving Community Inclusive Economy	0

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs	Star t	Fini sh	Lead	Ser vic e Pla n Pri ori ty (1- 3)	Corporate Plan Priority	Annua l Requir ement [A]/ One off projec t [O]
		Outco me [what differ ence will this make]										
S	Development, Implementation and Maintenance of Health and Safety SOPs. Training and development of staff in Health and Safety	Health and Safety has taken a backseat for more than a decade . Control measures required to be implemented by businesses during the pandemic have identified gaps in	Competent, knowledgeable and confident staff. Improved business compliance with health and safety legislation, safer workplaces .	Documented and implemented SOPs. Staff training records. Staff authorisation.	Review, development and implementation of SOPs and additional materials as required. PEHO/Lead SEHO - 25 days each. SEHOs - Training, development and review of new SOPs. Shadowed visits. 10 days each	Training & Development needs assessment. Refresher training for all staff in all areas of H&S commencing with priority matters including: LPG Electrical Safety Asbestos Accident investigation Special Treatments	01/04/23	31/03/24	PEHO	2	Healthy Environment Thriving Community	O/A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]				Start	Finish	Lead				
		business knowledge and skills and required more focused work in health and safety.			Total estimate 90 days 0.4 FTE							
S	Food Service Plan	Food Law Code of Practice Service Plan priority	Plan to demon strate how the council will deliver its functions to protect the health	Plan drafted and agreed through committee	Review of previous years performance. Target setting for upcoming year and assessment of resources	Further training in Civica (or replacement) to run appropriate reports.	01/ 04/ 23	30/ 06/ 24	PEHO	1	Healthy Environment	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]	
		Outcome [what difference will this make]				Start	Finish	Lead				
			of reside nts, visitor s and those workin g in the town throug h the efficie nt and effecti ve enforc ement of food safety laws in the Boroug h		PEHO - 10 days 0.045 FTE per annum							
S	Officer Training to ensure	Require ment for	Compe tent and	Minimum requireme	Minimum 30 Hours per		01/ 04/ 22	31/ 03/ 23	PEHO	1	N/A - Competency Requirement	0

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Pri ori ty (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off projec t [O]	
		Outco me [what differ ence will this make]				Star t	Fin ish	Lead				
	competen cy in all relevant areas of work	professi onal status. Require ment under FLCOP	knowl edgea ble officer	nts for CDP met.	officer per annum. 0.14 FTE							
N S	Proactive project targeting improvement of hygiene standards within business s	Compli ant business with high food hygiene and safety standar ds.	Improv ement in compli ance and FHRS rating of business s. Reduct ion in the numbe r of Non- broadl y compl aint	Increase in Food Hygiene Rating following proactive project interventio n.	Estimate 6 hours per premises. Estimate 30 premises to be prioritise d. = 180 Hours / 0.11 FTE		01/ 04/ 23	31/ 03/ 24	CPGM / PEHO / SEHO	2	Healthy Environment Thriving Community	A

S / N S	Action, [what are going to change deliver or improve]	Reason		Outcome [what difference will this make]	Success Measures [how will know we have delivered]	Resources	Training Needs			Service Plan Priority (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off project [O]
							Start	Finish	Lead			
				(0-2 rated) busines ses in Reading.								
S	Respond to FOI Request	Statuto ry func tion - Freed om of Inform ation Act 2000	Custo mer servic e Legall y compl iant Counc il	FOI respond ed to and closed within 20 days	Estimate 30 per annum. 1 day per FOI (avg) = 30 days 0.13 FTE	All Senior officers require training and familiar isation with the updated corporate system.	01/ 04/ 23	31/ 03/ 24	PEHO	1	Inclusive Economy	A
N S	Arcus Project - Support to testing and implem entation of Arcus MIS for Food Hygiene, Food	New MIS being implem ented across Service	N/A	Tested and fully function ing MIS.	PEHO - 30 days Officers - 10 days each = 724 Hours 0.43 FTE	All officers will require training on new system	01/ 04/ 23	28/ 02/ 24	AD - PTPP	1	N/A - Directorate Requirement	O

S / N S	Action, [what are going to change deliver or improve]	Reason		Success Measures [how will know we have delivered]	Resource s	Training Needs			Service Plan Pri ori ty (1- 3)	Corporate Plan Priority	Annual Requirement [A]/ One off projec t [O]	
		Outcome [what differ ence will this make]				Start	Finish	Lead				
	Standards , Health and Safety and Special Treatmen ts											
S	Accident Investigat ion. Full investigat ion off and bringing of appropria te legal action following serious health and safety accident and local wholesale r.	HSWA7 4 - Investig ation of acciden ts	Safer busines ses	Regular Case reviews, authorisati on to proceed, Work carried out in line with specified time frame for internal/ex ternal legal representa tives.	PEHO - 30 days / 217 Hours = 0.13 FTE SEHO's 0.4 FTE	Training in disclosure requireme nts and refresher on legal & enforcem ent procedure where required	Ong oing		PEHO /SEH O	1	Healthy Environment	0

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READING BOROUGH COUNCIL CLIMATE IMPACT ASSESSMENT TOOL

What You Need to Do:

The spreadsheet on the next tab has been designed to help you consider the climate change implications of a new project, proposal or recommendation. **All Committee Reports, Project Business Cases and budget bid proposals require a climate impact assessment.**

When rating the climate change impacts of your project/ proposal, there are two key issues to consider:

1. Impact on carbon emissions - will the project/ proposal:

* Reduce the overall amount of energy being used/waste being produced/transport emissions?	No
* Increase the overall amount of energy being used/waste being produced/transport emissions?	No
* Have no effect on the amount of energy being used/waste being produced/transport emissions?	Yes

2. Impact on resilience to the effects of climate change - will the project/ proposal:

* Increase the ability of Reading, residents and/or RBC to withstand the effects of climate change?	No
* Reduce the ability of Reading, residents and/or RBC to withstand the effects of climate change?	No
* Have no effect on the ability of Reading, residents and/or RBC to withstand the effects of climate change?	Yes

The tool requires you to consider these issues with reference to **8 different criteria** e.g.: Energy Use; Waste Generation; Exposure to Heat Waves; Flooding, etc. *Not all of these criteria will necessarily be relevant to your project/ proposal.* Where a specific criteria is not relevant to your project/ proposal, assign a 'Nil' rating.

Where you identify either a positive or a negative impact, you are required to assess whether this impact will be **High, Medium or Low**. There is some guidance on the next tab to help you distinguish between High, Medium and Low impacts.

Results:

Once you have applied a rating to each of the 8 assessment criteria, **you decide the overall rating your project/proposal should have.**

If your project has negative as well as positive impacts, you decide what the overall rating should be by weighing the positive and negative impacts, but you must explain how the overall rating given to your project/proposal has been derived.

It is also compulsory to highlight any negative environmental impacts your project may have, which may have been 'masked' by the overall rating. You may do this in the commentary box below your rating.

Tips:

1. Concentrate on the most significant issues - there is the potential to consider the appraisal in a very detailed way. This should be avoided at this stage.
2. Where you have identified a negative impact, think about how you are going to manage or mitigate this impact and explain this in your report.

If you require assistance in completing the Climate Impact Assessment tab, please contact the Head of Climate Strategy (peter.moore@reading.gov.uk x4275) or the Sustainability Team Manager (ben.burfoot@reading.gov.uk x2232)

Once you have completed the Climate Impact Assessment tab, please email the completed spreadsheet to climateassessment@reading.gov.uk.

Project / Proposal Name or Reference:

Date:

Your Name:

APPENDIX 2

Food Service Plan 2023-24		24-May-23	Katie Heath	
1. IMPACT ON CARBON EMISSIONS				
HOW WILL THIS PROJECT/PROPOSAL AFFECT:	CONSIDERATIONS	IMPACT?	GUIDANCE IF NEGATIVE/NIL RATING HAS BEEN AWARDED	SUMMARISE HOW YOU PLAN TO MANAGE AND REDUCE ANY NEGATIVE IMPACTS
	<i>See guidance below on determining whether negative or positive impacts are High, Medium or Low</i>	<i>Use drop down list</i>		
1	ENERGY USE	Nil	Consider: - Energy efficiency measures - Renewable energy - Reducing demand for energy	It is not envisaged that, as a result of this plan, more energy will be consumed or emissions generated than there currently is.
2	WASTE GENERATION	Nil	Consider: - Re-usable/recycled goods - Recycling facilities - Reducing/reusing resources	It is not envisaged that, as a result of this plan, more waste will be generated than there currently is.
3	USE OF TRANSPORT	Nil	Consider: - Use of public transport - Reducing need to travel or transport goods - Alternative fuels/electric vehicles/walking and cycling	It is not envisaged that, as a result of this plan, there will be any increase or decrease in the use of transport.
2. IMPACT ON RESILIENCE TO THE EFFECTS OF CLIMATE CHANGE				
HOW WILL THIS PROJECT/PROPOSAL AFFECT THE ABILITY OF READING TO WITHSTAND:	CONSIDERATIONS	IMPACT?	GUIDANCE IF NEGATIVE/NIL RATING HAS BEEN AWARDED	SUMMARISE HOW YOU PLAN TO MANAGE AND REDUCE ANY NEGATIVE IMPACTS
	<i>See guidance below on determining whether negative or positive impacts are High, Medium or Low</i>	<i>Use drop down list</i>		
4	HEATWAVES	Nil	Greater need for cooling, ventilation, shading and hydration methods	N/A
5	DROUGHT	Nil	Greater need for water management and perhaps reserve supplies	N/A
6	FLOODING	Nil	Consider flood defence mechanisms or alternative arrangements (business continuity)	N/A
7	HIGH WINDS / STORMS	Nil	Greater need for stabilisation measures, robust structures resilient to high winds	N/A
8	DISRUPTION TO SUPPLY CHAINS	Nil	Source key goods and services locally as it reduces exposure to supply chain disruption and boosts the local economy	N/A

Weighing up the negative and positive impacts of your project, what is the overall rating you are assigning to your project?:

Net Nil

This overall rating is what you need to include in your report/budget proposal, together with your explanation given below.

Guidance on Assessing the Degree of Negative and Positive Impacts:

Note: Not all of the considerations/ criteria listed below will necessarily be relevant to your project

Low Impact (L)	* No publicity
	* Relevant risks to the Council or community are Low or none
	* No impact on service or corporate performance
	* No impact on capital assets; or relates to minor capital assets (minor works)
Medium Impact (M)	* Local publicity (good or bad)
	* Relevant risks to the Council or community are Medium
	* Affects delivery of corporate commitments
	* Affects service performance (e.g.: energy use; waste generation, transport use) by more than c.10%
High Impact (H)	* Relates to medium-sized capital assets (individual buildings or small projects)
	* National publicity (good or bad)
	* Relevant risks to the Council or community are Significant or High
	* Affects delivery of regulatory commitments
	* Affects corporate performance (e.g.: energy; waste; transport use) by more than c.10%
	* Relates to major capital assets (larger buildings and infrastructure projects)

In the box below please summarise any relevant policy context, explain how the overall rating has been derived, highlight significant impacts (positive and negative) and explain actions being taken to mitigate negatives and increase positives. This text can be replicated in the 'Environment and Climate Impacts' section of your Committee Report, though please note you may need to supplement this climate impact

There are no specific environmental or climate implications to this plan. Payments made to the Council are accepted electronically. Where accepted by the Food Business Operator subsequent correspondence with businesses, following inspection, will be supplied electronically. Applications for new business registrations are encouraged and accepted electronically.

Policy Committee

10 July 2023



Reading
Borough Council
Working better with you

Title	Elections 2023 – voter identification and other issues
Purpose of the report	To note the report for information
Report status	Public report
Report author	Mike Graham, Returning Officer
Lead councillor	Cllr Liz Terry, Deputy Leader, Lead Councillor for Corporate Services and Resources
Corporate priority	Thriving Communities
Recommendations	Policy Committee is requested: (1) To note the report

1. Executive summary

- 1.1. The Borough Elections in 2023 returned to their normal cycle of elections by thirds. In 2022, the all-out elections following ward boundary changes meant that the three councillors in each ward were elected for periods of between one and four years to allow for the re-introduction of elections by thirds.
- 1.2. On 4 May 2023, fifteen of our sixteen wards elected one councillor and there was a by-election in Park ward which elected two councillors. This was also the first time that electors had to produce photographic identification in order to vote at the Polling Station. This is the first in a number of changes introduced by the Elections Act 2022 which will affect forthcoming local elections, Police and Crime Commissioner elections, and UK Parliamentary elections, including by-elections. This report details some of those changes.

2. Policy context

- 2.1. The Elections Act 2022 introduced photographic identification for voters at polling stations for this election. The Electoral Commission and the Association of Electoral Administrators issued lots of guidance in the run up to the election and staff involved with elections undertook a great deal of training; receiving training for themselves and then passing this training on to the polling station staff.

3. Elections outcome

- 3.1. With retirements and other changes, we have five new councillors. These details were reported to Annual Council on 24 May 2023.
- 3.2. Generally speaking, the election proceeded smoothly and Voter ID was manageable at the Polling Stations with the training provided and the additional staff allocated to support the process. All the Polling Stations had enough staff to deploy a “meeter and greeter” who was available to remind voters of the need for identification and to help with queries about the allowable types of ID. There is some anecdotal evidence that a minority of electors confused our staff for tellers or did not wish to engage with them for another reason. I have only received one complaint since the election from an elector

who considered the approach of the “meeter and greeter” to be, in his opinion, “authoritarian”.

- 3.3. I have received some comments from polling station staff about electors who behaved rudely when asked for identification at the stations. This is only a small number of instances. We had anticipated the possibility for discontent about the new procedures and we provided Polling Station staff with resources to be able to give to electors if they wished to complain to the Secretary of State, details of the department concerned, email addresses etc. These resources were well received.
- 3.4. Some of the new systems will take time to embed themselves, I am thinking here of the processes introduced by the Electoral Commission to record the use of the new Voter Authority Certificates and the privacy facilities in the Polling Stations.
- 3.5. Turnout was slightly lower than previous years:

Year	Polling Station Turnout	Overall Turnout
2019	27.70%	33.59%
2020	No elections due to pandemic	
2021	29.37%	35.96%
2022	28.10%	34.57%
2023	25.78%	32.60%

- 3.6. In terms of outcomes, the data we have indicates that 99.7% of voters in the Polling Station were issued with a ballot paper and had one of the relevant forms of Voter ID. 270 people initially attended the polling station without the right ID, but then 197 of these returned during the day and were able to vote. This leaves 73 people (0.3%) who had not come back to the polling station by the close of poll.
- 3.7. The other area of data which is missing is the number of people who were reminded by “meeters and greeters” that photo ID was required and then returned home. The Regulations and the Electoral Commission did not mandate a return of data about the voters who went home after talking to staff outside the Polling Station. We have some anecdotal evidence that some voters did go home. The data in 3.5 above then needs to be understood in the context that some other electors may have already gone home before they reached the desk where the statistics were collated, and they did not come back. The number is unknown.
- 3.8. In addition, we also cannot determine the number of people who wished to vote, but recognised they did not have a valid form of ID and so did not go to the Polling Station.
- 3.9. The Regulations mandated that Returning Officers collect data at the Polling Stations, however this is not to be released locally as it is collated nationally by the Electoral Commission for the purposes of research. The extent of this data includes:
 - Total no. of people using a Voter Authority Certificate (including Temporary Voter Authority Certificates)
 - Total no. of people having ID checked in private
 - Total no. of people who produced ID that was not acceptable
 - Total no. of people who produced no ID (unable to produce an accepted document)
 - Total no. of people who were refused a ballot paper because their photographic ID raised reasonable doubt as to whether the elector was who they claimed to be

- Total no. of people who were refused a ballot paper because the PO reasonably suspected the document was a forgery
 - Total no. of people who were refused a ballot paper because they failed to answer the prescribed questions satisfactorily
- 3.10. For insights into these issues, we will have to await publication of the Electoral Commission research. [Interim analysis](#) was published in June 2023, and the full report will be made available in September 2023.
- 3.11. There are a number of other changes planned in elections in the next few years. Some of the draft secondary legislation is now becoming available and some further information is also available about the timescales for the implementation of changes.

Police and Crime Commissioner Elections

- 3.12. From 2024 the Police and Crime Commissioners will be elected on a “first past the post” system.

Overseas voters

- 3.13. The Elections Act 2022 also removes the 15 year limit on overseas voters. This is expected to increase the administration in Electoral Services in the run up to the next parliamentary general election. The legislation will come into effect from January 2024.
- 3.14. Overseas voters had to register in the constituency in which they were registered before leaving the UK. Registration was renewed annually for up to 15 years after leaving. The previous rule was that people who left more than 15 years ago become ineligible to register.
- 3.15. The new rules will also allow all British citizens who had previously been resident in the UK to register, not just those who were registered before they left. Other changes are designed to make the renewal process easier for overseas voters.
- 3.16. According to the House of Commons Library, until 2015 the number of overseas voters registered to vote had never risen above 35,000. An overseas voter registration campaign in the run up to the 2015 General Election and interest in the 2016 referendum on the UK’s membership of the EU saw numbers increase.
- 3.17. At the December 2019 parliamentary general election, 233,000 overseas voters were registered. This has since declined to 105,000 in December 2021 as overseas numbers tend to decline between elections.
- 3.18. The Government estimates the changes, ending the 15-year limit and allowing all British citizens previously resident to be eligible, will mean around 3.5 million British nationals living overseas would be eligible to register to vote. It is not known how many people will be affected as ex-residents of Reading, nor what demands this will place on the Electoral Services team. We can expect a rise in postal and proxy votes if overseas citizens take up their entitlements.

New parliamentary boundaries

- 3.19. The Boundary Commission for England Review public consultation has now closed and the Commission expects to send its final recommendations to Parliament by 1 July 2023. In Reading this will mean the end of the Reading East and Reading West constituencies. Three new constituencies will represent Reading residents at the next parliamentary general election:

Reading Constituency - all wards except those noted below

Earley and Woodley – Church ward and Whitley ward plus 10 others in Wokingham Borough

Mid Berks – Kentwood, Norcot, Tilehurst plus 12 others in West Berkshire District.

- 3.20. Note that this review is based on the boundaries which existed when the review was first proposed, so in effect, our old ward boundaries.

Postal Vote Applications

- 3.21. Postal voters will need to make a fresh application every three years. Currently, electors are required to refresh their signature every 5 years. The application process for absent voters will include a process for verifying identity, in a similar way to individual registration with an online portal and checks made via Dept for Work and Pensions data.

Online Postal Vote Applications

- 3.22. Electors will be able to apply for an absent vote online (as well as by paper). Both online and paper applications will include a process for verifying the applicant's identity, which will be similar to the current process for individual electoral registration applications. Absent vote applicants using the online service will continue to be required to supply their personal identifiers (date of birth and a handwritten signature) as part of a postal vote application. Users will be asked to take a picture of their signature and upload it to the online service. EROs will retain the signature (and date of birth) so that it can be used to verify completed postal voting statements that are returned with postal vote ballots. These changes will come into effect from October 2023.

Postal vote handling

- 3.23. Political parties and campaigners will be banned from handling postal votes. There will also be a limit on the number of postal votes a person can hand in at polling stations (limit will be set out in secondary legislation). When a person hands in postal votes at the polling station, they will be required to fill in a form with their details and the details of the elector on whose behalf they are handing in the postal vote. If they do not fill in the form, the votes will be rejected. If a person attempts to hand in more than the limit, they will be advised of the new rules and only allowed to hand in the limited number. If a person seeks to hand in more than the permitted number in one attempt, they will all be rejected.
- 3.24. The person handing in postal vote packs at a polling station will be required to fill in the same form whether handing in their own postal vote pack only, handing in the postal votes of other voters, or handing in both their own and others' postal vote packs. The person will indicate on the form whether they are handing in their own postal vote only or also on behalf of other voters. These changes are expected to come into effect for the May 2024 polls with regulations being made by December 2023.

EU Voting and candidacy rights changes

- 3.25. These changes are expected to come into effect into force in November 2023 but will only take effect after the scheduled elections in May 2024.
- 3.26. In England the general right of European Union citizens to register, vote, and stand in UK elections which use the local election franchise will be removed.
- 3.27. Two groups of EU citizens will retain their voting and candidacy rights:
- 'Qualifying EU citizens' – i.e. citizens of EU countries which have a reciprocal agreement with the UK Government, currently Luxembourg, Poland, Portugal and Spain (sometimes known as EU4 countries).
 - 'EU citizens with retained rights' – i.e. EU citizens from any other EU country who were already legally resident in the UK before 31/12/2020
 - These changes will not affect the rights of citizens from Ireland, Malta or Cyprus as there are already long-standing regulations in place for these countries.
- 3.28. The Council will need to identify EU citizens who should have their eligibility reviewed as part of an Eligibility Confirmation and Review (ECR) process. We will need to write

to electors that we identify as being 'Qualifying EU citizens' and 'EU citizens with retained rights', to inform them that they are eligible to remain registered and that they do not need to take any action. This process must be completed between May 2024 and 31 January 2025.

- 3.29. Changes to candidacy rights. The changes to candidacy rights for EU citizens are due to come into force from 7 May 2024. Transitional arrangements will enable EU citizens elected to office before this date to remain in office for their full term. After this date EU citizens standing as candidates will need to have been legally resident in the UK prior to 31 December 2020 (i.e., have leave to enter or remain in the UK, or do not require such leave) or be a citizen from an EU4 country (Luxembourg, Poland, Portugal and Spain) in order to be eligible to stand as a candidate.

4. Contribution to strategic aims

- 4.1. The Elections Act 2022 outlines new responsibilities on the Council to register overseas voters, introduce changes to absent voting and to introduce voter ID. These new responsibilities are being implemented at different times.
- 4.2. These changes are not strategic priorities for the Council but must be implemented nevertheless. It is in the best interests of the Council and Reading residents that they are implemented as efficiently and effectively as possible. Where additional resources are required over and above new burdens funding, then I will apply for the justification led bids funding as appropriate.

5. Environmental and climate implications

- 5.1. The Council declared a Climate Emergency at its meeting on 26 February 2019 (Minute 48 refers).
- 5.2. There are no climate impacts arising from this report.

6. Community engagement

- 6.1. A great deal of publicity was necessary to alert residents to the changes in Voter ID. I am grateful to colleagues in the Communications Team for the work they did in support of this election. In addition, we relied upon the national advertising promoted by the Electoral Commission (radio, television, billboards etc).
- 6.2. I am grateful to the project undertaken by No5 counselling which engaged young people in Reading making resources for social media to highlight the need to register to vote and get photo ID in time for the Election.
- 6.3. We will review how effective our engagement was to learn what can be improved for the next election. I am mindful that the impact of Voter ID at a UK Parliamentary General Election will be more significant. We are working with voluntary organisations to gather their feedback about the impact of Voter ID. Whilst I recognise that this will only produce anecdotal data, it may provide valuable clues in order for us to consider what extra work we need to do to engage with particular communities in Reading who were affected by the changes.

7. Equality impact assessment

- 7.1. In advance of the election, we worked with the voluntary sector to promote the changes on photo ID. The Council has submitted data to the Electoral Commission about the effects of photo ID in the polling stations on 4 May. We will review the outcomes of Electoral Commission research to identify whether further work is needed to ensure everyone who is eligible to vote and wants to vote in a polling station can do so. We will also consider what further steps we can take with our partners to assist communities who are finding the changes difficult to navigate.

8. Other relevant considerations

8.1. There will be a review of Polling Stations in the Autumn in readiness for the next UK Parliamentary General Election.

9. Legal implications

9.1. Covered in the main body of the report.

10. Financial implications

10.1. The Government provided additional resources (£44,624) to the Council to introduce Voter ID. This was new burdens funding. This funding was spent on:

- Promotional materials and publicity
- Training for staff
- Additional staffing for Polling Stations.

10.2. Over the summer I will be reviewing our allocations of Polling Station staff in light of the experiences at this election, and in light of the additional funding to ensure the right level of cover for next year's combined election (Borough and Police and Crime Commissioner) and the forthcoming parliamentary general election.

10.3. The further changes are likely to impact:

- Core/temporary electoral services staff
- Canvass staff
- Front line call centre staff
- Reception staff at key council buildings
- Communications colleagues
- Polling station staff

I will keep the implications under review to report back to Committee where appropriate.

11. Timetable for implementation

11.1. Further changes from the Elections Act and the Boundary Review will be introduced by secondary legislation. Some of the timings have been indicated in this report, further details will be released during the course of this year.

12. Background papers

12.1. There are none.

Policy Committee

10 July 2023



Reading

Borough Council

Working better with you

Title	2022/23 Quarter 4 Performance Report
Purpose of the report	To make a decision
Report status	Public report
Report author (name & job title)	Stuart Donnelly, Financial Planning & Strategy Manager
Lead Councillor (name & title)	Councillor Terry, Deputy Leader of the Council and Lead Councillor for Corporate Services & Resources
Corporate priority	Not applicable, but still requires a decision
Recommendations	<p>That Policy Committee notes:</p> <ol style="list-style-type: none"> 1. That the provisional General Fund outturn position for 2022/23 is a £4.191m positive net variance (Appendix 1); 2. That the provisional Housing Revenue Account (HRA) outturn position for 2022/23 is a net £2.022m transfer from HRA Reserves (Appendix 2); 3. That the provisional General Fund Capital Programme outturn position for 2022/23 is a positive net variance of £15.327m against the proposed revised budget (Appendix 3); 4. That the provisional HRA Capital Programme outturn position for 2022/23 is a positive net variance of £1.584m against the approved budget (Appendix 3); 5. That £7.401m of agreed savings have been delivered in 2022/23, with £2.823m of non-delivered savings being carried forward into future years (Appendix 4); 6. That £1.268m of Capital Receipts have been used to fund transformation in accordance with the Capitalisation Directive (Appendix 5); 7. The performance achieved against the Corporate Plan success measures as set out in Section 13 of this report and Appendices 7-8. <p>That Policy Committee approves:</p> <ol style="list-style-type: none"> 8. The service requests to roll forward funds totalling £0.281m into 2023/24; 9. That the remaining balance of £3.910m is transferred to earmarked reserves as set out in Appendix 6; 10. That the Council provides £2.845m of additional funding support to Brighter Futures for Children (BFfC) over and above the 2022/23 contract sum in respect of their 2022/23 outturn position; 11. The amendments to the General Fund Capital Programme (as set out in Section 6 of this report and Appendix 3) resulting in a revised Capital Programme budget of £74.434m for 2022/23 and £134.209m for 2023/24;

	<p>12. Scheme & Spend approval for the three General Fund Capital Programme schemes as set out in paragraph 6.7 and Table 11 totalling £0.105m;</p> <p>13. Spend approval for the Caversham Court Gardens General Fund Capital Programme scheme as set out in paragraph 6.8 and Table 12 totalling £0.015m;</p> <p>14. The amendments to the HRA Capital Programme (as set out in further detail in Section 7 of this report and Appendix 3) resulting in a revised HRA Capital Programme net budget of £28.403m for 2022/23 and £55.894m for 2023/24;</p> <p>15. The write-off of debt as set out in Appendix 9 relating to:</p> <p>(a) Non-Domestic Rates - £156,153.21;</p> <p>(b) Sundry Debt - £167,618.08.</p>
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This report contains exempt information within Appendix 9 which is within the meaning of the following paragraph of Part 1 of Schedule 12A of the Local Government Act 1972, as amended by the Local Government (Access to Information) Act 1985 and by the Local Government (Access to information) (Variation) Order 2006:

3. Information relating to the financial or business affairs of any particular person (including the authority holding that information)

And in all the circumstances of the case, the public interest in maintaining the exemption outweighs the public interest in disclosing the information because:

Having applied the public interest test, it is in the Council's interests not to publish this information to protect the Council's financial and commercial position.

1. Executive Summary

1.1 This report sets out the provisional revenue and capital outturn positions for the Council's General Fund and Housing Revenue Account (HRA) for 2022/23. Further changes are not expected at this stage however the outturn is subject to audit and any material issues arising will need to be adjusted for.

General Fund (Revenue)

1.2 The budget for 2022/23 was prepared during another challenging period due to the continuing uncertainty caused by the wide-ranging ongoing implications of the Covid-19 pandemic and yet another one-year Local Government funding settlement from Central Government. The Budget included £10.224m of savings to be delivered in 2022/23 to deliver a balanced budget position, with a planned contribution of £0.695m to reserves.

1.3 The actual outturn position is positive net variance of £4.191m as set out below, which is an improvement of £0.884m from the projected outturn position as at the end of Quarter 3 reported to Policy Committee in March. The outturn position is inclusive of £12.530m of net transfers from reserves approved under delegated authority by the Director of Finance. The reserve movements include a total net transfer to reserves of £7.398m from service and corporate budgets offset by the budgeted drawdown of £19.928m in respect of the Collection Fund within Funding. The £19.928m drawdown includes £18.148m of s31 grant funding received in 2020/21 and 2021/22 to compensate the Council for additional business rate reliefs awarded during the Covid-19 pandemic. These grants were then budgeted to be released from reserves to fund the Business Rates Collection Fund deficit balance brought forward from 2021/22 (resulting from the additional reliefs awarded) which is required to be accounted for in 2022/23.

- 1.4 The actual outturn position for net service expenditure is £137.408m, inclusive of approved net transfers to reserves of £6.592m, resulting in an adverse net variance of £3.989m. This includes adverse variances of £1.221m within Economic Growth and Neighbourhood Services, £0.123m within Resources, and £0.131m within Chief Executive Services, which are offset by positive variances of £0.237m within Adult Care and Health Services, and £0.094m within Children's Services Retained by the Council. Brighter Futures for Children (BFfC) are requesting additional funding support of £2.845m over and above the 2022/23 contract sum.
- 1.5 The adverse variance on service expenditure is a net increase of £0.004m from the projected outturn position reported to Policy Committee in March, with the most material movements being from the increase in the adverse variance reported by BFfC of £1.974m and the improvement in the Adult Care and Health Services position of £1.553m which is mainly due to additional Winter Pressures income.
- 1.6 Detailed explanations for all service variances are contained within sections 3.2 to 3.84 of this report.
- 1.7 The actual outturn position on Corporate Budgets is a positive net variance of £7.562m. This position includes £0.806m of approved net transfers to reserves. The positive variance on Corporate Budgets is an improvement of £0.270m from the position reported to Policy Committee in March.
- 1.8 The actual outturn position on Funding is a positive net variance of £0.618m which primarily relates to the end of year calculation of the Business Rates Levy payable to Central Government which was not anticipated as part of the Quarter 3 projections. This position includes £19.928m of approved net transfers from reserves.
- 1.9 Services have submitted two carry forward requests totalling £0.281m as set out in paragraph 4.1. If these requests are approved this will leave a remaining surplus of £3.910m that will be added to earmarked reserves. It is recommended per paragraph 4.2, that £0.500m is transferred to a new Hardship Fund and the remaining balance of £3.410m is transferred to the Capital Financing Smoothing Reserve to support the Capital Programme.
- 1.10 The original budget for 2022/23 included assumed savings of £10.224m, including £2.045m of savings brought forward from the previous year. A total of £7.401m of ongoing savings were delivered in 2022/23. This leaves a residual balance of £2.823m to be carried forward for delivery in future years
- 1.11 This balance of £2.823m will be added to the £5.295m of savings already included in the 2023/24 budget to give a revised savings target of £8.118m. Savings delivery will continue to be monitored and reported on regularly throughout 2023/24.

Housing Revenue Account

- 1.12 The approved Housing Revenue Account (HRA) budget assumed a drawdown from HRA reserves of £2.154m. The provisional outturn position for the HRA requires an actual net drawdown from HRA reserves of £2.022m, this is comprised of a drawdown from HRA balances of £3.085m and a contribution to the Major Repairs Reserve balance of £1.063m relating to the excess Depreciation charge over budget in 2023/24. The HRA is therefore reporting a positive net variance compared to budget of £0.132m. The net drawdown from HRA balances of £3.085m is comprised of a drawdown of £3.158m from the main HRA Reserve and a transfer of £0.073m to the North Whitley PFI Reserve.

Capital

- 1.13 The provisional General Fund Capital Programme outturn is a £15.327m positive net variance against the proposed revised budget of £74.434m. A net total of £15.443m of

budgets are requested to be reprogrammed from 2022/23 into future years of the Capital Programme as set out in Appendix 3.

- 1.14 The provisional HRA Capital Programme outturn is a £1.584m positive net variance against the approved budget of £29.987m. A net total of £1.584m of budgets are requested to be reprogrammed from 2022/23 into future years of the Capital Programme as set out in Appendix 3.

Performance

- 1.15 The report also sets out performance against the measures of success published in the Council's Corporate Plan.
- 1.16 Of the 58 Corporate Plan Performance Measures, 72% are currently "green", 16% "amber" and 10% "red".
- 1.17 Of the 27 measures monitored monthly or quarterly, 70% have improved since Quarter 3, whilst 19% have gotten worse.
- 1.18 Of the 52 Corporate Plan Projects, 67% are currently "green", 31% "amber" and 2% "red".
- 1.19 Those measures that have shown significant change since Quarter 2 are set out in Appendix 8.

2. Policy Context

- 2.1. The Council approved the 2022/23 Budget and Medium-Term Financial Strategy (MTFS) 2022/23 – 2024/25 in February 2022.

3. General Fund Revenue Summary

- 3.1. The provisional outturn position of the General Revenue Fund is a positive net variance of £4.191m. This includes £12.530m of net transfers from reserves approved under delegated authority by the Director of Finance.

Table 1. General Revenue Fund Summary by Directorate

	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Adult Care and Health Services	43.921	44.391	0.470	(0.707)	(0.237)
Economic Growth and Neighbourhood Services	19.821	16.966	(2.855)	4.076	1.221
Resources	18.382	14.757	(3.625)	3.748	0.123
Chief Executive Services	1.556	1.687	0.131	0.000	0.131
Children's Services retained by the Council	0.781	0.687	(0.094)	0.000	(0.094)
Children's Services delivered by BfC	48.958	52.328	3.370	(0.525)	2.845
Total Service Expenditure	133.419	130.816	(2.603)	6.592	3.989
Capital Financing Costs	16.381	12.873	(3.508)	0.000	(3.508)
Contingency	3.627	0.000	(3.627)	0.000	(3.627)
Movement to/(from) Reserves	0.695	0.000	(0.695)	0.695	0.000
Other Corporate Budgets	(4.132)	(4.670)	(0.538)	0.111	(0.427)
Total Corporate Budgets	16.571	8.203	(8.368)	0.806	(7.562)
Net Budget Requirement	149.990	139.019	(10.971)	7.398	(3.573)
Financed by:					

Council Tax Income	(104.403)	(104.403)	0.000	0.000	0.000
NNDR Local Share	(26.510)	(27.123)	(0.613)	0.000	(0.613)
New Homes Bonus	(2.038)	(2.038)	0.000	0.000	0.000
Section 31 Grant	(12.580)	(12.580)	0.000	0.000	0.000
Revenue Support Grant	(2.108)	(2.108)	0.000	0.000	0.000
Other Government Grants	(2.404)	(2.409)	(0.005)	0.000	(0.005)
One-off Collection Fund (Surplus)/Deficit	3.219	3.219	0.000	0.000	0.000
One-off Collection Fund (Surplus)/Deficit – Business Rates (Covid Reliefs)	16.762	16.762	0.000	0.000	0.000
Section 31 Grants Released from Reserves	(18.148)	0.000	18.148	(18.148)	0.000
Release from Collection Fund Smoothing Reserve	(1.780)	0.000	1.780	(1.780)	0.000
Total Funding	(149.990)	(130.680)	19.310	(19.928)	(0.618)
(Positive)/Adverse Variance	0.000	8.339	8.339	(12.530)	(4.191)

Adult Care and Health Services

3.2. Adult Care and Health Services' provisional outturn position is a positive net variance of £0.237m. This is an improvement of £1.553m from the Quarter 3 forecast.

3.3. The following table summarises the outturn position for 2022/23.

Table 2. Adult Care and Health Services Outturn 2022/23

Service	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Commissioning & Transformation	2.163	1.953	(0.210)	0.000	(0.210)
Adult Services Operations	39.892	39.030	(0.862)	0.788	(0.074)
Public Health	0.000	1.495	1.495	(1.495)	0.000
Directorate Other	0.491	0.547	0.056	0.000	0.056
Safeguarding, Quality, Performance & Practice	1.375	1.366	(0.009)	0.000	(0.009)
Total	43.921	44.391	0.470	(0.707)	(0.237)

3.4. The explanation for these variances is set out below.

Commissioning & Transformation - £0.210m positive variance

3.5. Commissioning & Transformation is reporting a positive net variance of £0.210m, which is comprised of:

- £0.066m positive variance relating to additional income linked to the Winter Pressures Hospital Discharge (Non-Placements);
- £0.144m positive variance relating to contract spend and other non-payroll related budgets.

Adult Services Operations - £0.074m positive variance

Placements Budget

3.6. There is an overall pressure of £1.000m on the placement budgets (inclusive of hospital discharges). This is an improvement of £0.500m from Quarter 3 inclusive of associated income budgets. This is linked to the introduction of the Winter Pressures Hospital Discharge Fund where the Council was able to claim back funds to support additional

placements costs and support charges, and additional one-off income linked to recoupment of direct payments.

Non-Placements Budget

3.7. The pressures on placements budgets are offset by the following variances on non-placements budgets:

- £0.225m positive variance on staffing budgets due to a high level of vacancies and having to re-direct staff onto the Winter Pressures work which was fully funded through Health. The vacancy levels are already being addressed for 2023/24;
- £0.620m positive variance on additional income linked to the Winter Pressures Hospital Discharge (Non Placements);
- £0.229m positive variances on contract spend, non-payroll related budgets including software and staffing support.

3.8. The required roll-forwards of £0.788m of Better Care Funding is included within the above position.

Public Health – balanced budget

3.9. Public Health is reporting a balanced position which includes a roll-forward of unspent Public Health Grant to the Public Health Grant Reserve of £0.161m. The service has also drawn down £0.798m of Track & Trace and Contain Outbreak Management Fund grants, £0.485m from Community Vaccines Grant, and £0.373m of Rough Sleeping Drug & Alcohol Treatment Grant from the Revenue Grant Unapplied Reserve.

Directorate Other - £0.056m adverse variance

3.10. The £0.056m adverse variance relates to staffing budgets due to required interim cover arrangements.

Safeguarding, Quality, Performance & Practice - £0.009m positive variance

3.11. The £0.009m positive variance relates to an overachievement of income within the Deputies team.

Economic Growth and Neighbourhood Services

3.12. Economic Growth and Neighbourhood Services' provisional outturn position is an adverse net variance of £1.221m. This is an improvement of £0.148m from the Quarter 3 forecast.

3.13. The following table summarises the outturn position for 2022/23.

Table 3. Economic Growth and Neighbourhood Services Outturn 2022/23

Service	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Transportation	(1.837)	(6.476)	(4.639)	4.839	0.200
Planning & Regulatory Services	2.647	2.996	0.349	0.061	0.410
Housing & Communities	2.022	2.525	0.503	(0.478)	0.025
Culture	3.953	4.048	0.095	0.193	0.288
Environmental & Commercial Services	16.487	16.912	0.425	(0.227)	0.198
Property & Asset Management	(3.966)	(4.044)	(0.078)	0.000	(0.078)

Management & Sustainability	0.515	1.005	0.490	(0.312)	0.178
Total	19.821	16.966	(2.855)	4.076	1.221

3.14. The explanation for these variances is set out below.

Transportation - £0.200m adverse variance

3.15. Transportation is reporting an adverse variance of £0.200m.

3.16. This variance arises mostly from income shortfalls still attributable to the aftermath of Covid-19. Income levels are above those achieved in 2021/22 and the recovery on the whole is gaining momentum, particularly for Off-Street Car Parking - the most material Parking income stream by budget. The table below shows the position since 2019/2020 the baseline year before the impact of the Covid Pandemic.

Table 4. Off-Street Car Parking Income Trend

Financial Year	Budget	Actual/Forecast	Variance
	£m	£m	£m
2019/20	(4.244)	(4.333)	(0.089)
2020/21	(4.734)	(1.183)	3.551
2021/22	(3.668)	(2.933)	0.735
2022/23	(4.126)	(3.549)	0.577
2023/24	(4.776)		

3.17. The adverse variance of £0.577m in Off-Street Car Parking is occurring despite a large increase in income compared to 2021/22. The income budget for this area was increased in 2022/23 towards pre-covid levels and whilst there has been increased income compared to last year, the level of income has not yet returned to the pre-covid levels. Additionally, the ongoing cost of living crisis with high fuel costs has led to less visits to the town centre, and renting spaces to Royal Berkshire Hospital at Queens Road has not delivered the income anticipated due to the Hospital trialling other arrangements.

3.18. There is a pressure of £0.075m for repairs on Broad Street Mall Car Park caused by heavy rain.

3.19. Additionally, there are pressures across the service on salary and agency costs of £0.098m.

3.20. These pressures are partially offset by income overachievements including from On-Street Pay & Display Car Parking and Bus Lane Enforcement of £0.550m.

3.21. The outturn position includes the following net transfers to reserves totalling £4.839m:

- £4.676m transfer to the Revenue Grants Unapplied Reserve in respect of unspent Bus Service Improvement Plan Grant;
- £0.263m transfer to the Revenue Grant Unapplied Reserve in respect of unspent Active Travel Capability Fund Grant;
- £0.100m transfer from the Revenue Grant Unapplied Reserve in respect of Active Travel Tranche 2;

Planning & Regulatory Services - £0.410m adverse variance

3.22. Planning & Regulatory Services is reporting an adverse variance of £0.410m.

- 3.23. There is an income shortfall of £0.601m across the service. These are primarily arising from the ongoing Covid recovery as well as the Supporting the Homes for Ukraine scheme. This shortfall consists of:
- The Building Control shortfall of £0.209m directly relates to the lack of staffing and a lack of availability of suitable agency staff to undertake the fee earning work;
 - Premises license fees are reporting an income shortfall of £0.120m. Within this, the largest element relates to a £0.066m shortfall in respect of Reading Festival which is entirely based on Festival Republic's need for a license variation which has not materialised in 2022/23, the need in future years is under discussion;
 - Planning applications and planning fees shortfall of £0.078m are market driven so it is difficult to control the level of fees particularly as the level of fee is statutorily set. Following on from the Covid recovery the supply chain issues around costs and availability of construction materials, plus skills shortages in the construction and design industry, is holding up the planning application process. Therefore, the ongoing uncertainty following on from the Covid pandemic and the ongoing Inflation and risk of recession is having a direct impact on fee generation that is likely to be an ongoing issue;
 - Houses of Multiple Occupancy is reporting an income shortfall of £0.194m. There is a requirement to inspect homes under the Homes for Ukraine scheme, so this decision to undertake this work has a direct impact on the ability to generate income in this area.
- 3.24. There are also pressures relating to ongoing public enquiries arising within Planning, forecast at £0.187m for 2022/23. There are some residual costs from a previous prosecution. One public enquiry has been withdrawn with one further public enquiry to be heard by April 2023 with spend likely to be incurred until Summer 2023.
- 3.25. There are pressures within the Coroners service of £0.155m relating to the Forbury Gardens inquest where the costs are being picked up by Reading Borough Council in full and not reapportioned across other Berkshire Authorities.
- 3.26. These pressures are partially mitigated by a staffing underspend due to vacancies arising within the service and lack of suitable agency staff of £0.367m, miscellaneous fees & charges overachievement of £0.193m and an adverse variance of £0.027m on other supplies and services.
- 3.27. The outturn position includes a net transfer of £0.061m to the Revenue Grants Unapplied Reserve in respect of various grant balances.

Housing & Communities - £0.025m adverse variance

- 3.28. Housing & Communities is reporting a £0.025m adverse variance for the year.
- 3.29. Homelessness is reporting an adverse net variance of £0.280m. Private sector evictions have been steadily rising following on from the Covid restrictions being released, with additional cost of living pressures placed on the sector. High Inflation pressures have been seen in the cost of emergency accommodation, the average nightly rate in April 2022 was £90 compared to £120 in March 2023. There has also been a reduction in the number of available properties to use. This area is a demand led service, and numbers of families in emergency accommodation have been steadily rising throughout the year; the total number of singles and families in April 2022 was 71, rising to a total of 131 in March 2023.
- 3.30. This pressure has been highlighted throughout the year and is partially offset by the previously reported overachievement of income within Community Safety of £0.255m.

- 3.31. The outturn position includes net transfers totalling £0.478m from the Revenue Grants Unapplied Reserve in respect of various homelessness related grant balances.

Culture - £0.288m adverse variance

- 3.32. Culture is reporting an adverse variance of £0.288m for the year. This is mainly due to an under recovery of income in the Hexagon and Concert Hall against pre-covid income targets in a challenging financial climate. There are also pressures relating to contract inflation and income delays in the Play Service.

- 3.33. The variance is comprised of the following elements:

- £0.063m net under recovery of income in Reading arts and venues including the Hexagon and Concert Hall. Despite strong sales, programming and bar sales, the service has not made pre-covid income targets due to the challenging financial climate however, there has been a strong performance of the Town Hall conferencing which has helped to offset other income shortfalls;
- A net £0.216m pressure is being experienced in leisure services. This is comprised of £0.222m of lost income from Play due to the Ranger Station opening later than planned, adverse weather conditions and staff sickness. There has also been additional and unplanned expenditure of £0.035m for external technical support at Christchurch Meadows Paddling Pool. There is also a further variance in Leisure Centres of £0.035m due to higher than anticipated contractual inflation within the GLL Leisure contract as this contract is based on CPI inflation as at March 2022. This has been offset by one-off refunds from prior years, utilities and business rates for the leisure sites now managed under the GLL contract of £0.076m;
- £0.079m of net pressures in Libraries including reduced level of rental income from tenants in the Central Library;
- £0.070m positive variance for 2022/2023 on Reading's contribution to the joint arrangement for the Archives service.

- 3.34. The outturn position includes a net transfer of £0.193m to the Revenue Grants Unapplied Reserve in respect of various unspent grant balances.

Environmental & Commercial Services – £0.198m adverse variance

- 3.35. Environmental & Commercial Services is reporting an adverse variance of £0.198m for the year.

- 3.36. Streetscene is reporting an overall positive variance of £0.065m. There is a net income shortfall of £0.617m largely due to staffing shortages in the Arboricultural Team resulting in commercial work not being possible and reductions in income from reduced grounds maintenance/commercial opportunities on industrial sites and New Build Housing developments. These pressures have been more than offset by a positive variance relating to staffing vacancy levels totalling £0.682m.

- 3.37. Recycling and Waste Collection is reporting an overall adverse variance of £0.212m. The staffing budget is reporting a pressure of £0.516m as a result of covering the full employee costs of the required level of service, particularly for covering sickness and annual leave to industry standards. This has been partially offset by application of £0.211m of grants, a positive variance within running costs of £0.043m and £0.050m overachievement of trade waste income.

- 3.38. Fleet Management is reporting an adverse variance of £0.239m. Fuel costs are currently around a third higher than a year ago and this has created a £0.160m adverse variance.

The increased cost of fuel and the recent introduction of five new electric refuse freighters to the fleet were considered as part of the 2023/24 budget setting process. The cost of vehicle maintenance has also been higher than planned and this has created a further adverse variance of £0.079m.

- 3.39. Highways and Drainage is reporting an overall adverse variance of £0.494m. This primarily relates to increased costs of direct materials, paying for waste disposal arising from our work programme and paying increased subcontractor rates totalling £0.580m of additional pressures. The service is also reporting an underachievement of income of £0.097m due to the number of vacancies in the team and the use of driving staff by the Waste Collection team, both of which have reduced capacity in this area to generate income. These pressures are partly offset by a positive variance of £0.183m relating to the aforementioned staffing vacancies within the team.
- 3.40. Civil Engineering is reporting an adverse variance of £0.073m. A positive variance of £0.023m due to vacancies within the team has been more than offset by an increase in the costs of various contracts (including winter maintenance), primarily due to inflationary increases, causing an adverse variance of £0.096m.
- 3.41. Network Management is reporting an adverse variance of £0.232m. This is primarily due to increased running costs and the costs of road traffic collisions damaging traffic system communications that required repairing creating an adverse variance of £0.191m. There has also been a reduction of £0.084m in the income from the Pan Berkshire Urban Traffic Control joint arrangement which arose due to National Highways having pulled out of the scheme. There is a mitigation plan in place for 2023/24 onwards to offset this loss of income. These pressures have been partly offset by £0.043m of vacancies within the team.
- 3.42. Waste Disposal is reporting a positive variance of £0.987m. This has arisen from reduced waste disposal costs, as a result of circa 8% less residual waste per household being presented for disposal. In addition, reductions in costs have been negotiated, reduced insurance premiums sought and the value of income from the sale of re3 recycling has been higher than predicted. Each of these factors has contributed to this positive position for Waste Disposal which was considered within the 2023/24 budget setting process.
- 3.43. The outturn position includes net transfers totalling £0.227m from the Revenue Grants Unapplied Reserve in respect of various grant balances.

Property & Asset Management – £0.078m positive variance

- 3.44. Property & Asset Management is reporting a positive variance of £0.078m.
- 3.45. There is a positive variance relating to Investment Property income of £0.048m comprising small additional income from a number of sites, and a further positive variance arising from Acre business Park additional lettings of £0.030m. These have been offset by an adverse variance £0.091m due to the decline in income from the Oracle shopping centre following on from the Covid-19 pandemic affecting footfall, which has had a knock-on effect of reducing the base rent received.
- 3.46. There is a positive variance on staffing costs within the Valuations team of £0.078m due to vacancies in the team, and other minor positive variances from business rates adjustments as well as overachievement of lettings income of £0.013m.

Management & Sustainability – £0.178m adverse variance

- 3.47. Management & Sustainability is reporting an adverse variance of £0.178m.

- 3.48. The Business Development service is reporting a pressure of £0.183m on advertising income schemes. There have been delays in the planning agreements for some advertising sites, as well as contractual and developer delays linked to reduced demand for use of advertising screens as an ongoing impact of the Covid-19 pandemic. This pressure is likely to continue and has been considered as part of the 2023/24 budget setting process.
- 3.49. Sustainability is reporting a positive variance of £0.028m. This has arisen due to staffing vacancies and an overachievement of solar panel income.
- 3.50. There are also further net pressures of £0.025m relating to costs of specialist reports and a reduction to the amount of staff costs able to be recharged to the HRA.
- 3.51. The outturn position includes the following net transfers from reserves totalling £0.312m:
- £0.065m transfer to the Revenue Grants Unapplied Reserve in respect of unspent grant balances;
 - £0.006m transfer to the Climate Change Reserve in respect of the surplus on the Reading Climate Change Partnership;
 - £0.030m transfer from the DEGNS Strategic Reserve in respect of training and mentoring costs incurred during the year;
 - £0.353m transfer from the Transformation Reserve in respect of funding revenue costs incurred on the two Levelling Up Fund (LUF) schemes (Civic Library and HexBox) and the Minster Quarter scheme.

Resources

- 3.52. The Directorate of Resources' provisional outturn position is an adverse net variance of £0.123m. This is an improvement of £0.167m from the Quarter 3 forecast.
- 3.53. The following table summarises the outturn position for 2022/23.

Table 5. Resources Services Outturn 2022/23

Service	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Policy, Performance & Customer Services	2.650	2.275	(0.375)	0.064	(0.311)
Human Resources & Organisational Development	1.889	1.746	(0.143)	0.029	(0.114)
Procurement & Contracts	0.488	0.632	0.144	(0.050)	0.094
Finance	4.417	1.524	(2.893)	2.955	0.062
Legal & Democratic Services	2.630	3.314	0.684	0.000	0.684
Digital, Technology & Change	6.308	5.266	(1.042)	0.750	(0.292)
Total	18.382	14.757	(3.625)	3.748	0.123

- 3.54. The explanations for the material variances are set out below.

Policy, Performance & Customer Services - £0.311m positive variance

- 3.55. Policy, Performance & Customer Services is reporting a positive net variance of £0.311m. This variance has arisen due to an overachievement of income in Bereavement Services of £0.145m, staffing vacancies within the Policy Team of £0.170m and £0.107m of unallocated Voluntary Sector & Community Grants. These variances are partially offset

by an adverse net variance within Customer Fulfilment of £0.113m, which relates to £0.207m of unachieved savings, partially offset by £0.094m of staffing vacancies.

- 3.56. The outturn position includes transfers to the Revenue Grants Unapplied Reserve totalling £0.221m in respect of unspent Afghan and Syrian resettlement grants and a transfer from the Revenue Grants Unapplied Reserve of £0.157m in respect of the Household Support Fund.

Human Resources & Organisational Development - £0.114m positive variance

- 3.57. Human Resources & Organisational Development is reporting a positive net variance of £0.114m.
- 3.58. Health & Safety is reporting a positive variance of £0.071m relating to £0.063m of eligible staff costs being funded by Contain Outbreak Management Fund (COMF) and Homes for Ukraine grants. Additionally, there is an overachievement of external training income of £0.008m.
- 3.59. There are further net positive variances totalling £0.043m across the service.
- 3.60. The outturn position includes a transfer to the Revenue Grants Unapplied Reserve of £0.029m in respect of unspent mortuary related grant.
- 3.61. The service has requested that the positive variance delivered within the Health & Safety budget of £0.071m is rolled forward into 2023/24 as set out below:

- The Council has introduced a new Risk Management Policy and process. At the launch of the new Policy the introduction was supported by the Senior Health, Safety & Risk Management Advisor and a temporarily seconded member of staff. That seconded officer has now returned to their substantive post. The new processes are continuing to require a high level of support to ensure that risk management becomes embedded into normal management activity. It is proposed that the positive variance in the Health, Safety & Risk Management Team's budget is used to recruit a temporary Risk Management Officer to enhance the existing resources in the team, which currently for risk management is only 15 hours per week officer time.

Procurement & Contracts - £0.094m adverse variance

- 3.62. Procurement & Contracts is reporting an adverse variance of £0.094m due to unachieved Corporate Procurement savings of £0.100m, which is partially offset by a £0.006m positive variance relating to staffing costs.
- 3.63. The outturn position includes a drawdown of £0.050m from the Procurement Training earmarked reserve.

Finance - £0.062m adverse variance

- 3.64. Finance is reporting an adverse net variance of £0.062m.
- 3.65. There is an adverse net variance of £0.062m consisting of £0.681m of temporary staffing and agency pressures across Accountancy, Exchequer and Internal Audit which are predominantly offset by £0.619m of overachieved income, including new burdens grants, within Revenues & Benefits.
- 3.66. The outturn position includes the following transfers to/from reserves:

- £0.442m transfer to the Self-Insurance Reserve which is in line with the annual contribution as recommended per the last actuarial fund review;

- £2.502m transfer to the Revenue Grants Unapplied Reserve in respect of unspent Homes for Ukraine grant;
- £0.011m transfer to the Revenue Grants Unapplied Reserve in respect of New Burdens Grant for Housing Benefit Administration.

Legal & Democratic Services – £0.684m adverse variance

- 3.67. Legal & Democratic Services is reporting an adverse variance of £0.684m.
- 3.68. Customer Relations & Information Governance are reporting an adverse variance of £0.213m due to staffing costs exceeding the budgeted establishment.
- 3.69. Legal Services is reporting an adverse variance of £0.257m through using agency to cover vacancies, non-achievable fees & charges and HRA recharge income, additional spend on supplies and services including additional legal fees where the service has experienced demand for legal expertise outside of their in-house capability and capacity, particularly in areas of employment and data protection where counsel are having to be instructed to cover hearings.
- 3.70. Local Elections are forecasting an adverse variance of £0.155m due to the council holding an “all out” local election resulting in the need for an increased number of count staff. Additional costs also arose following the Local Government Boundary review, where the number of councillors increased from 46 to 48 and the number of polling stations increased from 69 to 75, as well as the Covid health and safety measures that were in place for the 2021/22 elections remaining in place for 2022/23.
- 3.71. Minor adverse variances of £0.059m are reported across the rest of service.

Digital, Technology & Change - £0.292m positive variance

- 3.72. Digital, Technology & Change is reporting a positive net variance of £0.292m which is comprised of the following:
- £0.105m positive variance due to staffing vacancies within the Project Management Office (PMO);
 - £0.105m positive variance relating to other staffing budgets across the service;
 - £0.050m positive variance resulting from savings in hosting rationalisation;
 - £0.053m positive variance on software licensing;
 - £0.021m adverse variance on mobile telephony.
- 3.73. The outturn position includes a transfer to the Revenue Grants Unapplied Reserve of £0.750m in respect of the Local Digital Future Councils grant received in March 2023.
- 3.74. The service has requested that the positive variances arising from the staffing budgets totalling £0.210m are rolled forward into 2023/24 as set out below:
- The positive variance derived from our inability to recruit to vacancies in the PMO team until its restructure completed at the end of April 2023. Recruitment has now been initiated but the need to fill the gaps is now so urgent that agency or consultancy resource will be needed as a short-term measure. This funding will help to bridge this gap.

Chief Executive Services

- 3.75. Chief Executive Services provisional outturn position is an adverse net variance of £0.131m. This is an improvement of £0.008m from the Quarter 3 forecast.
- 3.76. The following table summarises the outturn position for 2022/23.

Table 6. Chief Executive Services Outturn 2022/23

Service	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Corporate Management Team	0.883	0.973	0.090	0.000	0.090
Communications	0.673	0.714	0.041	0.000	0.041
Total	1.556	1.687	0.131	0.000	0.131

- 3.77. The reported variances relate to £0.090m of expenditure pressures within Corporate Management Team budgets, including job advertising and recruitment costs and £0.041m of underachieved advertising income within Communications.

Children's Services retained by the Council

- 3.78. Children's Services retained by the Council's provisional outturn position is a positive variance of £0.094m. This is an improvement of £0.094m from the Quarter 3 forecast.
- 3.79. This variance has arisen following the annual reconciliation process of the Adoption Thames Valley contract, which for 2023/24 identified that a partial refund of the annual contribution was due back to the Council.

Children's Services delivered by BFfC

- 3.80. Brighter Futures for Children's (BFfC) have requested that the Council provides additional funding support of £2.845m, over and above the 2022/23 revised contract sum (including Service Level Agreements) of £48.958m.

Table 7. Children's Services delivered by BFfC Outturn 2022/23

Service	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Children's Services delivered by BFfC	48.958	52.328	3.370	(0.525)	2.845
Total	48.958	52.328	3.370	(0.525)	2.845

- 3.81. BFfC is reporting that they have incurred exceptional costs totalling £1.855m in respect of:
- £0.425m contract inflation on social care placements;
 - £0.323m contract inflation on home to school transport;
 - £1.107m unavoidable high cost placements in relation to two individual cases.
- 3.82. Additionally, BFfC is reporting a further £1.887m of pressures consisting of:
- £0.897m placement, agency staff and home to school transport costs;

- £0.990m under accrual of placements costs from 2021/22.

3.83. Therefore, of the total pressures of £3.742m, BFfC have proposed that the company will fund the £0.897m relating to placement, agency staff and home to school transport costs, and are requesting that the Council funds the exceptional costs totalling £1.855m and the £0.990m placement costs relating to 2021/22.

3.84. The outturn position includes a drawdown of £0.525m from the Revenue Grants Unapplied Reserve in respect of funding ongoing Covid-19 recovery projects from the residual un-ringfenced Covid-19 grant, as originally approved as part of the 2021/22 Quarter 1 Performance Report to Policy Committee in September 2021.

Corporate Budgets

3.85. Corporate Budgets are reporting a provisional positive net variance of £7.562m. this is an improvement of £0.270m from the Quarter 3 forecast.

3.86. The following table summarises the outturn position for 2022/23.

Table 8. Corporate Budgets Outturn 2022/23

Service	Budget	Outturn	Variance	Movement to/(from) Reserves	Adjusted Variance
	£m	£m	£m	£m	£m
Capital Financing Costs	16.381	12.873	(3.508)	0.000	(3.508)
Contingency	3.627	0.000	(3.627)	0.000	(3.627)
Movement to/(from) Reserves	0.695	0.000	(0.695)	0.695	0.000
Other Corporate Budgets	(4.132)	(4.670)	(0.538)	0.111	(0.427)
Total	16.571	8.203	(8.368)	0.806	(7.562)

3.87. The explanation for these variances is set out below.

3.88. Capital Financing Costs is reporting a positive total net variance £3.508m. As a result of the slippage on the Capital Programme reported in the 2021/22 Outturn Report, there is a positive variance of £0.752m relating to the Minimum Revenue Provision (MRP). There is a further positive variance of £1.105m on the interest payable budget which has arisen from a combination of the slippage on the Capital Programme and efficient management of the Council's cashflow negating the need to borrow and a revision to the share of the interest costs between the General Fund and the HRA. Finally, there is a positive variance of £1.651m on the interest receivable budget due to a combination of the rises in interest rates during the year, a higher amount of cash available for investment than originally anticipated and a revision to the share of the interest income between the General Fund and the HRA. This is an improvement of £1.003m from Quarter 3, which is primarily due to the Council being able to invest more surplus cash during the period than had previously been anticipated.

3.89. The Contingency budget of £3.627m to mitigate against non-delivered in-year savings has not been allocated out to services and therefore contributes a further positive variance.

3.90. Other Corporate Budgets is reporting a positive net variance of £0.427m. This variance includes a pressure of £0.954m relating to the 2022/23 pay award, which is more than offset by positive net variances of £1.381m within Other Corporate Budgets due to the release of all unspent contingencies and a reduction in the bad debt provision.

3.91. The outturn position includes the following transfers to/from reserves:

- £0.695m to the General Fund Reserve;

- £1.060m transfer to the Legal & Taxation Reserve ;
- £0.496m transfer to the Energy Earmarked Reserve;
- £0.050m transfer to the Capital Financing Smoothing Reserve;
- £0.025m transfer to the Housing Benefit Subsidy Loss Reserve;
- £1.520m transfer from the Collection Fund Smoothing Reserve.

Funding

3.92. There is a positive variance of £0.618m within Funding. The net NNDR Local Share which consists of the Council's share of retained business rates income, less the business rates Tariff and Levy. Whilst the retained business rates income and Tariff and fixed amounts and known throughout the year, the Levy is variable and is only finalised post completion of the NNDR3 return to Central Government in April at the end of the financial year. It had been assumed throughout the year that the Levy amount would be equal to the budget, however the final calculation has resulted in a positive variance of £0.613m. There is a further positive variance of £0.005m relating to other government grants.

4. Requested Roll Forwards

4.1. It is recommended that the following roll-forward request as set out in paragraphs 3.61 and 3.74 above, totalling £0.281m, are agreed:

Table 9. Requested Roll Forwards

Directorate	Service	Reason	Amount £m
Resources	Human Resources & Organisational Development	To fund a temporary Risk Management Officer	0.071
Resources	Digital, Technology & Change	To fund temporary resource in the PMO whilst permanent recruitment processes are completed	0.210
Total			0.281

4.2. It is recommended that £0.500m of the remaining £3.910m surplus is transferred to a new Hardship Fund and that the remaining balance of £3.410m is transferred to the Capital Financing Smoothing Reserve to support the Capital Programme.

5. Housing Revenue Account (HRA)

5.1. The approved Housing Revenue Account (HRA) budget assumed a drawdown from HRA reserves of £2.154m. The provisional outturn position for the HRA requires an actual net drawdown from HRA reserves of £2.022m, this is comprised of a drawdown from HRA balances of £3.085m and a contribution to the Major Repairs Reserve balance of £1.063m relating to the excess Depreciation charge over budget in 2023/24. The HRA is therefore reporting a positive net variance compared to budget of £0.132m. The net drawdown from HRA balances of £3.085m is comprised of a drawdown of £3.158m from the main HRA Reserve and a transfer of £0.073m to the North Whitley PFI Reserve. The breakdown of the net variance is set out in the following table and Appendix 2 and is explained below.

Table 10. Housing Revenue Account Forecast 2022/23

	Budget	Outturn	Variance
	£m	£m	£m
Housing Management	9.759	9.325	(0.434)

Special Services	3.606	3.047	(0.559)
Revenue Repairs	6.432	7.402	0.970
PFI Costs	7.197	7.405	0.208
Bad Debt Provision	0.753	0.069	(0.684)
Major Repairs/Depreciation	11.616	13.367	1.751
Debt Costs	6.741	6.044	(0.697)
HRA Income	(43.950)	(43.574)	0.376
Over/(Under) Budget	2.154	3.085	0.931
Movement to/(from) HRA Balances	(2.154)	(3.085)	(0.931)
Movement to/(from) Major Repairs Reserve	0.000	1.063	1.063
Total movement to/(from) HRA Reserves	(2.154)	(2.022)	0.132

5.2. The outturn position was due to:

Expenditure

- Positive variances within Housing Management and Special Services of £0.434m and £0.559m respectively due to staff vacancies and reduced support services costs;
- An adverse variance within Revenue Repairs of £0.970m mainly due to a high volume of works completed in the latter half of the year, cost inflation and the proportion of in-year expenditure being revenue repairs works, rather than major/improvement works which are capital. There was a corresponding reduction in the planned spend on the Major Repairs – Existing Homes Renewal line in the Capital programme which was reprofiled into later years during 2022/23;
- An adverse variance relating to PFI costs of £0.208m relating to higher inflation than budget affecting the contractual payments. The Business Plan for 2023/24 onwards incorporates the higher inflation rate;
- A positive variance on the movement on the Bad Debt Provision of £0.684m which reflects a good performance on rent collection this year requiring a lower contribution to cover rent arrears;
- An adverse variance on Depreciation of £1.751m which reflects the latest external HRA stock valuations;
- A positive variance on Interest charges on borrowing ('Debt Costs') which were £0.697m lower compared with the budget.

Income

- An adverse variance on Dwelling Rents of £0.557m. The Rent Collection rate was 95.96% for 2022/23;
- An adverse variance on Service Charges of £0.087m;
- A positive variance on Interest receivable on balances of £0.296m against budget due to an increased average interest rate an increase in the balances on which the interest is calculated;
- An adverse variance on Other Income of £0.028m.

6. General Fund Capital Programme

- 6.1. The General Fund Capital Programme for 2022/23 has an approved budget of £74.517m. The following amendments are requested to be formally approved which would result in a revised Capital Programme budget of £74.434m. These amendments are set out on an individual scheme basis in Appendix 3.
- 6.2. The provisional General Fund Capital Programme outturn position is a positive net variance of £15.327m against the proposed revised budget of £74.434m.

Table 11. General Fund Capital Programme Amendments

General Fund Capital Programme	£m
Revised Budget Quarter 3 2022/23	74.517
Budget Movements Between Schemes	0.000
Additional Budgets added to the Programme - Funded by Grants & Contributions	2.220
Additional Budgets requested to be added to the Programme - Funded by Capital Receipts & Borrowing	0.000
Reduced Budgets - Completed Schemes & Other carry forward budget adjustments	(2.303)
Proposed Revised Budget Quarter 4 2022/23	74.434

- 6.3. A total of £2.220m of additional budgets across eleven schemes (as set out in Appendix 3) that are fully funded by grants and contributions are requested to be formally added into the Capital Programme. This includes:
- £0.105m for three new schemes to the capital programme where scheme and spend approval is requested as set out in Table 11;
 - £0.647m for capital expenditure directly incurred by schools and funded by devolved formula capital grant funding;
 - £0.903m for the Construction of Green Park Station reflecting an increase in costs to complete the scheme;
 - £0.565m for other schemes.
- 6.4. A total of £2.303m of budget reductions/adjustments are requested to be formally approved as set out in Appendix 3. This includes:
- £2.250m budget reduction where it has been identified that spend will not go ahead as originally planned. This relates entirely to the Loan to Reading Transport (RTL) Ltd scheme. RTL advised that they would not be requesting a loan from the Council during 2022/23;
 - £0.066m budget reduction relating to a 2021/22 carry forward adjustment for the Leisure Procurement scheme;
 - £0.013m budget increase relating to a 2021/22 carry forward adjustment for the Public Sector Decarbonisation Funds – School Estate Double Glazing Programme scheme.
- 6.5. A net total of £15.443m of budgets are requested to be reprogrammed from 2022/23 into future years of the Capital Programme as set out in Appendix 3. This includes:
- £1.229m for the Co-located Profound and Multiple Learning Disabilities Day Opportunities and Respite Facility and Sheltered Housing Flats scheme due to

delays and changes to plans for the works to be carried out for some of the properties;

- £1.216m for South Reading Mass Rapid Transit (MRT) to reflect the actual level of expenditure achieved for 2022/23;
 - £2.797m for the Delivery Fund to reflect the actual outturn achieved across the transformation programme in 2022/23;
 - £1.396m to be brought forward into 2022/23 from 2023/24 for the Reading West Station scheme, to reflect updated interim billing information provided by an external partner, where the Council acts as a banker for the funding, for expenditure incurred on parts of the scheme by this partner;
 - £1.494m to be brought forward into 2022/23 from 2023/24 for the Leisure Procurement scheme where works have been completed ahead of previous estimates;
 - £6.215m of net re-programming between years relating to the Education related schemes that are fully funded by grants and contributions;
 - £6.876m of net re-programming between years across all other schemes.
- 6.6. The Capital Programme has been supported by a drawdown of £2.718m from the Capital Financing Smoothing Reserve to fund the following schemes:
- £0.629m Customer Digital Experience;
 - £0.470m Universal Digital Systems;
 - £1.116m IT Future Operating Model;
 - £0.503m Re-procurement/re-implementation of Finance System.

- 6.7. It is requested the following capital schemes are given scheme and spend approval as they will be funded from grants and Section 106 contributions. The Caversham Court Gardens scheme is an approved scheme in the 2023/24 capital programme, but works have started in advance of the 2023/24 financial year.

Table 12. Capital Programme Scheme & Spend Approval Requests

Scheme	Budget £m
New Directions Ways into Work Skills capital project	0.072
Forbury Gardens Bandstand	0.012
Ecological Works	0.021
Total	0.105

- 6.8. It is requested that the Caversham Court Gardens capital scheme is given spend approval. This is an approved scheme in the 2023/24 capital programme, but works have started in advance of the 2023/24 financial year.

Table 13. Capital Programme Spend Approval Requests

Scheme	Budget £m
Restoration of historic Wall at Caversham Court Gardens	0.015
Total	0.015

7. Housing Revenue Account Capital Programme

- 7.1. The HRA Capital Programme for 2022/23 has an approved budget of £29.987m.
- 7.2. The provisional HRA Capital Programme outturn position is a £1.584m positive net variance against the approved budget of £29.987m. A net £1.584m of budget is requested to be slipped between 2022/23 and 2023/24 per Appendix 3.
- 7.3. A net total of £1.584m of budgets are requested to be reprogrammed from 2022/23 into future years of the Capital Programme as set out in Appendix 3. This includes:
- £0.448m and £0.754m to be brought forward into 2022/23 from 2023/24 for the Major Repairs rolling programme of works due to an increase in the programme in the final quarter of the year;
 - £0.114m to be brought forward into 2022/23 from 2023/24 for other schemes;
 - £2.900m of budget to be re-profiled into 2023/24 for the Local Authority New Build and Acquisitions schemes.

8. Savings Delivery

- 8.1. The Council had a challenging savings target for 2022/23 of £10.224m to meet current and expected funding pressures. This total was made up of £8.179m of in-year savings as per the 2022/23 MTFS and £2.045m of savings rolled forward from 2021/22.
- 8.2. A total of £7.401m of savings were delivered in 2022/23. The residual £2.823m will be carried forward for delivery in 2023/24. Further details regarding the delivery of savings are set out in Appendix 5.
- 8.3. Despite £2.823m of savings not being delivered in 2022/23 directly as planned, the Council is reporting a positive net position against the net budget, as set out in Table 1 above; these savings targets have therefore effectively been mitigated against in-year.
- 8.4. The following table summarises the final savings delivery for 2022/23:

Table 14. General Funds Savings Tracker Summary

Directorate	Savings Target 2022/23	Savings Delivered 2022/23	Non-Delivered Savings 2022/23	Savings Removed at 2023/24 Budget Setting	Savings Carried Forward to 2023/24
	£m	£m	£m	£m	£m
Adult Care & Health Services	(1.735)	(1.735)	0.000	0.000	0.000
Economic Growth & Neighbourhood Services	(6.579)	(4.140)	(2.439)	0.000	(2.439)
Resources	(0.658)	(0.351)	(0.307)	0.000	(0.307)
Chief Executive Services	0.000	0.000	0.000	0.000	0.000
Corporate	(0.077)	0.000	(0.077)	0.000	(0.077)
Total Council Services	(9.049)	(6.226)	(2.823)	0.000	(2.823)
Children's Services (BFfC)	(1.175)	(1.175)	0.000	0.000	0.000
Total	(10.224)	(7.401)	(2.823)	0.000	(2.823)

- 8.5. The successful delivery of agreed savings remains critical to achieving the underlying balanced base budget position agreed as part of the MTFs. Accordingly, all savings have been rigorously monitored throughout 2022/23 and mitigations sought so far as possible for any identified delay in implementation or delivery.
- 8.6. The following table shows the revised savings required over the period 2023/24-2025/26, including the £2.823m of savings brought forward from 2022/23.

Table 15. Savings Targets 2023/24-2025/26

Directorate	Savings Target 2023/24	Savings Target 2024/25	Savings Target 2025/26	Total
	£m	£m	£m	£m
Adult Care & Health Services	(0.461)	0.000	0.000	(0.461)
Economic Growth & Neighbourhood Services	(5.716)	(1.771)	(0.930)	(8.417)
Resources	(1.314)	(0.846)	(0.299)	(2.459)
Chief Executive	0.000	0.000	0.000	0.000
Corporate	(0.327)	0.000	0.000	(0.327)
Total Council Services	(7.818)	(2.617)	(1.229)	(11.664)
Children's Services (BFfC)	(0.300)	(0.600)	(0.100)	(1.000)
Total	(8.118)	(3.217)	(1.329)	(12.664)

9. Delivery Fund

- 9.1. Costs of service transformation and the delivery of future ongoing savings are able to be charged to capital (and financed from new capital receipts) due to the introduction of the Flexible Capital Receipts Regulations. These regulations are currently due to end at 31st March 2025.
- 9.2. £1.268m was spent in delivering 2022/23 savings and transformation. Including previous years, a total of £15.351m has been invested from the Delivery Fund to assist in delivering identified savings and transformation proposals as at 31st March 2023.
- 9.3. Further details on the Delivery Fund are set out in Appendix 5.

10. Reserves

- 10.1. The impact of the 2022/23 outturn position on the Council's reserves, as proposed in Appendix 6 is set out in the following table.

Table 16. Reserves Summary

	Balance as at 1 April 2022	In-Year Transfers (To)/From Reserves	Proposed Transfers (To)/From Reserves (Service Requests)	Proposed Transfers (To)/From Reserves (Outturn)	Balance as at 31 March 2023	Projected Balance at 31 March 2023 per 2023/24 Budget Setting	Movement
	£m	(To)/From £m	(To)/From £m	(To)/From £m	£m	£m	£m
General Fund Reserves							
Minimum Balance	(7.500)	(0.721)	0.000	0.000	(8.221)	(8.221)	0.000
Earmarked Reserves	(80.027)	15.968	(0.281)	(3.910)	(68.250)	(61.828)	(6.422)

Total General Fund Reserves	(87.527)	15.247	(0.281)	(3.910)	(76.471)	(70.049)	(6.422)
Schools' Reserves	(0.855)	2.833	0.000	0.000	1.978	1.281	0.697
Housing Revenue Account Reserves	(51.295)	3.085	0.000	0.000	(48.210)	(51.170)	2.960
Total Revenue Reserves	(139.676)	21.165	(0.281)	(3.910)	(122.702)	(119.938)	(2.764)

- 10.2. The General Fund Reserve balance of £8.221m is in line with the recommendation made in the Chief Finance Officer's Report on the Robustness of the Council's 2023/24 budget that the level of working balance for the General Fund should be 5% of net revenue expenditure.
- 10.3. Net transfers totalling £15.968m from earmarked reserves have been processed during 2022/23 to date. This includes previously approved transfers as well as those transfers that are a requirement such as required roll forwards of government grants. The reserve movements include a total net transfer to reserves of £7.398m from service and corporate budgets offset by the budgeted drawdown of £19.928m in respect of the Collection Fund within Funding, and a transfer to the General Fund Reserve of £0.721m. Additionally, £2.718m has been transferred from the Capital Financing Smoothing Reserve to support the Capital Programme.
- 10.4. Service roll-forward requests totalling £0.281m have been received as set out in paragraph 4.1.
- 10.5. It is proposed that the General Fund positive net variance of £4.191m is transferred to earmarked reserves as set out in Appendix 6 (which includes the service roll-forward requests of £0.281m). The total earmarked reserve balance as at 31st March 2023 would therefore be £68.250m which is £6.422m higher in total than the estimated £61.828m projected at 2023/24 budget setting, primarily due to additional grants carried forward to the Revenue Grant Unapplied Reserve.
- 10.6. Schools' reserves are ringfenced for local authority managed schools. There is a net transfer from reserves of £1.534m resulting in a balance of £1.485m as at 31st March 2023. The Dedicated Schools Grant Reserve deficit has increased by £1.299m to £3.463m.
- 10.7. The provisional outturn for the Housing Revenue Account (HRA) is a positive net variance compared to budget of £0.132m which results in a net drawdown from HRA reserves of £2.022m, comprised of a drawdown of £3.158m from the main HRA Reserve, a transfer of £0.073m to the North Whitley PFI Reserve and a transfer to the HRA Major Repairs Reserve of £1.063m (the Major Repairs Reserve is a capital reserve and therefore is not included within Table 16).
- 10.8. The HRA reserve balance as at 31st March 2023 is therefore £37.990m. The North Whitley PFI reserve balance of £10.220m is also contained within the overall HRA reserves, therefore total HRA revenue reserves as at 31st March 2023 are £48.210m. The total HRA revenue balances are £2.960m lower than forecast at 2023/24 budget setting but this partially offset by an increase in HRA capital reserves of £1.063m due to increased depreciation and a reduced level of capital expenditure.

11. Collection Fund

- 11.1. The following table shows the Council's collection rate of the total annual debit raised for Council Tax and Non-Domestic (Business) Rates as at the end of Quarter 4.
- 11.2. Council Tax collection rates are marginally behind the collection levels at the same point when compared to pre-Covid-19 pandemic rates (2019/20) but are ahead when compared to 2021/22 and 2020/21. This indicates a near full recovery from the impacts of the Covid-19 pandemic; a full recovery is likely being restricted due to the impacts of the cost of living crisis beginning to take hold.
- 11.3. Non-Domestic collection rates are also still behind the collection levels at the same point when compared to pre-Covid-19 pandemic rates (2019/20) but ahead when compared to 2021/22 and 2020/21. The improvement compared to the last two financial years is likely due to no periods of national lockdowns as a response to the Covid-19 pandemic having been required in 2022/23.

Table 17. Collection Fund Collection Rates

	2019/20	2020/21	2021/22	2022/23	Comparison to 2021/22	Comparison to 2019/20
	%	%	%	%	%	%
Council Tax	96.17	95.43	95.53	96.07	0.44	(0.10)
Non-Domestic Rates	97.71	94.22	95.56	96.61	1.05	(1.10)

12. Impact on 2023/24 Budget and Medium-Term Financial Strategy

- 12.1. The provisional outturn figures, as set out above, will have the following impact in 2023/24 and future years:
- overall General Fund Reserve balances of £70.049m were assumed as part of 2023/24 budget setting. Based on the provisional outturn there is therefore an overall net increase of £6.422m;
 - £2.823m of non-delivered 2022/23 savings have been rolled forward into 2023/24. These savings were assumed as delivered in the 2023/24 base budget setting and require delivering.

13. Corporate Plan Performance

- 13.1. A new three-year Corporate Plan for 2022/23-2024/25 was published in March 2022, and a revised set of 58 performance measures were developed for monitoring from April 2022, along with a set of 52 key projects and initiatives which are helping to deliver the Council's mission and priorities. 31 of the performance measures are annual measures that will not be reported on until after March 2023.
- 13.2. These measures and projects were identified by directorates as those that best demonstrate progress in achieving key outcomes. This report is therefore intended to provide an overview of the contribution that the Council makes across all its activities to improving Reading as a place to live, work and visit.
- 13.3. The performance measures and projects are set against each of themes of the Corporate Plan for 2022/23-2024/25:
- Healthy environment;

- Thriving communities;
- Inclusive economy.

13.4. The Council is now using a new system for performance management reporting, following the expiry of our InPhase licence. We are now using SharePoint for data entry and Power BI for viewing and reporting performance. This system provides a more user-friendly experience.

Corporate Plan Measures

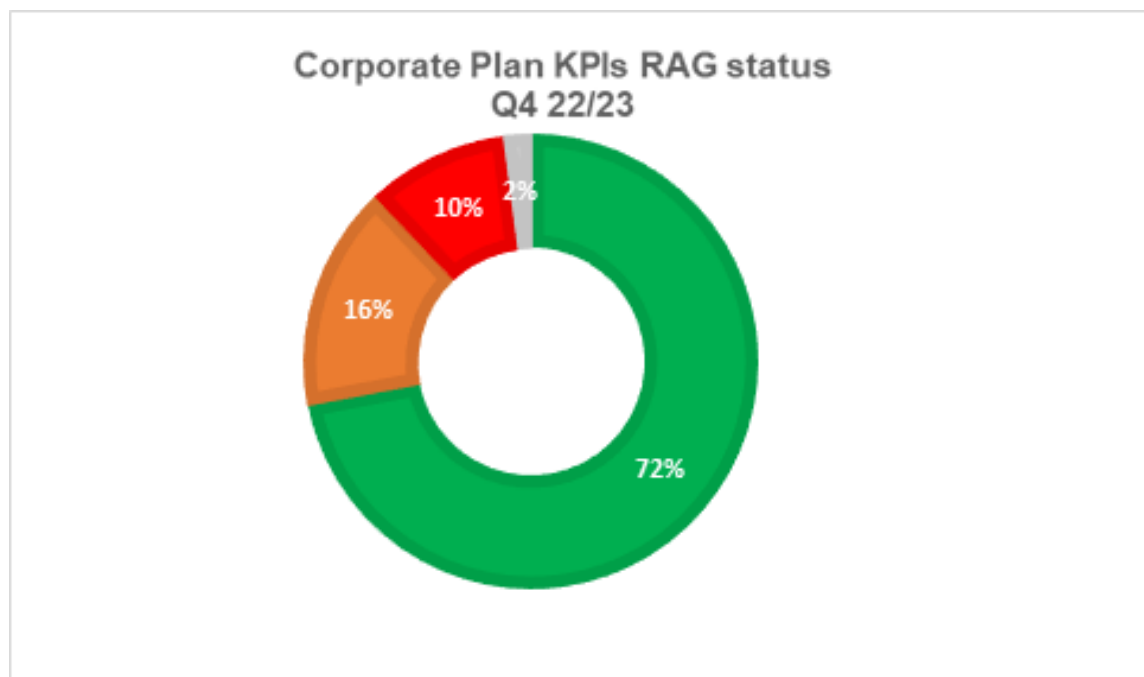
13.5. The tables and charts below display an overview of the shifts in performance for the Corporate Plan measures between Q3 and Q4 for the quarterly measures; direction of travel is not reported for the annual measures. Table 18 shows performance against the target (red/amber/green) for all the measures, including the annual measures.

Table 18. Summary of Direction of Travel

	Q1-Q2	Q2-Q3	Q3-4	
	%	%	Number of Measures	%
Getting better	44	56	19	70
Getting worse	41	29	5	19
Unchanged	4	11	3	11
N/A – No Target/Comparison ¹	11	4	0	0
Total	100	100	27	100

Table 19. Summary of Performance Against Target²

	Q1		Q2		Q3		Q4	
	No.	%	No.	%	No.	%	No.	%
Green	13	48	15	54	19	70	41	72
Amber	4	15	8	29	4	15	9	16
Red	5	18	4	14	4	15	7	10
N/A - No Target/Comparison	5	19	1	3	0	0	1	2
Total	27	100	28	100	27	100	58	100



¹ Q2 data not available for comparison purposes

² Green = target achieved; Amber = up to 10% below target; Red = more than 10% below target figures in Qs 1-3 only include quarterly and monthly measures

- 13.6. The six Corporate Plan measures recorded with a 'red' status against 2022/23 targets are listed below.

Table 20. Corporate Plan Measures – Red Status

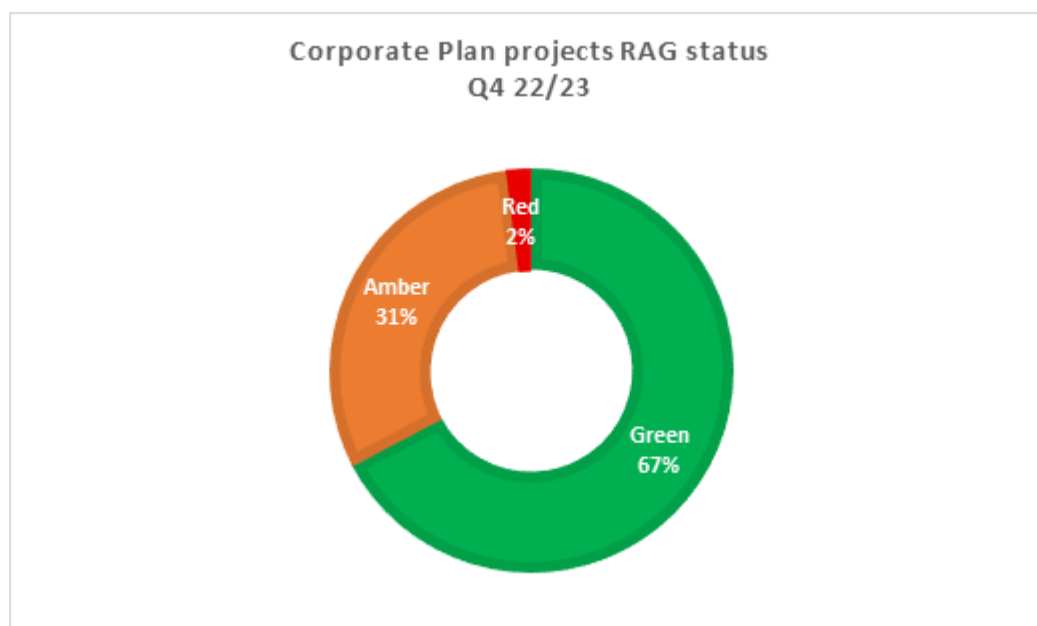
Key Performance Indicator (KPI)	Commentary
Hectares turned over to re-wilding	Target not quite achieved due to the wet Winter which has meant that the full area couldn't be prepared. This will be added to the target for 2023/24.
Key stage 2 results - reducing the gap in attainment between advantaged and disadvantaged pupils	The Annual School Standards report being presented to ACE Committee on 12 July sets out current actions being taken and recommended next steps in the coming academic year to reduce the attainment gaps for disadvantaged pupils.
Percentage of people with a learning disability in paid employment	This KPI remains a high priority in the Transition and SEND groups, proactive work is being undertaken with the Elevate and New Direction College to target residents with LD.
Number of affordable homes delivered	<p>Affordable housing delivery is lower than 2021/22 (178) but significantly higher than 2019/20 (80) and 2020/21 (54). The amount of affordable housing delivered in a year is heavily dependent on when a limited number of large housing schemes are delivered, and this can fluctuate significantly from year to year. In addition, there were relatively low levels of local authority new build affordable housing completed in 2022/23 as some of the larger projects (e.g. Wensley Road, North Street and Arthur Hill) remain under construction.</p> <p>There are continued challenges with securing fully policy-compliant affordable housing on private sites for reasons of viability, which are likely to continue to impact on meeting affordable housing needs. With around 280 affordable homes currently under construction, there is expected to be increased provision in 2023/24.</p>
Number of people sleeping rough	Various factors since Covid and economic and socio-economic circumstances have influenced an increase and not achieving this target. A new National Rough Sleeping Strategy was released in 2022 and Reading's Rough Sleeping Strategy/Action Plan is due for revision in 2023, alongside additional funding streams and interventions to tackle the issue in Reading. These are being implemented between 2022 – 2025 aiming to reduce and sustain a reduction in this figure.
Percentage of service users in receipt of Adult Social Care Direct Payments	A Direct Payment set-up function has been established (one DP Officer post) to encourage usage of Direct Payments and support staff with the process.

Corporate Plan Projects

13.7. The RAG status for the Corporate Plan projects is shown below.

Table 21. Summary of RAG Status

RAG Status	Q1	Q2	Q3	Q4	
	%	%	%	No.	%
Green	58	58	56	35	67
Amber	40	40	38	16	31
Red	2	2	6	1	2
Total	100	100	100	52	100



13.8. The one Corporate Plan project recorded with a 'red' status this quarter is:

- Review and expansion of the Community Reablement Team to maximise people's independence - this transformation project has paused whilst an operation improvement plan is completed by the service. The project will be reviewed for further action in Spring 2023.

13.9. Appendix 7 sets out the Q4 performance for the full list of measures and projects.

13.10. Appendix 8 sets out those measures where there has been a significant change in performance from the previous period.

14. Debt Write-Off

14.1. Having complied with the requirements of the Council's Debt Management Strategy, all recovery activity has been exhausted and the Director of Finance recommends that the total amounts submitted to the Committee for write-off for cases above £20,000 are:

- Non-Domestic Rates - £156,153.21;
- Sundry Debt (including Adult Social Care) - £167,618.08;

14.2. The list of specific debts requested to be written-off are set out in Appendix 9. It is considered that information contained within Appendix 9 contains exempt information under the meaning of sections 1, 2 and 3 of Schedule 12A of the Local Government Act 1972, as amended, and therefore cannot be made public.

- 14.3. The Non-Domestic Rates write-offs will be contained within the existing respective bad debt provisions. These bad debt provisions are reviewed annually to take account of the likely levels of bad debt write-offs and the potential for any recovery of debt that has been previously written off.
- 14.4. The cost of non-domestic rates write-offs is shared between the Council (49%), Royal Berkshire Fire and Rescue Service (1%) and Central Government (50%).

15. Contribution to Strategic Aims

- 15.1. Full details of the Council's Corporate Plan and the projects which will deliver these priorities are published on the [Council's website](#). These priorities and the Corporate Plan demonstrate how the Council meets its legal obligation to be efficient, effective, and economical.
- 15.2. Delivery of the Council's budget is essential to ensuring the Council meets its strategic aims and remains financially sustainable going forward.

16. Environmental and Climate Implications

- 16.1. The Council declared a Climate Emergency at its meeting on 26th February 2019 (Minute 48 refers), with the intention of achieving a carbon neutral Reading by 2030. The Council endorsed the Reading Climate Emergency Strategy 2020-25 and its vision for a 'net zero, resilient Reading by 2030' in November 2020. At the same time it adopted a new corporate Carbon Plan for the Council's own operations, including the target of an 85% cut in Council emissions by 2025 en route to net zero by 2030. The Council's Corporate Plan monitors progress in reducing the carbon footprint of both the Borough and the Council (Appendix 7).
- 16.2. There are no specific environmental and climate implications to report in relation to the recommendations set out in this report.

17. Community Engagement

- 17.1. Budget-related communications and consultations will continue to be a priority over the next three years as we work to identify savings and efficiencies.

18. Equality Implications

- 18.1. The equality duty is relevant to the development of the Budget and Corporate Plan. The specific savings and income proposals included in the budget are subject to consultation and equality impact assessments where required and these are being progressed as appropriate.

19. Other Relevant Considerations

- 19.1. There are none.

20. Legal Implications

- 20.1. The Local Government Act 2003 requires that the Authority reviews its Budget throughout the year and takes any action it deems necessary to deal with the situation arising from

monitoring. Currently monitoring reports are submitted to Policy Committee quarterly throughout the year.

- 20.2. There are no legal requirements to have a Corporate Plan. Nevertheless, considering the size and complexity of the services we provide and have responsibility for, it is sensible to have a strategic document for the organisation which sets out key priorities and activities against a robust and sustainable financial strategy.

21. Financial Implications

- 21.1. The financial implications are set out in the body of this report.

22. Timetable for Implementation

- 22.1. Not applicable.

23. Background Papers

- 23.1. There are none.

Appendices

- 1. General Fund Outturn**
- 2. Housing Revenue Account (HRA) Outturn**
- 3. Capital Programme Outturn**
- 4. Savings**
- 5. Delivery Fund**
- 6. Reserves Position as at 31st March 2023**
- 7. Corporate Plan Monitoring for Quarter 4 2022/23 (Measures & Projects)**
- 8. Corporate Plan Measures for Quarter 4 (Charts)**
- 9. Debt Write-Offs**

Appendix 1 - General Fund Outturn 2022/23

	Budget £000	Outturn £000	Variance £000
<u>Service Areas</u>			
Commissioning & Transformation	2,163	1,953	(210)
Adults Services Operations	39,892	39,818	(74)
Public Health	0	0	0
Directorate Other	491	547	56
Safeguarding, Quality, Performance & Practice	1,375	1,366	(9)
Adult Care and Health Services	43,921	43,684	(237)
Transportation	(1,837)	(1,637)	200
Planning & Regulatory Services	2,647	3,057	410
Housing & Communities	2,022	2,047	25
Culture	3,953	4,241	288
Environmental & Commercial Services	16,487	16,685	198
Property & Asset Management	(3,966)	(4,044)	(78)
Management & Sustainability	515	693	178
Environment and Neighbourhood Services	19,821	21,042	1,221
Policy, Performance & Customer Services	2,650	2,339	(311)
Human Resources & Organisational Development	1,889	1,775	(114)
Procurement & Contracts	488	582	94
Finance	4,417	4,479	62
Legal & Democratic Services	2,630	3,314	684
Digital, Technology & Change	6,308	6,016	(292)
Resources	18,382	18,505	123
Corporate Management Team	883	973	90
Communications	673	714	41
Chief Executive Services	1,556	1,687	131
Children's Services retained by Council	781	687	(94)
Children's Services delivered by BFfc	48,958	51,803	2,845
	133,419	137,408	3,989
<u>Corporate Items</u>			
Capital Financing Costs	16,381	12,873	(3,508)
Contingency	3,627	0	(3,627)
Movement to/(from) Reserves	695	695	0
Other Corporate Budgets	(4,132)	(4,559)	(427)
	16,571	9,009	(7,562)
<u>Total Expenditure</u>	149,990	146,417	(3,573)

<u>Funded by</u>			
Council Tax Income	(104,403)	(104,403)	0
NNDR Local Share	(26,510)	(27,123)	(613)
New Homes Bonus	(2,038)	(2,038)	0
Section 31 Grant	(12,580)	(12,580)	0
Revenue Support Grant	(2,108)	(2,108)	0
Other Government Grants	(2,404)	(2,409)	(5)
One-off Collection Fund (Surplus)/Deficit	19,981	19,981	0
Section 31 Grants Release from Reserves	(19,928)	(19,928)	0
	(149,990)	(150,608)	(618)
(Positive)/Adverse Variance	0	(4,191)	(4,191)

Appendix 2 - Housing Revenue Account (HRA) Outturn 2022/23

	Budget £000	Outturn £000	Variance £000
Housing Management	9,759	9,325	(434)
Special Services	3,606	3,047	(559)
Revenue Repairs	6,432	7,402	970
PFI costs	7,197	7,405	208
Bad Debt Provision	753	69	(684)
Debt Costs	6,741	6,044	(697)
Total Expenditure	34,488	33,292	(1,196)
Dwelling Rents	(37,863)	(37,306)	557
Service Charges	(965)	(878)	87
PFI Credit	(3,997)	(3,997)	0
Interest on Balances	(816)	(1,112)	(296)
Other Income	(309)	(281)	28
Total Income	(43,950)	(43,574)	376
(Surplus) / Deficit before Depreciation	(9,462)	(10,282)	(820)
Depreciation	11,616	13,367	1,751
Net (Surplus) / Deficit	2,154	3,085	931
Contribution to / (from) HRA Balances	(2,154)	(3,085)	(931)
Contribution to / (from) Major Repairs Reserve	0	1,063	1,063
Total Contributions to /(from) HRA Reserves	(2,154)	(2,022)	132

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Appendix 3 - Capital Programme Outturn

Scheme Name	Revised Budget Quarter 3 2022/23 £000	Budget Movements Between Schemes £000	Additional Budgets added to the Programme - Funded by Grants & Contributions £000	Additional Budgets requested to be added to the Programme - Funded by Capital Receipts & Borrowing £000	Reduced Budgets - Completed Schemes & Other carry forward budget adjustments £000	Revised Budget Quarter 4 2022/23 £000	Provisional Outturn 2022/23 £000	Variance 2022/23 £000	2022/23 Roll-Forward/(Back) Requests	2023/24 Approved Budget	2023/24 Revised Budget
General Fund											
Adult Care and Health Services											
e-Marketplace & Equipment Renewal Portal Software	0					0	0	0	0	170	170
Mobile Working and Smart Device	0					0	0	0	0	150	150
Replacement of Community Re-ablement Software	25					25	23	(2)	2	60	62
Co-located profound and multiple learning disabilities day opportunities and respite facility and sheltered housing flats	1,413					1,413	184	(1,229)	1,229	3,879	5,108
Adult Care and Health Services Total	1,438	0	0	0	0	1,438	207	(1,231)	1,231	4,259	5,490
Economic Growth and Neighbourhood Services											
Transportation, Planning & Regulatory Services											
Air Quality Monitoring	15					15	0	(15)	15	0	15
Active Travel Tranche 2	113					113	411	298	(298)	885	587
Active Travel Tranche 3	200					200	96	(104)	104	1,300	1,404
Berkshire Coroner's Removals	0					0	0	0	0	29	29
Bus Service Improvement	500					500	283	(217)	217	8,326	8,543
Local Transport Plan Development	40					40	176	136	(136)	1,391	1,255
National Cycle Network Route 422	13					13	0	(13)	13	124	137
Reading West Station											
	622					622	2,018	1,396	(1,396)	3,620	2,224
South Reading MRT (Phases 1 & 2)	399					399	5	(394)	394	0	394
South Reading MRT (Phases 3 & 4)	1,641					1,641	425	(1,216)	1,216	0	1,216
South Reading MRT (Phases 5 & 6)	0					0	0	0	0	2,000	2,000
Town Centre Street Trading Infrastructure	28					28	0	(28)	28	0	28
Construction of Green Park Station	3,009		903			3,912	3,617	(295)	295	0	295
Car Park Investment Programme (inc P&D, Red Routes & Equipment)	107		209			316	316	0	0	326	326
Additional Storage Capacity at Mortuary	0					0	0	0	0	0	0
Purchase of Mortuary Equipment	12					12	12	0	0	0	0
CIL Local Funds - Community	502					502	29	(473)	473	125	598
CIL Local Funds - Transport	212					212	144	(68)	68	656	724
CIL Local Funds -Neighbourhood Allocation	477					477	0	(477)	477	0	477
S106 individual schemes list	988					988	0	(988)	988	0	988
Defra Air Quality Grant - Bus Retrofit	70					70	0	(70)	70	318	388

Appendix 3 - Capital Programme Outturn

Scheme Name	Revised Budget Quarter 3 2022/23 £000	Budget Movements Between Schemes £000	Additional Budgets added to the Programme - Funded by Grants & Contributions £000	Additional Budgets requested to be added to the Programme - Funded by Capital Receipts & Borrowing £000	Reduced Budgets - Completed Schemes & Other carry forward budget adjustments £000	Revised Budget Quarter 4 2022/23 £000	Provisional Outturn 2022/23 £000	Variance 2022/23 £000	2022/23 Roll-Forward/(Back) Requests	2023/24 Approved Budget	2023/24 Revised Budget
Defra Air Quality Grant - Go Electric Reading	18					18	1	(17)	17	0	17
Electric Vehicle Charging Points	0					0	0	0	0	250	250
Air Quality Grant - AQ sensors awareness & behaviour change											
Transport Demand Management Scheme	0					0	0	0	0	220	220
Rogue Landlord Enforcement	75					75	0	(75)	75	0	75
Transportation, Planning & Regulatory Services - Sub Total	9,041	0	1,112	0	0	10,153	7,533	(2,620)	2,620	19,970	22,590
Housing & Communities											
Provision of Gypsy & Traveller Accommodation	100					100	47	(53)	53	3,402	3,455
Harden Public Open Spaces to Prevent Incursion	42					42	54	12	(12)	25	13
Green Homes Scheme - GF element	244					244	203	(41)	41	0	41
Disabled Facilities Grants (Private Sector)	1,257		94			1,351	1,351	0	0	1,197	1,197
Foster Carer Extensions	0					0	0	0	0	400	400
Private Sector Renewals	444					444	89	(355)	355	300	655
Housing & Communities - Sub Total	2,087	0	94	0	0	2,181	1,744	(437)	437	5,324	5,761
Culture											
Leisure Centre Procurement	19,525				(66)	19,459	20,953	1,494	(1,494)	9,892	8,398
Christchurch Meadows Paddling Pool	0					0	0	0	0	0	0
Development of facilities at Prospect Park/Play	238					238	208	(30)	30	(8)	22
Reading Football Club Social Inclusion Unit to SRLC	0					0	0	0	0	1,534	1,534
Small Leisure Schemes	61					61	0	(61)	61	246	307
Levelling Up Delivery Plan - New performance space at the Hexagon Theatre	0					0	0	0	0	3,245	3,245
Levelling Up Delivery Plan - New Reading Library at the Civic Centre	0					0	0	0	0	1,603	1,603
Abbey Quarter restoration works	10					10	0	(10)	10	149	159
High Street Heritage Action Zone	137					137	203	66	(66)	1,048	982
Berkshire Record Office - extension of storage space	0					0	0	0	0	279	279
Hexagon lighting & emergency lighting replacement	10					10	8	(2)	2	260	262
Hexagon replacement of PA System	0					0	0	0	0	360	360
Town Hall Equipment	190					190	161	(29)	29	15	44

Appendix 3 - Capital Programme Outturn

Scheme Name	Revised	Budget	Additional	Additional	Reduced	Revised Budget	Provisional	Variance	2022/23 Roll-	2023/24	2023/24
	Budget	Movements	Budgets added	Budgets added	Budgets -	Quarter 4	Outturn	2022/23	Forward/(Back)	Approved	Revised
	Quarter 3	Between	to the	to the	Completed	2022/23	2022/23	2022/23	Requests	Budget	Budget
	2022/23	Schemes	Programme -	Programme -	Schemes &	2022/23	2022/23	2022/23			
	£000	£000	Funded by	Funded by	Other carry	£000	£000	£000			
			Grants &	Receipts &	forward						
			Contributions	Borrowing	budget						
			£000	£000	adjustments						
					£000						
Tilehurst Library Works	62					62	24	(38)	38	0	38
New Directions Ways into Work Skills capital project	0		72			72	72	0	0	0	0
Culture - Sub Total	20,233	0	72	0	(66)	20,239	21,629	1,390	(1,390)	18,623	17,233
Environmental & Commercial Services											
Playground equipment and Refreshment: Boroughwide	274					274	429	155	(155)	702	547
New Capital Bid - S106 Kenavon Drive Landscape	120					120	122	2	(2)	33	31
Victoria Rec	0					0	0	0	0	462	462
Levelling Up Parks Fund	66					66	12	(54)	54	0	54
Restoration of historic Wall at Caversham Court Gardens	0					0	15	15	(15)	100	85
Forbury Gardens Bandstand	0		12			12	12	0	0	0	0
Ecological Works	0		21			21	0	(21)	21	0	21
John Rabson skatepark	50					50	23	(27)	27	325	352
Re-wilding highways, parks and open space verges	0					0	0	0	0	76	76
Tree Planting	30					30	46	16	(16)	67	51
Annual Bridges and Carriage Way Works programme & Highway Infrastructure Works	4,654					4,654	5,246	592	(592)	1,842	1,250
Carriageways & Pavements Investment Programme	0					0	0	0	0	5,000	5,000
Cemetery Machinery	0					0	0	0	0	66	66
Chestnut Walk Improvements	6					6	6	0	(0)	29	29
CIL Local Funds - Heritage and Culture	285					285	11	(274)	274	0	274
CIL Local Funds - Leisure and Play	550					550	433	(117)	117	732	849
Highway Signals_Capital Bid	300					300	166	(134)	134	100	234
Highways Operational Resilience _ Capital Bid	0					0	0	0	0	74	74
Highways Structures Capital Bid	350					350	650	300	(300)	4,950	4,650
Invest to save energy savings - Street lighting	550					550	593	43	(43)	621	578
Pedestrian Defined Urban Pocket Gardens	75					75	0	(75)	75	0	75
Pedestrian dropped kerb facilities with tactile pavers	240					240	0	(240)	240	0	240
Pedestrian handrails	240					240	0	(240)	240	0	240
Pumping Station Upgrade Scheme (new)	215					215	187	(28)	28	14	42
Purchase of Electric Road Marking Machine	0					0	0	0	0	65	65
Railway footbridge lighting in West Reading	70					70	0	(70)	70	0	70
Reading Station Subway	206					206	0	(206)	206	0	206

Appendix 3 - Capital Programme Outturn

Scheme Name	Revised	Budget	Additional	Additional	Reduced	Revised Budget	Provisional	Variance	2022/23 Roll-Forward/(Back) Requests	2023/24 Approved Budget	2023/24 Revised Budget
	Budget	Movements	Budgets added	Budgets requested	Budgets -						
	Quarter 3	Between	to the	to be	Completed	Quarter 4	Outturn	2022/23			
	2022/23	Schemes	Programme -	added to	Schemes &	2022/23	2022/23	2022/23			
	£000	£000	Funded by	the	Other carry	£000	£000	£000			
			Grants &	Programme	forward						
			Contributions	- Funded	budget						
			£000	by Capital	adjustments						
				Receipts &							
				Borrowing							
				£000							
Reading Town Centre Design Framework	0					0	0	0	0	0	0
Smart City Cluster project and C-ITS	0		216			216	216	0	0	0	0
Town Centre Improvements	165					165	93	(72)	72	179	251
Free bulky waste service - collection vehicle	0					0	0	0	0	64	64
Cattle Market Car Park	0					0	3	3	(3)	519	516
Digitised TRO's	0					0	0	0	0	300	300
Eastern Area Access Works	0					0	0	0	0	199	199
Local Traffic Management and Road Safety Schemes	4					4	4	0	0	476	476
Oxford Road Corridor Works	0					0	0	0	0	299	299
Traffic Management Schools	0					0	0	0	0	431	431
Western Area Access Works	0					0	0	0	0	128	128
New Kit/Vehicles for Commercial Services Dvlpt	0					0	0	0	0	84	84
Vehicle Maintenance Workshop	0					0	0	0	0	1,312	1,312
New Vehicle for Highways & Drainage Commercial Service	0					0	0	0	0	71	71
Replacement Vehicles	2,108					2,108	2,166	58	(58)	673	615
Environmental & Commercial Services - Sub Total	10,558	0	249	0	0	10,807	10,433	(374)	374	19,993	20,367
Property & Asset Management											
The Heights Permanent Site Mitigation	44					44	31	(13)	13	343	356
Invest in Corporate buildings/Health & safety works	1,180					1,180	424	(756)	756	1,320	2,076
1 Dunsfold Fitout for BFFC Family Contact Centre - Development for Community Use	370					370	377	7	0	0	0
Accommodation Review - Phase 2A - 2C	966					966	187	(779)	779	590	1,369
Corporate Office Essential Works	174					174	196	22	(22)	717	695
Katesgrove Community and YOS Refurbishment - Development for Community Use	730					730	693	(37)	37	0	37
BFFC Accommodation Review	0					0	0	0	0	150	150
Maintenance & Enhancement of Council Properties	0					0	0	0	0	8,800	8,800
Regeneration Projects	125	(250)				(125)	0	125	(125)	2,329	2,204
Acre Business Park	0					0	0	0	0	478	478
The Keep building works and improved arts/culture facilities	94					94	0	(94)	94	0	94
Property & Asset Management - Sub Total	3,683	(250)	0	0	0	3,433	1,908	(1,525)	1,532	14,727	16,259

Appendix 3 - Capital Programme Outturn

Scheme Name	Revised Budget Quarter 3 2022/23 £000	Budget Movements Between Schemes £000	Additional Budgets added to the Programme - Funded by Grants & Contributions £000	Additional Budgets requested to be added to the Programme - Funded by Capital Receipts & Borrowing £000	Reduced Budgets - Completed Schemes & Other carry forward budget adjustments £000	Revised Budget Quarter 4 2022/23 £000	Provisional Outturn 2022/23 £000	Variance 2022/23 £000	2022/23 Roll-Forward/(Back) Requests	2023/24 Approved Budget	2023/24 Revised Budget
Management & Sustainability											
Renewable Energy	695					695	103	(592)	592	819	1,411
Salix Decarbonisation Fund	1,574					1,574	1,160	(414)	414	951	1,365
Salix Re-Circulation Fund	57					57	4	(53)	53	467	520
Corporate Solar Programme	0					0	0	0	0	491	491
Management and Sustainability - Sub Total	2,326	0	0	0	0	2,326	1,267	(1,059)	1,059	2,728	3,787
Economic Growth and Neighbourhood Services Total	47,927	(250)	1,527	0	(66)	49,138	44,514	(4,624)	4,631	81,365	85,997
Resources											
Customer Digital Experience	750					750	629	(121)	121	1,627	1,748
Universal Digital Systems	812					812	470	(342)	342	2,037	2,379
IT Future Operating Model	538					538	1,116	578	(578)	2,037	1,459
Democratic Hybrid AV	0					0	0	0	0	90	90
Re-Procurement / Reimplementation of Finance System	440					440	503	63	(63)	160	97
Education Management System	384					384	307	(77)	77	0	77
Cemeteries and Crematorium	0					0	0	0	0	85	85
Cremator Procurement	1,065					1,065	943	(122)	122	735	857
Cremator	0					0	0	0	0	55	55
Burial Land Acquisition	80					80	9	(71)	71	1,070	1,141
Resources Total	4,069	0	0	0	0	4,069	3,977	(92)	92	7,896	7,988
Economic Growth and Neighbourhood Services (Education Schemes)											
Additional School Places - Contingency	50					50	0	(50)	50	450	500
Blessed Hugh Faringdon - Asperger Unit 30 place expansion (SE)	0		2			2	2	0	0	0	0
Primary Schools Expansion Programme - 2013-2017	0					0	0	0	0	0	0
DFC	0		647			647	647	0	0	0	0
SEN Provision - Avenue Centre	4,291					4,291	3,314	(977)	977	76	1,053
Asset Management	286					286	238	(48)	48	300	348
Children in care Emergency Provision	35					35	0	(35)	35	0	35
Civitas- Synthetic Sports Pitch	0					0	0	0	0	24	24
Contribution to SEN School Wokingham	123					123	123	0	0	0	0
Crescent Road Playing Field Improvements	311					311	185	(126)	126	0	126
Critical Reactive Contingency: Health and safety (Schools)	500					500	140	(360)	360	500	860
Fabric Condition Programme	3,448					3,448	2,273	(1,175)	1,175	2,000	3,175
Green Park Primary School	60					60	0	(60)	60	0	60
Heating and Electrical Renewal Programme	1,047					1,047	339	(708)	708	1,000	1,708

Appendix 3 - Capital Programme Outturn

Scheme Name	Revised Budget Quarter 3 2022/23 £000	Budget Movements Between Schemes £000	Additional Budgets added to the Programme - Funded by Grants & Contributions £000	Additional Budgets requested to be added to the Programme - Funded by Capital Receipts & Borrowing £000	Reduced Budgets - Completed Schemes & Other carry forward budget adjustments £000	Revised Budget Quarter 4 2022/23 £000	Provisonal Outturn 2022/23 £000	Variance 2022/23 £000	2022/23 Roll-Forward/(Back) Requests	2023/24 Approved Budget	2023/24 Revised Budget
Initial Viability work for the Free School at Richfield Avenue	20					20	4	(16)	16	20	36
Low Carbon Skills Fund - Bid Development	5					5	0	(5)	5	0	5
Low Carbon Skills Fund - Schools Estate Project Delivery	24					24	0	(24)	24	0	24
Katesgrove Primary Trooper Potts Building	59					59	3	(56)	56	0	56
Meadway Early Years Building Renovation	1					1	0	(1)	1	0	1
Modular Buildings Review	50					50	0	(50)	50	950	1,000
New ESFA funded schools - Phoenix College	0		36			36	36	0	0	0	0
New ESFA funded schools - St Michaels	0					0	0	0	0	0	0
Pinecroft-Children who have complex health, physical,sensory,disabilities & challenging behaviour	53					53	51	(2)	2	0	2
Cressingham- Community Short Breaks Provision	0					0	0	0	0	300	300
Dee Park Regeneration - Housing Infrastructure Fund (school)	500					500	40	(460)	460	5,500	5,960
Public Sector Decarbonisation Funds - School Estate Double Glazing Programme	1,065				13	1,078	291	(787)	787	0	787
SCD Units	473					473	395	(78)	78	0	78
School Estate Solar PV Programme	323		8			331	331	0	0	0	0
Schools - Fire Risk Assessed remedial Works	560					560	297	(263)	263	200	463
SEN Norcot	83					83	0	(83)	83	0	83
SEN High Needs provision capital allocations	0					0	0	0	0	4,977	4,977
The Heights Temporary School	351					351	0	(351)	351	0	351
Park Lane Primary School Annexe Replacement	500					500	0	(500)	500	2,000	2,500
Economic Growth and Neighbourhood Services (Education Schemes) Total	14,218	0	693	0	13	14,924	8,709	(6,215)	6,215	18,297	24,512

Appendix 3 - Capital Programme Outturn

Scheme Name	Revised Budget Quarter 3 2022/23 £000	Budget Movements Between Schemes £000	Additional Budgets added to the Programme - Funded by Grants & Contributions £000	Additional Budgets requested to be added to the Programme - Funded by Capital Receipts & Borrowing £000	Reduced Budgets - Completed Schemes & Other carry forward budget adjustments £000	Revised Budget Quarter 4 2022/23 £000	Provisional Outturn 2022/23 £000	Variance 2022/23 £000	2022/23 Roll-Forward/(Back) Requests	2023/24 Approved Budget	2023/24 Revised Budget
Corporate											
Delivery Fund (Pump priming for Transformation projects)	4,065					4,065	1,268	(2,797)	2,797	1,798	4,595
Loan To RTL (Bus replacement programme)	2,250				(2,250)	0	0	0	0	2,500	2,500
Oracle Shopping Centre capital works	100					100	209	109	0	100	100
Minster Quarter - Brownfield Land Grant Element	200					200	0	(200)	200	1,800	2,000
Minster Quarter	250	250				500	223	(277)	277	750	1,027
Corporate Total	6,865	250	0	0	(2,250)	4,865	1,700	(3,165)	3,274	6,948	10,222
General Fund Total	74,517	0	2,220	0	(2,303)	74,434	59,107	(15,327)	15,443	118,765	134,209
Housing Revenue Account (HRA)											
Disabled Facilities Grants	600	81				681	681	0	0	665	665
Extra care (cedar court)	0					0	0	0	0	0	0
Housing Management System	502					502	551	49	(49)	553	504
Major Repairs - Existing Homes Renewal	10,029	(81)				9,948	10,396	448	(448)	9,889	9,441
Major Repairs - Zero Carbon Retrofit works	1,145					1,145	1,899	754	(754)	13,911	13,157
Local authority new build programme for Older people and vulnerable adults	764					764	829	65	(65)	14,826	14,761
New Build & Acquisitions - Phase 2 - 4	16,947					16,947	14,047	(2,900)	2,900	14,466	17,366
Housing Revenue Account (HRA) Total	29,987	0	0	0	0	29,987	28,403	(1,584)	1,584	54,310	55,894

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Savings Delivery 2022/23

Appendix 4

Directorate	Saving	Delivered Savings 2022/23 £000	Undelivered Savings 2022/23 £000	Savings Removed at 2023/24 Budget Setting £000	Savings Carried Forward to 2023/24 £000
DACHS	Removal of agreed 3 year Voluntary Care Service funding	(250)			0
DACHS	Young people Transitions - Supporting young people into adulthood	(50)			0
DACHS	Additional DACHS Staffing Efficiencies	(200)			0
DACHS	TEC: Promoting the use of Assistive Technology	(78)			0
DACHS	Development of the Personal Assistant Market	(50)			0
DACHS	Promoting Independence (Outcome Based Service Delivery)	(75)			0
DACHS	Review and Rightsizing of Care Packages (2021/2022)	(80)			0
DACHS	Efficiency savings secured through Public Health re-procurement	(300)			0
DACHS	Development of an Accommodation Pathway for Vulnerable Working Age Adults	(25)			0
DACHS	Closing the DACHS Budget Gap	(627)			0
DACHS Total		(1,735)	0	0	0
DEGNS	School Crossing Patrollers	(14)			0
DEGNS	Fundamental Service Review - Parking		(150)		(150)
DEGNS	Increased revenue from on-street Pay and Display		(540)		(540)
DEGNS	Increased income from Parking Enforcement	(60)	(160)		(160)
DEGNS	Increased provision of Red Routes	(50)			0
DEGNS	Review Public Car Park provision borough wide		(200)		(200)
DEGNS	Increase off street parking charges		(150)		(150)
DEGNS	Increase in fees and charges	(3)			0
DEGNS	Workforce Review [Transportation]	(200)			0
DEGNS	Increase parking permit charges	(43)			0
DEGNS	Recovery of reduced parking income due to Covid-19*		(650)		(650)
DEGNS	Mandatory HMO Licensing		(75)		(75)
DEGNS	Discretionary HMO Licensing		(20)		(20)
DEGNS	Fundamental Service Review - Planning and Regulatory	(66)			0
DEGNS	Increase in charges for pre-planning application and planning fees	(55)	(55)		(55)
DEGNS	Proposed Fee Income Reading Festival		(50)		(50)
DEGNS	Reforecast income Licensing income budget	(10)			0
DEGNS	Increase in fees and charges	(20)			0
DEGNS	Reduction in professional specialist, management, enforcement and administrative resources; an increase to pre-planning application fees by 10%.	(120)			0
DEGNS	Town Centre Street Trading - New Pitches	(8)			0
DEGNS	Workforce Review [Planning & Regulatory Services]	(47)			0
DEGNS	Housing - Fundamental Service Review	(50)			0
DEGNS	Increase in fees and charges	(4)			0

Savings Delivery 2022/23

Appendix 4

Directorate	Saving	Delivered Savings 2022/23 £000	Undelivered Savings 2022/23 £000	Savings Removed at 2023/24 Budget Setting £000	Savings Carried Forward to 2023/24 £000
DEGNS	Workforce Review [Housing]	(50)			0
DEGNS	On Going Pension Costs Savings	(30)			0
DEGNS	Contribution from Public Health Grant	(250)			0
DEGNS	In-house management restructuring of Cultural Services	(75)	(25)		(25)
DEGNS	Increase in fees and charges	(33)			0
DEGNS	Workforce Review [Cultural Services]	(1)			0
DEGNS	Arts Fundraising campaign	(15)	(45)		(45)
DEGNS	Visa Verification increased income	(45)			0
DEGNS	Revenue impact of new contract for borough leisure facilities	(830)			0
DEGNS	Covid19 income pressure on the Town Hall and recovery plan*	(247)			0
DEGNS	Covid19 income pressure on the Hexagon and South Street Theatres and recovery plan*	(75)	(75)		(75)
DEGNS	Increase in Savings - Waste Operations	130			0
DEGNS	Fundamental Service review of Highways	(50)			0
DEGNS	Increase income on green waste due to additional uptake in years 1-3 and fee increase in years 2-3	(25)	(25)		(25)
DEGNS	Fundamental Service Review - Parks and Street Cleansing	(12)	(150)		(150)
DEGNS	Increased income from traded waste services (previous ref to CIL & IPD not relevant)	(100)			0
DEGNS	Increase in fees and charges	(5)			0
DEGNS	Additional income from advertising		(25)		(25)
DEGNS	Rewilding highway verges	(15)			0
DEGNS	Waste Contract - Budget realignment inline with anticipated expenditure	(100)			0
DEGNS	Continued commercial growth of Highways service	(5)			0
DEGNS	In-sourcing of Highways Structures Consultancy	(10)			0
DEGNS	Workforce Review [Environmental and Commercial Services]	(196)			0
DEGNS	Reduced fuel costs due to increase in electrical vehicles		(44)		(44)
DEGNS	Highways operational resilience	(12)			0
DEGNS	Workforce Review [Regeneration and Assets]	(62)			0
DEGNS	Review of Rents on Garages and Shops	(5)			0
DEGNS	Increase in fees and charges.	(24)			0
DEGNS	Review of office and workspace requirements	(162)			0
DEGNS	Investment property rental income increase	(1,086)			0
DEGNS Total		(4,140)	(2,439)	0	(2,439)
DoR	New customer services model		(207)		(207)
DoR	Additional Service Proposals for Registrar Services	(10)			0
DoR	Increase in Fees and Charges	(39)			0
DoR	Reduction in employer contributions arising from new Agency Contract	(90)			0

Savings Delivery 2022/23

Appendix 4

Directorate	Saving	Delivered Savings 2022/23 £000	Undelivered Savings 2022/23 £000	Savings Removed at 2023/24 Budget Setting £000	Savings Carried Forward to 2023/24 £000
DoR	Increase in Fees and Charges (Kennet Day Nursery)	(5)			0
DoR	Procurement & Contracts savings - Resources Directorate		(100)		(100)
DoR	Efficiencies from procuring new finance system	(112)			0
DoR	Finance workforce review	(50)			0
DoR	Procurement of Case Management system	(45)			0
DoR Total		(351)	(307)	0	(307)
CORP	Reducing mileage expenses through increased use of alternatives e.g. online meetings		(77)		(77)
CORP Total		0	(77)	0	(77)
BFFC	BFFC Savings	(1,175)			0
BFFC Total		(1,175)	0	0	0
Grand Total		(7,401)	(2,823)	0	(2,823)

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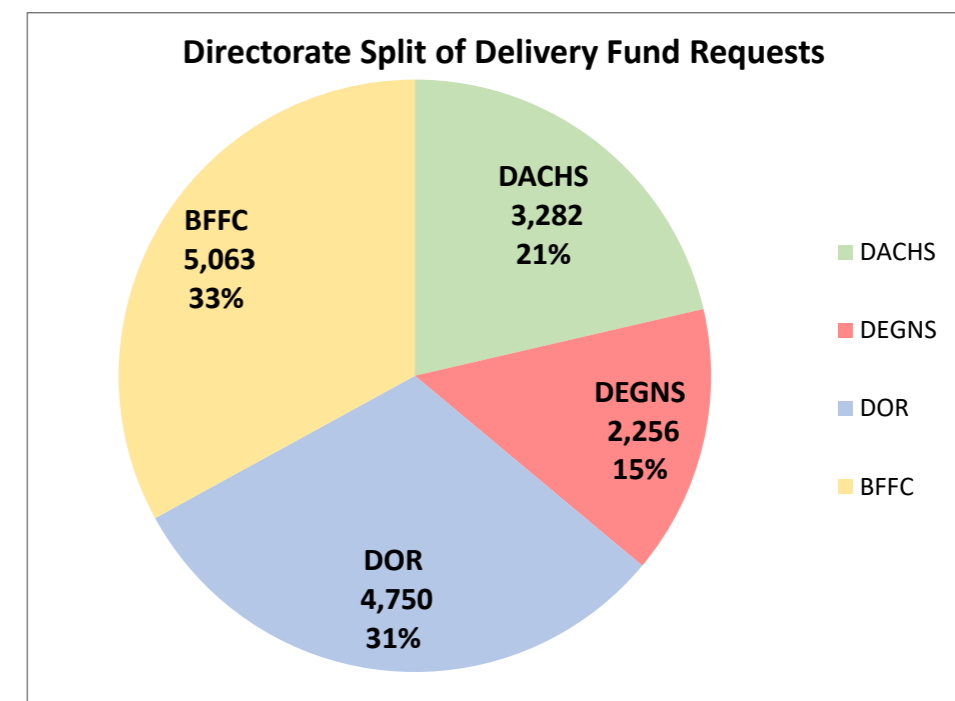
Section 1: Summary of resources by Directorate

Table 1 summarises the Delivery Fund programme totalling £15.352m over the 6 year period (2017-2023)

	Number of schemes in 2022/23	Approved resources (£000)						Total
		17/18	18/19	19/20	20/21	21/22	22/23	
Total	36	1,319	3,182	3,287	3,256	3,040	1,268	15,352

TABLE 1

Directorate	Number of schemes in 2022/23	Approved resources (£000)						Total
		17/18	18/19	19/20	20/21	21/22	22/23	
DACHS	18	462	802	844	119	639	417	3,282
DEGNS	5	50	379	1,131	600	44	52	2,256
DOR	9	755	909	581	1,034	946	525	4,750
BFFC	4	52	1,093	731	1,503	1,410	274	5,063
Total	36	1,319	3,182	3,287	3,256	3,040	1,268	15,352

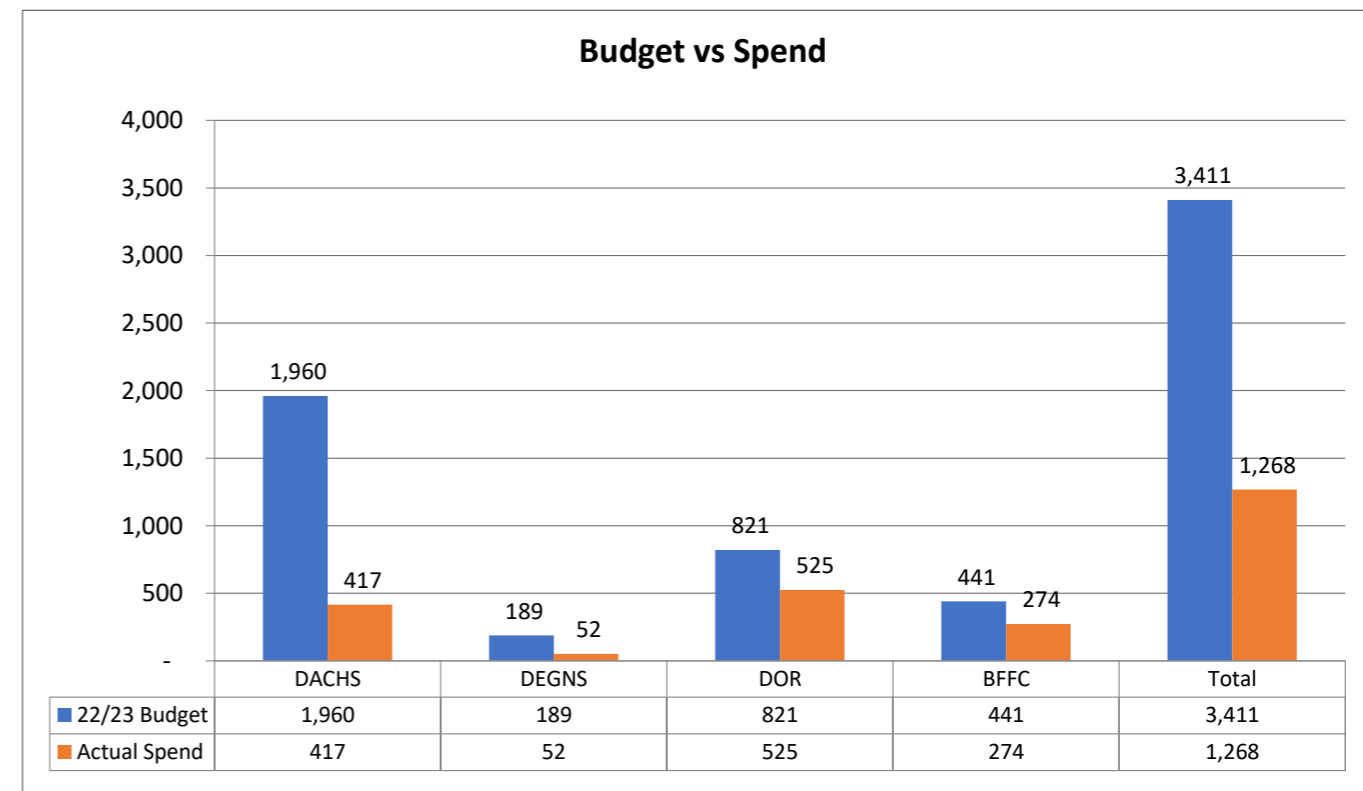


Section 2: Outturn Position 2022-23

Table 3 shows the 2022/23 budget (including unspent funds from 2021/22). These are requests that have been approved by CMT.

TABLE 3

Directorate	22/23 Budget	Outturn	Variance	Requested Roll Forward	23/24 Resources	Revised 23/24 Resources
	£'000	£'000	£'000	£'000	£'000	£'000
DACHS	1,960	417	(1,543)	1,499	1,004	2,503
DEGNS	189	52	(137)	132	167	299
DOR	821	525	(296)	295	489	784
BFFC	441	274	(167)	167	0	167
Total	3,411	1,268	(2,143)	2,093	1,660	3,753



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Appendix 6 - Reserves Position as at 31st March 2023

		Balance 01/04/2022	2022/23 Transfers In	2022/23 Transfers Out	Current Balance	Proposals per 2022/23 Outturn	Balance 31/03/2023
		£m	£m	£m	£m	£m	£m
General Fund Balance	Minimum level of unallocated reserves, 5% of net revenue budget	(7.500)	(0.721)	0.000	(8.221)	0.000	(8.221)
Earmarked Reserves - General Fund							
Emergency Planning Reserve	To cover for unforeseen emergencies not budgeted for	(0.610)	(0.698)	0.000	(1.308)	0.000	(1.308)
Communications Reserve	To allow for investment in communications strategies and engaging with the public	(0.200)	0.000	0.000	(0.200)	0.000	(0.200)
Housing Benefit Subsidy Loss Reserve	To provide for any potential clawback from central government of housing benefit subsidy following audit of the annual housing subsidy claim.	(0.600)	(0.025)	0.000	(0.625)	0.000	(0.625)
Public Health Reserve	The Public Health Grant is ring-fenced so any underspend is carried forward and spent in future years	(0.906)	(0.161)	0.000	(1.067)	0.000	(1.067)
Schools Deficit Liability Reserve	To fund potential deficits of schools that may become academies in the future	(0.674)	(0.330)	0.000	(1.004)	0.000	(1.004)
Climate Change Reserve	To allow for investment to address the climate emergency	(0.220)	(0.006)	0.000	(0.226)	0.000	(0.226)
Legal and Taxation Reserve	To meet potential one-off legal or tax liabilities	(0.300)	(1.060)	0.000	(1.360)	0.000	(1.360)
Pension Liabilities Reserve	To cover potential future Pension Fund liabilities arising from employer pension contribution rate fluctuations	(1.100)	0.000	1.100	0.000	0.000	0.000
Commercial Property Liabilities Reserve	To manage urgent liabilities associated with the Council's property	(1.700)	(1.100)	0.000	(2.800)	0.000	(2.800)
Revenue Grant Unapplied Reserve*	To hold Revenue Grant balances where the conditions for use have been met but relevant expenditure has not yet been incurred	(30.031)	(9.009)	21.501	(17.539)	0.000	(17.539)
Self Insurance Reserve	To meet estimated liabilities in connection with internally-held risks related to the Council's Insurance programme	(2.756)	(0.442)	0.000	(3.198)	0.000	(3.198)
IT and Digital Reserve	To replace IT and digital equipment that has passed its useful life to improve operational efficiency	(2.591)	0.000	0.000	(2.591)	0.000	(2.591)

		Balance 01/04/2022	2022/23	2022/23	Current Balance	Proposals per 2022/23 Outturn	Balance 31/03/2023
			Transfers In	Transfers Out			
		£m	£m	£m	£m	£m	£m
Transformation Reserve	To allow for potential slippage in the delivery of capital receipts to fund transformation as well as funding tranformation projects beyond the end of the flexible capital receipts directive in 2024/25.	(8.015)	0.000	1.051	(6.964)	0.000	(6.964)
Capital Financing Smoothing Reserve	To smooth funding across the period of the Medium Term Financial Strategy	(15.420)	0.000	8.715	(6.705)	(3.410)	(10.115)
Redundancy Reserve	To fund costs of redundancy	(0.345)	0.000	0.000	(0.345)	0.000	(0.345)
Demographic & Cost-Led Pressures Reserve	To provide for potential cost pressures arising from demographic or other demand led services	(2.000)	0.000	0.000	(2.000)	0.000	(2.000)
Abortive Capital Cost Reserve	To provide for the cost of feasibility studies that do not progress into capital schemes	(1.500)	0.000	0.027	(1.473)	0.000	(1.473)
Collection Fund Smoothing Reserve	To provide for the potential downturn in the economy that would reduce the level of Business Rates/Council Tax	(6.196)	0.000	3.300	(2.896)	0.000	(2.896)
Better Care Fund Reserve	To meet costs relating to the Hospital Discharge Scheme	(1.032)	(0.788)	0.000	(1.820)	0.000	(1.820)
Joint Legal Team Reserve	To fund JLT specific invest to save projects	(0.126)	0.000	0.000	(0.126)	0.000	(0.126)
Financial Resilience	To provide the Council with financial resilience in respect of unforeseen events	(2.530)	(5.691)	0.000	(8.221)	0.000	(8.221)
DEGNS Strategic Reserve	To address acknowledged strategic challenges facing the Directorate including in the areas of capital programme delivery, driving forward major regeneration projects and securing funding, supporting Reading's economic recovery from the impacts of the pandemic and delivery of Directorate savings plans.	(0.184)	0.000	0.030	(0.154)	0.000	(0.154)
Archives	Archives partnership funds	(0.031)	0.000	0.000	(0.031)	0.000	(0.031)
Energy	To mitigate against fluctuations in energy prices	(0.791)	(0.496)	0.000	(1.287)	0.000	(1.287)
Procurement Training	To fund one-off trainingto support the new Hub and Spoke Operating Model	(0.050)	0.000	0.050	0.000	0.000	0.000
Ministry of Justice	To fund overpaid liability orders	(0.119)	0.000	0.000	(0.119)	0.000	(0.119)
Health & Safety	To fund a temporary Risk Management Officer	0.000	0.000	0.000	0.000	(0.071)	(0.071)
Project Management Office	To fund temporary support to the Project Management Office	0.000	0.000	0.000	0.000	(0.210)	(0.210)

		Balance 01/04/2022	2022/23	2022/23	Current Balance	Proposals per 2022/23 Outturn	Balance 31/03/2023
			Transfers In	Transfers Out			
		£m	£m	£m	£m	£m	£m
Hardship Fund	To fund hardship relief	0.000	0.000	0.000	0.000	(0.500)	(0.500)
Total Earmarked Reserves - General Fund		(80.027)	(19.806)	35.774	(64.059)	(4.191)	(68.250)
Total Revenue Reserves		(87.527)	(20.527)	35.774	(72.280)	(4.191)	(76.471)

		Balance 01/04/2022	2022/23	2022/23	Current Balance	Proposals per 2022/23 Outturn	Balance 31/03/2023
			Transfers In	Transfers Out			
		£m	£m	£m	£m	£m	£m
Other Ringfenced Reserves							
Schools Reserves							
School Balances	Schools are able to carry forward any underspends on their budgets	(3.019)	1.915	(0.381)	(1.485)	0.000	(1.485)
Dedicated Schools Grant	This is in deficit due to overspends in high needs block. This is planned to be repaid by 31st March 2024	2.164	1.299	0.000	3.463	0.000	3.463
Total Schools Reserves		(0.855)	3.214	(0.381)	1.978	0.000	1.978
Housing Revenue Account (HRA) Reserves							
Housing Revenue Account	Represents the balance carried forward on these accounts	(41.148)	0.000	3.158	(37.990)	0.000	(37.990)
North Whitley PFI	To provide a smoothing reserve for PFI payments	(10.147)	(0.073)	0.000	(10.220)	0.000	(10.220)
Total Housing Revenue Account (HRA) Reserves		(51.295)	(0.073)	3.158	(48.210)	0.000	(48.210)
Total Revenue Reserves (including Other Ringfenced Reserves & HRA)		(139.676)	(17.386)	38.551	(118.511)	(4.191)	(122.702)

Appendix 7 - Corporate Plan Monitoring for Quarter 4 2022/23 (Measures & Projects)



Corporate Plan KPI's - Foundations - Annual

Status	DOT	Title	Frequency	Target	Unit	Mar-22	Mar-23	Comments
▲		Resident Survey: Agreement that the Council provides value for money	Annual	50	%		47.00	
●		Resident Survey: Satisfaction with the way the Council runs things overall	Annual	60	%		63.00	Targets for 23/24 and 24/25 amended as part of KPI review for 23/24

Corporate Plan KPI's - Foundations - Quarterly

Status	DOT	Title	Frequency	Target	Unit	Q3	Q4	Comments
▲	↑	Customer satisfaction in the Customer Fulfilment Centre	Quarterly	89	%	73.50	81.40	<ul style="list-style-type: none"> - Customers have experienced excessive wait times for calls to be answered. - Acute challenges with our housing repairs service means CFC colleagues are on hold for lengthy periods to speak to the back office. - The CFC has experienced a higher than usual rate of attrition. - A vibrant job market has meant the service has been unable to attract people to apply for roles in CFC. The current job description has been reviewed with a view to make the role and pay more competitive and attractive.
▲	↑	Percentage of responses to the public on Freedom of Information Act requests made within 20 days	Quarterly	90	%	77.20	81.40	<p>Q4 shows further improvement with the response rate, we have shared this data with the ICO during our last meeting with them, they are satisfied with the progress made so far and has formally closed the case with no further action. We have however agreed to share data by email.</p> <p>Weekly drop-in sessions are being run for FOI responders and ADs, however the attendance is very low and we will review this at the end of June.</p> <p>A new escalation procedure at day 11 to ADs and EDs is now in place, data on the effect of this will be available at the end of Q1.</p>
●	↑	Deliver the Medium Term Financial Strategy	Quarterly	149.9	£ million	146.68	145.55	
●	↑	Enquiries solved at first point of contact in the Customer Fulfilment Centre	Quarterly	87	%	89.00	93.01	
●	↓	Number of invoices paid within 30 days of invoice date	Quarterly	80	%	88.94	84.49	The number of invoices paid within 30 days during 2022-23 has included a significant number of £150 energy rebate payments which had the effect of improving the KPI in Q1 when most of the rebates were paid, and to a lesser degree in Q2.
●	↑	Percentage of responses to complaints within agreed timescales	Quarterly	70	%	64.50	71.70	Q4 shows improvement in responding to complaints over timescales compared to Q3 when 65.4% were responded to in time. However, the total number of complaints responded to in Q4 was 107, compared to 138 in Q3.



Corporate Plan KPI's - Foundations - Monthly

Status	DOT	Title	Frequency	Target	Unit	Feb-23	Mar-23	Comments
●	↑	Number of self- service transactions via My Account self- service	Monthly	23333	No.	18,429.00	26,507.00	<p>Figures for Jul, Aug, Sep, Oct, Nov, Dec 2022 corrected to reflect actual results.</p> <p>Actual Previously reported Jul-22 29746 27600 Aug-22 22589 20800 Sep-22 24026 19800 Oct-22 22012 17000 Nov-22 21073 16000 Dec-22 15199 11000</p> <p>We have been focusing on the calculation methodology used by Google Analytics to make the published figure as accurate as possible. Changes we have made in this quarter have, we believe, reduced the amount of double counted transactions, and now more accurately reports the current level of customer engagement online. We will continue to review this methodology and provide a further update at the next corporate review date. The target figure was based on current (at the time) reported figures, it is likely this will need reviewing after a further period of reporting (and confirmation that the changes to the process have resulted in more accurate figures).</p>



Corporate Plan KPI's - Healthy Environment - Annual

Status	DOT	Title	Frequency	Target	Unit	Mar-22	Mar-23	Comments
🔴		Hectares turned over to re-wilding	Annual	2.5	ha		2.00	Target not quite achieved due to the wet winter which has meant that the full area couldn't be prepared. This will be added to the target for 2023/24.
🟡		Active travel trips to/from the town centre (walking and cycling) (mode share)	Annual	35	%		34.90	Targets amended as part of KPI review for 23/24
🟡		Number of fixed penalty notices for flytipping	Annual	240	No.		235.00	Measure has been changed from no of prosecutions, as published in the Corporate Plan, as the legal process for successful prosecution has been under review this year
🟢		Air Quality (micrograms per meter cubed of Nitrogen Dioxide)	Annual	34	µg/m3		32.00	This is the annual average across our monitoring sites for 2022
🟢		Car trips to/from the town centre (mode share)	Annual	39	%		24.50	Targets for 22/23 and 23/24 amended as part of KPI review for 23/24
🟢	Page 227	Carbon footprint (Reading Borough Council) - total carbon emissions	Annual	6394	t		5,675.00	Figure and target is 2021/22 business year as there is a data lag. Figure quoted in tonnes CO2 per annum as gross corporate emissions reported in the Council's Green House Gas report 2021/22.
🟢		Carbon footprint (Reading) - reduction in carbon emissions	Annual	49.3	t		55.36	Figure quoted in % reduction against 2005 baseline 448kT (000's tonnes) vs 1003.5 kT in 2005. From data reported by Government for 2020 calendar year. There is a 1.5 year data reporting lag with figures typically published in June each year.
🟢		Kilometres of roads and pavements resurfaced	Annual	40	km	90.00	50.00	This should be an annual indicator as it is not practical to provide on a monthly basis and dependant on when tenders are let and works can take place. We have resurfaced 50km of roadway to date up to end of March 2023.
🟢		Public transport trips to/from the town centre (mode share)	Annual	35	%		40.60	Targets for 22/23 and 23/24 amended as part of KPI review for 23/24
🟢		Remediation of tall buildings with cladding	Annual	100	%		180.00	22/23 in total 9 buildings were completed
🟢		Trees planted on Council owned property	Annual	14	No. (k)		387.00	387 in total - 300 new trees and 87 replacement for those that had either died or were felled during the last year.



Corporate Plan KPI's - Healthy Environment - Quarterly

Status	DOT	Title	Frequency	Target	Unit	Q3	Q4	Comments
▲	▲	Food waste recycled (percentage of household waste)	Quarterly	14	%	12.90	13.30	Food waste (from schools and the kerbside) represented 12.7% of household waste in 2022/23. This compares to 13.5% last year. Lower food waste tonnes compared to the same period last year could be the result of residents having become more aware of the amount of food they were wasting. If lower tonnages are the result of waste reduction, this is a positive outcome. Increased financial pressures may also be causing residents to waste less food. However we are also aware that some food waste is present in the residual waste, and we need to capture this for recycling. Officers will continue to monitor the tonnages.
▲	▼	Percentage of actionable (40mm depth) potholes repaired within 28 days	Quarterly	99	%	99.00	96.00	There was an issue with the WDM system not exporting the data - this has been resolved but caused a small amount to go out of date
▲	▲	Percentage total household waste recycled	Quarterly	51	%	48.50	48.60	The provisional recycling rate for 2022/23 is 49.5%. This compares to 51.5% last year. Total household tonnes fell as the economic situation changed, but recyclable tonnages fell more than those collected as non-recycled. The biggest decline has been in food waste. Some tonnages may be starting to recover and officers are continuing to monitor the data.
●	▲	Percentage of Houses of Multiple Occupation that are licensed	Quarterly	42	%	42.50	43.20	

Corporate Plan KPI's - Inclusive Economy - Annual

Status	DOT	Title	Frequency	Target	Unit	Mar-22	Mar-23	Comments
●	↑	BAME employees in Council's workforce	Annual	15	%	15.15	17.00	Targets for 23/24 and 24/25 amended as part of KPI review for 23/24
●	↑	Borough bus usage	Annual	14	No. (m)	11.00	14,100,000.00	Targets amended as part of KPI review for 23/24
●		Borough park & ride usage	Annual	100	No. (k)		300,000.00	Targets amended as part of KPI review for 23/24
●	↑	Borough rail usage	Annual	9	No. (m)	9.00	8,820,000.00	Targets amended as part of KPI review for 23/24
●		Ethnicity pay gap	Annual	3.5	%		1.76	
●		Gender pay gap	Annual	1.75	%		0.13	
◆		Key stage 2 results - reducing the gap in attainment between advantaged and disadvantaged pupils	Annual	25	%		28.00	The Annual School Standards report being presented to ACE Committee on 12 July sets out current actions being taken and recommended next steps in the coming academic year to reduce the attainment gaps for disadvantaged pupils.
●		Key stage 4 results – reducing the gap in attainment	Annual	20	Number		11.70	
●		New Directions College Ofsted rating	Annual	0	Standard		100.00	New Directions College remains a "Good" provider and was last inspected in July 2019.
▲		New Directions College qualification achievement rates	Annual	95.7	%		91.40	Final Achievement rates are published by the Department of Education every March for the previous academic year. The data for March 23 recorded above is the actual achievement rate for the academic year 21- 22. This rate is above national average.
●		Number of secondary school fixed term suspensions	Annual	8	%		7.70	Reading schools, in common with most schools in England, have seen a sharp rise in emotional and behavioural issues from pupils following the pandemic period. Many young people continue to experience the effects of lack of socialisation and isolation following the pandemic period. Whilst Reading schools are working successfully with BfC to minimise the impact for young people of permanent exclusions, suspensions have seen a significant increase as schools seek to maintain children attending school, but developing healthy and respectful behaviours in class. Targeted work with schools with higher rates of suspensions are planned for the autumn term, to further develop our relational practice and trauma informed work with schools, which is expected to results in a reduced rate of suspensions in Reading secondary schools next academic year.
		Percentage of Council contracts which include social value	Annual		%			Not yet available
▲		Percentage of residents who select 'reduction in crime' as a top 3 priority for the council to address	Annual	25	%		27.00	



Corporate Plan KPI's - Inclusive Economy - Quarterly

Status	DOT	Title	Frequency	Target	Unit	Q3	Q4	Comments
●	⇒	Number of school places for children and young people with Special educational need and disability (SEND)	Quarterly	402	No.	453.00	453.00	No new places due to come online until April 2023
●	⇒	Percentage of Care Leavers who are not in education, employed or training for work (NEET)	Quarterly	35	%	29.00	29.00	
●	↑	Cumulative reduction in crime (based on Thames Valley Police crime reporting figures)	Quarterly	5	%	27.00		Data adjusted by Data Provider, Iquanta, following verification process. This now reflect a significant increase in crime reports against the 2020/21 base line for Q1. Narrative to be reviewed by the Community Safety Partnership Reducing Crime Delivery Group when it starts. March Data has not yet been released, therefore Q 4 cannot be updated.
●	↑	Participation at Council cultural venues	Quarterly	300	No.(k)/yr	300.82	402,023.00	August closure reduces participation for Q2. Data is cumulative.



Corporate Plan KPI's - Inclusive Economy - Monthly

Status	DOT	Title	Frequency	Target	Unit	Feb-23	Mar-23	Comments
⬇️	⬇️	Percentage of people with a learning disability in paid employment	Monthly	5	%	4.52	4.48	This KPI remains a high priority in the Transition and SEND groups, proactive work is being undertaken with the Elevate and New Direction College to target residents with LD.
⬆️	⬆️	Number of visits to our libraries	Monthly	0	No.(k)/yr	221.00	241.00	Tracking to target, Data is cumulative to date. fault on door counter so some estimations included

Corporate Plan KPI's - Thriving Communities - Annual

Status	DOT	Title	Frequency	Target	Unit	Mar-22	Mar-23	Comments
⬮		Number of affordable homes delivered	Annual	169	No.	178.00	135.00	Affordable housing delivery is lower than 2021-22 (178) but significantly higher than 2019-20 (80) and 2020-21 (54). The amount of affordable housing delivered in a year is heavily dependent on when a limited number of large housing schemes are delivered, and can fluctuate significantly from year to year. In addition, there were relatively low levels of local authority new build affordable housing completed in 2022-23 as some of the larger projects (e.g. Wensley Road, North Street and Arthur Hill) remain under construction. There are continued challenges with securing fully policy-compliant affordable housing on private sites for reasons of viability, which are likely to continue to impact on meeting affordable housing needs. With around 280 affordable homes currently under construction, there is expected to be increased provision in 2023-24. Baseline amended as part of KPI review for 23/24
Page 232		Number of people sleeping rough	Annual	8	No.		36.00	Various factors since Covid and economic and socio-economic circumstances have influenced an increase and not achieving this target. A new National Rough Sleeping Strategy was released in 2022 and Reading's Rough Sleeping Strategy/Action Plan is due for revision in 2023, alongside additional funding streams and interventions to tackle the issue in Reading. These are being implemented between 2022 – 2025 aiming to reduce and sustain a reduction in this figure. 23/24 and 24/25 targets amended as part of KPI review for 23/24.
		Number of the above that are 3 or more bed family homes	Annual	117	No.		128.00	Baseline amended as part of KPI review for 23/24
●		Percentage of adults physically active more than 150 minutes per week	Annual		%	66.10		Figure not yet available; was expected in April
●		Total (net) completed additional dwellings (new build and conversions)	Annual	689	No.	850.00	888.00	Baseline amended as part of KPI review for 23/24



Corporate Plan KPI's - Thriving Communities - Quarterly

Status	DOT	Title	Frequency	Target	Unit	Q3	Q4	Comments
●	↓	Youth re-offending rate	Quarterly	30	%	27.90	28.10	The latest data is for the period Apr 20 to Mar 2021.
●	↑	Number of carers supported to maintain their caring role	Quarterly	120	No.	144.00	179.00	With the new commissioned service the number of carers assessment continues to increase.
●	↑	Number of NHS Health Checks delivered to residents	Quarterly	150	No. per qtr	521.00	1,204.00	GPs completed 1,124 checks; Royal Berkshire Hospital completed 80 Checks. A combination of these factors may account for the increase this quarter; practices continue to return to pre-pandemic levels of activity, and we've also been doing a lot of work behind the scenes to influence GP clinical leads. Targets amended as part of KPI review for 23/24
●	↑	Percentage of children in care living more than 20 miles from Reading	Quarterly	28	%	27.00	26.00	Proactive action taken to address the challenge of local place sufficiency (a challenge that Local Authorities across England are experiencing) is beginning to evidence impact, with more children being initially placed in or returning to placements in Reading. A reduction in the overall number of children coming into care means that the number of children who became looked after some years ago and are settled with long term carers beyond 20 miles continues to have a high proportionate impact on this indicator.
●	↑	Proportion of stop smoking service users, who have set a date to stop smoking and are still not smoking 4 weeks later, that are routine and manual workers	Quarterly	40	% per qtr	32.00	40.00	Due to the lag in stop smoking service data, the previous quarter's data (Q3 - 32%) is the most robust. Q4 data is still provisional. The improvement has been largely due to the service being able to access more sites and setting up more drop-in clinics in targeted communities.



Corporate Plan KPI's - Thriving Communities - Monthly

Status	DOT	Title	Frequency	Target	Unit	Feb-23	Mar-23	Comments
🔴	📈	Percentage of service users in receipt of Adult Social Care Direct Payments	Monthly	24	%	21.21	21.34	A Direct Payment set-up function has been established (one DP Officer post) to encourage usage of Direct Payments and support staff with the process.
🟢	📈	Number of households prevented from becoming homeless	Monthly	450	No/yr	468.00	525.00	Data is cumulative to date.
🟢	📉	Older People (65+) who were still at home 91 days after discharge from hospital into reablement	Monthly	80	%	90.30	85.30	This winter was particularly high in demand and complexity, however, the service continues to deliver good outcomes.
🟢	📈	Percentage of new contacts to the Advice & Wellbeing hub resulting in a successful outcome not requiring an on-going service	Monthly	80	%	94.00	95.00	Activity in Q4 continues to increase, staff are supporting residents in a proactive manner, signposting residents to voluntary sector and continuing to use a Strength Based Approach
🟢	📈	Percentage of service users supported to live independently in the community	Monthly	74	%	75.00	75.00	Community Based provision remains a priority for Adult Social Care and teams are working with residents and families to remain at home as long as possible

Corporate Plan Projects - Foundations

Project or activity	Q3	Q4	DOT	Q4 22-23 Commentary
Embedding the Hub and Spoke structure	▲	▲	➔	Delivery plan awaiting sign off. Policy paper in train
Implement new finance system with improved business processes	▲	▲	➔	
Implement Social Value Strategy and reporting	▲	▲	➔	Delivery plan awaiting sign off. Policy paper in train
Implementation of new customer platform		●	⬆	The delivery of the Customer and Case Management (CCM) platform continues to progress well. Build and configuration of the Built Environment and Regulatory Services e track for delivery Feb/March 2024. The discovery phase of the Customer element has been completed, and work is now in progress to sequence the build and configuration
Implementation of the Connected Reading Strategy	▲	▲	➔	<p>The Casework and Customer Management project has mobilised and is currently proceeding on track.</p> <p>PwC has been selected as our digital transformation delivery partner and a contract has been signed. The following work packages have mobilised:</p> <ol style="list-style-type: none"> 1) Finance system implementation review 2) Customer Journey Optimisation 3) Adult Social Care System and Process review 4) Adult Social Care Digital Front Door <p>The Housing Digital Presence work package is expected to mobilise in May. Application Rationalisation has been rescheduled to launch in Q3 to avoid overstretch both of the change.</p> <p>We are also scoping a workpackage to put in place a robust corporate Portfolio Management Officer service and toolset. This work includes a review of the overall corporate portfolio including digital transformation. This will affect the overall corporate portfolio including digital transformation.</p> <p>In Q2, we will bring forward a report to Policy Committee rebaselining the overall digital transformation programme, taking account of the results of the work packages designed will finally enable a return to green status.</p> <p>The status of other transformation projects is as follows:</p> <p>Independent Living -Equipment is now live with 11 live installations. However, the target for the pilot was 50 installations and the slow pace of referrals is a serious risk. Target increase pace. Review to be held at end of year to determine whether project should proceed on current plan, be extended or be halted.</p> <p>Digital inclusion - While the PREVENT issues affecting the public WiFi pilot were resolved, our experience with the supplier has been disappointing and we are reviewing options for connectivity, provided under social value arrangements with one of our providers, to all community centres (twelve rather than the six initially envisaged) has been confirmed.</p> <p>SharePoint migration - This project was formally closed in February. Training in SharePoint training remains a focus for our digital L&D function.</p>
Implementation of the Customer Experience Programme	◆	▲	⬆	Refreshed programme and workstreams developed and agreed. Workshop with key senior stakeholders to introduce these and reset the programme has been delivered. Programme & Change and our Digital Transformation and Delivery Partner with first set of prioritised projects agreed. Work now underway to identify, source and secure required resources

Corporate Plan Projects - Healthy Environment

Project or activity	Q3	Q4	DOT	Q4 22-23 Commentary
The allocation of £1.6 million Community Infrastructure Funds and commencement of the approved schemes	▲	▲	→	£1.6 million of Community Infrastructure Levy funds were allocated to 18 local projects in March 2022 by Policy Committee. Work has completed on seven of the preparatory stages or are awaiting the completion of projects previously allocated CIL funds in 2021.
Electrification of fleet	▲	▲	→	A further 1 electric compact sweeper has been added to the fleet. Still awaiting confirmation from Finance on the amount of capital funding to be authorised for Phase 2 of the electric charging infrastructure for RCV's has been placed with installation scheduled for Summer 23.
Deliver and develop the new play hub at Prospect Park.	●	●	→	Cafe lease at final stage with legal. Agreement and hand over expected April.
£9 million investment in resurfacing roads and pavements.	●	●	→	Completed on time and within available budgets
Decarbonisation of the Hexagon theatre through improved heating and lighting.	▲	▲	→	Decision on funding - unsuccessful on this round. scope of works to be reviewed to match budget.
Implementing the Environment Act 2021	▲	▲	→	Deposit Return Scheme latest information received, now awaiting final part of the jigsaw - Consistency of Collections where it has been indicated that it will be re information paper on the overall impact anticipated to RBC's waste collection and disposal services.
New Local Transport Plan (LTP) for Reading	▲	●	↑	Draft LTP being prepared to seek authority to undertake statutory consultation from SEPT Committee in June 2023.
Delivery of Capital Education Property Development Programme	●	●	→	Projects and programme progressing as per the intended timescales
Retaining our position on the 'A' list' for bold leadership on climate change	●	●	→	Reading's 2022 annual submission to CDP was completed in July 2022. In November 2022, following detailed assessment, CDP confirmed that Reading has retained 19 UK local authorities who received this score in 2022.
Climate Emergency Strategy	▲	▲	→	The majority of actions remain green (on track) or amber (progressing but at risk of not being delivered by the target date). Further details are included in the Annual Report to SEPT Committee in November 2022 (see https://readingcan.org.uk/wp-content/uploads/2022/12/Reading-Climate-Emergency-Strategy-Annual-Report-2021-22)
Improvements to play areas and park environments	▲	▲	→	There are 21 projects being carried out within our Parks and Open Spaces upgrading children's play grounds and outdoor gyms. Of these 4 are red for this financial year due to the unavailability of materials and equipment. There are 2 additional projects undertaken – Repair to the external walls and vaults at Caversham Court (Red) and repairs to the 'Bandstand' in the Forbury (Green)



Corporate Plan Projects - Inclusive Economy

Project or activity	Q3	Q4	DOT	Q4 22-23 Commentary
Action plan in place to improve community engagement mechanisms across diverse communities	●	●	→	
Actions arising from the Powered by People strategy	●	●	→	The programme for skills and employment approved by Policy Committee on Dec 15 2022 began roll out in Q4. Outreach sessions for hard to reach residents have taken place in Whitley, Broad St Mall and Caversham. Signposting support has Rotary Club's self employment courses, 25 referred to working for yourself workshops in Whitley and Oxford Rod. A specific translation supported course was run for Hong Kong emigres, and similar work is in discussion for Afghan residents. D work is also shaping up around low carbon and screen production skills, working with a variety of partners.
Adoption of a new Town Centre Strategy	▲	▲	→	A new officer has been appointed who will commence work on the review of the strategy from mid June. Draft strategy to be readied for Autumn 2023.
Bring forward the Minster Quarter site for development	●	●	→	ITT stage of procurement for development partner has closed. Project Team are working on negotiation to further improve offers and refine proposals. Negotiation period will take up to 3 months after which a preferred bidder will be selected
Complete and open Green Park Station	▲	▲	→	Approval process being undertaken with the ORR, DfT, Network Rail and GWR, station opening being organised for late May 2023.
Complete Reading West Station upgrade	▲	▲	→	Construction works proceeding well on-site by GWR's contractor with completion due late spring.
Continued delivery of South Reading Mass Rapid Transport	●	●	→	Phase 5 design work being undertaken to be delivered with BSIP grant funding.
Deliver our Reducing Inequality Strategy through a place based approach to improving skills education and training.	●	●	→	Tackling Inequality Strategy agreed by Policy Committee on 23rd Jan 2023. Implementation and delivery has now commenced.
Implement and subsequently expand a new apprenticeship and work experience mentoring scheme	●	●	→	
Participatory research on the lived experience of diverse communities in the Borough	●	●	→	Completed
Review all community buildings for digital connectivity and access to computer equipment	●	●	→	
Shape the 3 year delivery plan 2022-25 for Reading's Culture and Heritage Strategy	●	●	→	Report has been to HNL and approach approved. Progress against plan to be provided in Q1 24/25.
Work in partnership to further the community and Council ambitions for Reading Gaol	●	●	→	
Create a workforce that is fully representative of the population we serve	◆	▲	↑	
Deliver the High Street Heritage Action Zones project objectives.	▲	●	↑	The HSHAZ programme has managed to spent all the HE budget and we carried forward RBC unspent to the final year of the programme (year 4). The conseravtion works on buildings and shop fronts within the Oxford Road area is progressin very successfull.
Develop adult skills, employment support and implement training programmes	▲	●	↑	This quarter we have introduced a new Essentail Digital Skills programme at Level 1, all our learners who attend the prevous Entry Leve had progressed resulting in an additional class. We also ran a successful SWAP program in Hospitality with the De Vere Hotel, and the learners received a very positive feedback from the Employer. A second group of Supported learners have successefully completed their first term with us and will progress to the next term in April. In addition, we have secured a new Employer (Biscuit Factory) to offer work experience to our most experience official launch in March, which enjoyed great media interest. Our learners and teacher were interviewed and broadcast on BBC South, cementing the success of our partnership.
Employment and Skills programme delivered via REDA	▲	●	↑	A total of 18 apprenticeships, 416 local jobs, 35 work experience opportunities and outreach support to 126 students have taken place during 2022/23 thanks to ESPs at Station Hill, Greyfriars Church, Collards, Domain and others. ESPs have developed new relationships between contractors and the University, the College, several local schools and the Education Business Partnership. REDA-commissioned research on screen skills and low carbon skills, using S106 funding: work is being developed with sector employers through the Skills for Growth group. The Low Carbon Skills launch in March involved dozens of local empl "Green Skills" that will be developed locally.

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Corporate Plan Projects - Thriving Communities

Project or activity	Q3	Q4	DOT	Q4 22-23 Commentary
Celebrate Reading's diverse arts, culture and heritage	●	●	→	
Commissioning a new smoking cessation service	●	●	→	The commissioning has been completed and the new service commenced on 1 October 2021
Deliver 300 new Council homes	●	●	→	
Deliver key improvements to the library service, including plans for the Central Library.	●	●	→	
Deliver zero carbon initiatives within Council homes	●	●	→	
Delivery of a new Community Safety Plan with a focus on tackling serious violence and improving community engagement	●	●	→	CSP Delivery mechanisms have been approved by the Community Safety Partnership, with 7 delivery groups being introduced, each chaired by a lead from one of the CSP partners July 2023.
Delivery of the small grants funding	●	●	→	Round 1 22/23 interim reports received. Final reports due in August 2023. Round 2 22/23 interim reports due July 2023.
Develop social inclusion community development plans for the most deprived areas	●	●	→	Completed
Development of a Personal Assistant Market to enable people to live independently at home	●	●	→	One Personal Assistant (PA) project officer post has been extended until November 2023, supporting the newly set up Direct Payment set-up function. The percentage of eligible adults in Reading with Direct Payments employing a PA increased to 39% at the end of March 2023. This exceeded the 2022-23 target of 32%. End of Project report will be presented to Transformation Programme Board for approval in May 2023. PA monitoring will become BAU.
Development of an accommodation pathway for vulnerable working age adults	●	●	→	Work to understand the supported living market is underway and it is anticipated that a market analysis will be completed by the end of Q1 2023/24.
Implement plans to commemorate the Forbury Gardens attacks and install a permanent memorial in the Gardens	●	●	→	
Implementation of the VCS action plan to build our relationship with the VCS and increase capacity within the sector.	●	●	→	Engagement with VCS on Draft VCS Compact is taking place. VCS action plan activities being delivered through collaborative approach with VCS.
Recommissioning of Closing the Gap	●	●	→	
Review and expansion of the Community Reablement Team to maximise peoples independence	◆	◆	→	This transformation project has paused whilst an operation improvement plan is completed by the service. The project will be reviewed for further action in Spring 2023.
Supporting residents to recover from the devastating fire at Rowe Court, helping them to find alternative accommodation and welfare support	●	●	→	
Work with our partners and GLL new leisure provider to increase rates of physical activity and attendance at borough leisure centres	●	●	→	The use of leisure facilities continues to increase month on month with combined visitor numbers reaching 70,000 per month. Trends suggest this is likely to increase beyond this 14,000 and it's anticipated this number will grow following the upcoming and various improvement works. There are currently 10,000 children per month learning to swim across the borough. Officers and GLL have agreed the new Public Health related targets. These are due to be rolled out from May 2023. GLL's Healthwise programme has been incorporated into the Public Health strategy and will come together on a monthly basis from May 2023.
Continue to deliver investment in the borough's leisure facilities, including improvements at South Reading Leisure Centre and progress on the new Rivermead Leisure Centre.	▲	●	↑	Palmer Park has had a fantastic first quarter since opening in December 2022, attracting over 51,000 visitors and 2,000 new members. Both South Reading Leisure Centre and Meadway have made significant improvements to their swimming pool changing rooms. Significant changing room upgrades are scheduled at both South Reading and Meadway from Summer 2023 onwards. The Rivermead Leisure Centre will also be subject to significant improvements costing approx. £400k. Much progress was made between RBC and GLL this quarter regarding the Rivermead delays and agreed way forward. All dry side facilities in the new Rivermead will open to the public in Summer 2023.

APPENDIX 8 - CORPORATE PLAN MEASURES SHOWING SIGNIFICANT CHANGE IN PERFORMANCE

Q4/MARCH 2023

Measures showing significant positive change since previous period

Customer satisfaction in Customer Fulfilment Centre

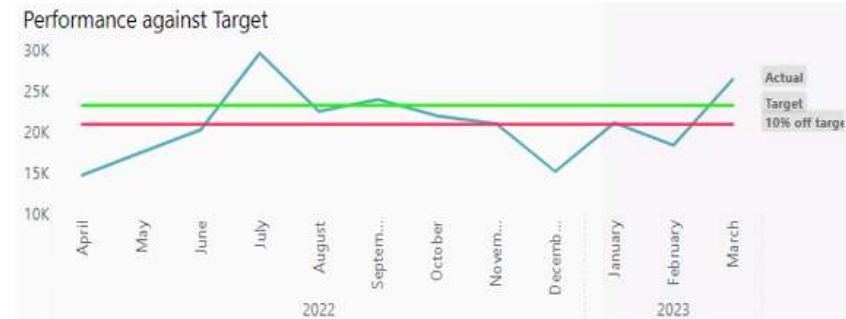
- Customers have experienced excessive wait times for calls to be answered.
- Acute challenges with our housing repairs service means CFC colleagues are on hold for lengthy periods to speak to the back office.
- The CFC has experienced a higher than usual rate of attrition.
- A vibrant job market has meant the service has been unable to attract people to apply for roles in CFC. The current job description has been reviewed with a view to make the role and pay more competitive and attractive.



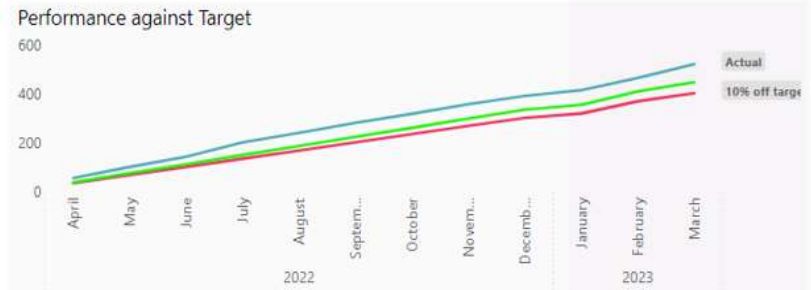
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Number of self- service transactions via My Account self-service

- Figures for Jul, Aug, Sep, Oct, Nov, Dec 2022 corrected to reflect actual results.



Number of households prevented from becoming homeless



Number of NHS Health Checks delivered to residents

- GPs completed 1,124 checks; Royal Berkshire Hospital completed 80 Checks.
- A combination of these factors may account for the increase this quarter; practices continue to return to pre-pandemic levels of activity, and we've also been doing a lot of work behind the scenes to influence GP clinical leads.



Proportion of stop smoking service users

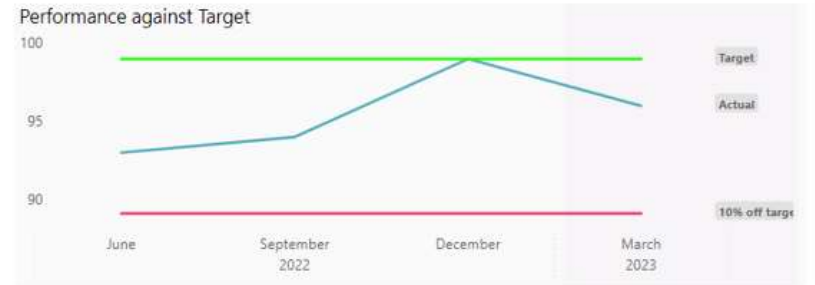
- Q4 data is still provisional. The improvement has been largely due to the service being able to access more sites and setting up more drop-in clinics in targeted communities.



Measures showing significant negative change since previous period

Percentage of actionable (40mm depth) potholes repaired within 28 days

There was an issue with the Asset Management System (WDM) not exporting the data - this has been resolved but caused a small amount to go out of date



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By virtue of paragraph(s) 3 of Part 1 of Schedule 12A
of the Local Government Act 1972.

Document is Restricted

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